

AS TABLED IN THE HOUSE OF ASSEMBLY

A BILL

entitled

HEALTH INSURANCE AMENDMENT (NO. 2) ACT 2018

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WHEREAS it is expedient to amend the Health Insurance Act 1970, the Health Insurance (FutureCare Plan) (Additional Benefits) Order 2009, the Health Insurance (Health Insurance Plan) (Additional Benefits) Order 1988, the Health Insurance (Mutual Re-Insurance Fund) (Prescribed Sum) Order 2014, and the Health Insurance (Standard Health Benefit) Regulations 1971;

Be it enacted by The Queen's Most Excellent Majesty, by and with the advice and consent of the Senate and the House of Assembly of Bermuda, and by the authority of the same, as follows:

Citation

1 This Act may be cited as the Health Insurance Amendment (No. 2) Act 2018.

Amends Health Insurance Act 1970

2 (1) Section 2(1) of the Health Insurance Act 1970 is amended—

(a) in paragraph (a), by inserting “, and the use of dialysis facilities,” after “received”;

(b) in paragraph (b), by inserting “, and the use of dialysis facilities,” after “received”;

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- (c) in paragraph (bb), by inserting “, and the use of dialysis facilities,” after “received”;
 - (d) in paragraph (c), by inserting “, including the use of dialysis facilities,” after “care provider”); and
 - (e) in paragraph (e), by inserting “and the use of dialysis facilities” after “standard health benefit”.
- (2) Section 3A of the Health Insurance Act 1970 is amended—
- (a) in subsection (2E)—
 - (i) by inserting “, in respect of an insured person” after “Mutual Re-insurance Fund”;
 - (ii) in paragraph (a), by deleting “all claims” and substituting “subject to subsections (2F) and (2G), all claims”; and
 - (iii) in paragraph (b), by deleting “\$100,000” and substituting “\$150,000”; and
 - (b) by inserting after subsection (2E)—

“(2F) Subsection (2E)(a) does not apply to claims for the use of dialysis facilities where, and to the extent that, such claims are covered under section 2(1).

(2G) A person’s cover for the use by him of dialysis facilities, covered under subsection (2E)(a) and section 2(1), shall be limited to an amount not exceeding \$12,532 per month for haemodialysis treatment unless additional sessions are determined by the Committee to be medically necessary.”.

Amends Health Insurance (FutureCare Plan) (Additional Benefits) Order 2009

3 The Schedule to the Health Insurance (FutureCare Plan) (Additional Benefits) Order 2009 is amended—

- (a) in paragraph 1(g), by deleting “, with referral required from a general practitioner physician,”;
- (b) by revoking paragraph 2 and substituting—
 - “ 2. Prescription drugs approved by the Committee: 100% of the drugs’ (whether brand name or generic) cost to the beneficiary, to an amount not exceeding \$2,000 per policy year. ”;
- (c) by revoking paragraph 6 and substituting—
 - “ 6. Contribution towards the cost of a kidney transplant to an amount not exceeding \$50,000. ”;
- (d) in paragraph 7—
 - (i) by deleting “and” at the end of subparagraph (b);

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- (ii) by deleting the full stop at the end of subparagraph (c) and substituting “and;”; and
- (iii) by inserting after subparagraph (c)—
 - “ (d) fluoride, polishing and root planing at the approved rate. ”;
- (e) in paragraph 9B—
 - (i) in subparagraph (1)(a), by deleting “to an amount not exceeding \$15 per hour for a maximum of 40 hours per week” and substituting “in an amount of \$15 per hour, but to an amount not exceeding \$2,610 per month on a prorated basis”;
 - (ii) in subparagraph (1)(b), by deleting “to an amount not exceeding \$25 per hour for a maximum of 14 hours per week” and substituting “in an amount of \$25 per hour, but to an amount not exceeding \$1,525 per month on a prorated basis”;
 - (iii) in subparagraph (1)(d), by deleting “to an amount not exceeding \$200 per week” and substituting “to an amount not exceeding \$867 per month on a prorated basis”; and
 - (iv) by revoking subparagraph (4); and
- (f) in paragraph 9C(1), by deleting “at a rate of 80% of the cost of each session,”.

Amends Health Insurance (Health Insurance Plan) (Additional Benefits) Order 1988
4 The Schedule to the Health Insurance (Health Insurance Plan) (Additional Benefits)
Order 1988 is amended—

- (a) by revoking paragraph 12 and substituting—
 - “ 12. The following benefits, at rates that have been approved by the Committee—
 - (a) Basic dental care, including endodontia, at the approved rate;
 - (b) Periodontia, at 50% of the approved rate to an amount not exceeding \$1,500 per policy year;
 - (c) Restorations (prosthodontia), at 80% of the approved rate to an amount not exceeding \$3,000 per policy year; and
 - (d) fluoride, polishing and root planing at the approved rate. ”;
- (b) in paragraph 13A—
 - (i) in subparagraph (1)(a), by deleting “to an amount not exceeding \$15 per hour for a maximum of 40 hours per week” and substituting “in an amount of \$15 per hour, but to an amount not exceeding \$2,610 per month on a prorated basis”;

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- (ii) in subparagraph (1)(b), by deleting “to an amount not exceeding \$25 per hour for a maximum of 14 hours per week” and substituting “in an amount of \$25 per hour, but to an amount not exceeding \$1,525 per month on a prorated basis”;
 - (iii) in subparagraph (1)(d), by deleting “to an amount not exceeding \$200 per week” and substituting “to an amount not exceeding \$867 per month on a prorated basis”; and
 - (iv) by revoking subparagraph (4); and
- (c) in paragraph 13B(1), by deleting “at a rate of 80% of the cost of each session,”.

Amends Health Insurance (Mutual Re-Insurance Fund) (Prescribed Sum) Order 2014
5 Paragraph 2 of the Health Insurance (Mutual Re-Insurance Fund) (Prescribed Sum)
Order 2014 is amended—

- (a) in subparagraph (a), by deleting “\$48.03” and substituting “\$50.35”; and
- (b) in subparagraph (c), by deleting “\$1.09” and substituting “\$0.55”.

Amends Health Insurance (Standard Health Benefit) Regulations 1971

6 The Health Insurance (Standard Health Benefit) Regulations 1971 are amended—

- (a) in regulation 9 by—
 - (i) deleting “\$334.00” and substituting “\$355.31”;
 - (ii) deleting “\$77.08” and substituting “\$81.99”;
 - (iii) deleting “\$91.57” and substituting “\$101.97”; and
 - (iv) deleting “\$21.13” and substituting “\$23.53”;
- (b) in regulation 10 by—
 - (i) deleting “\$1,137.52” and substituting “\$1,227.53”;
 - (ii) deleting “\$262.50” and substituting “\$283.28”;
 - (iii) deleting “\$167.80” and substituting “\$214.17”; and
 - (iv) deleting “\$38.72” and substituting “\$49.42”;
- (c) in regulation 11—
 - (i) in paragraph (1)(a)(i), by deleting “\$167.00” and substituting “\$177.66”;
 - (ii) in paragraph (1)(a)(ii), by deleting “\$38.54” and substituting “\$41.00”;
 - (iii) in paragraph (1)(b)(i), by deleting “\$568.76” and substituting “\$613.77”;
and
 - (iv) in paragraph (1)(b)(ii), by deleting “\$131.25” and substituting
“\$141.64”; and

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- (d) in regulation 12—
 - (i) in paragraph (1)(a), by deleting “\$38.54” and substituting “\$41.00”; and
 - (ii) in paragraph (1)(b), by deleting “\$131.25” and substituting “\$141.64”.

Commencement

7 This Act shall come into operation on 1 July 2018.

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EXPLANATORY MEMORANDUM

This Bill seeks to amend the Health Insurance Act 1970, the Health Insurance (FutureCare Plan) (Additional Benefits) Order 2009, the Health Insurance (Health Insurance Plan) (Additional Benefits) Order 1988, the Health Insurance (Mutual Re-Insurance Fund) (Prescribed Sum) Order 2014, and the Health Insurance (Standard Health Benefit) Regulations 1971.

Clause 1 is self-explanatory.

Clause 2 amends section 2 (Subsidy for certain persons) and section 3A (Mutual Re-insurance Fund) of the Health Insurance Act 1970.

Section 2(1) is amended to transfer cover for dialysis treatment from the Mutual Re-insurance Fund in respect of those persons who are already covered for the standard health benefit under that section.

Subsection (2E) of section 3A is amended: (a) to clarify that the Mutual Re-insurance Fund covers dialysis treatment only for persons insured under the Act, (b) to link it to the amendment to section 2(1) by providing that claims for dialysis treatment cover are subject to the newly added subsections (2F) and (2G) (see below), and (c) to increase from \$100,000 to \$150,000 the amount paid out of the Mutual Re-insurance Fund in respect of an insured person towards the cost of a kidney transplant and maintenance drugs.

Subsections (2F) and (2G) are added to section 3A. Subsection (2F) provides that claims for dialysis treatment are not covered under subsection (2E)(a) where, and to the extent that, such claims are covered under section 2(1). Subsection (2G) provides that a person's cover, under subsection (2E)(a) and section 2(1), shall be limited to an amount not exceeding \$12,532 per month for haemodialysis treatment unless additional sessions are determined by the Committee to be medically necessary.

Clause 3 amends the Schedule to the Health Insurance (FutureCare Plan) (Additional Benefits) Order 2009 to broaden and clarify certain benefits.

Clause 4 amends the Schedule to the Health Insurance (Health Insurance Plan) (Additional Benefits) Order 1988 to broaden and clarify certain benefits.

Clause 5 amends the Health Insurance (Mutual Re-Insurance Fund) (Prescribed Sum) Order 2014 to increase the amount paid to the Health Insurance Fund and decrease the amount paid to the Bermuda Health Council.

Clause 6 amends the Health Insurance (Standard Health Benefit) Regulations 1971 to increase the standard premium, including the Mutual Re-insurance Fund component of the standard premium.

Clause 7 is self-explanatory.