



National Health
INSURANCE BOARD

28th June 2022

NHIB's Statement at the MOH Access to Healthcare Press Conference

The National Health Insurance Board was established under the National Health Insurance Ordinance 2009, as a statutory body. NHIB's goal is to facilitate the provision of accessible, affordable, and quality health care services to all its beneficiaries. We would like to use this platform to educate the public on the referral and treatment abroad program and how they work.

Urgent/Non-Urgent Referrals

Urgent referrals are referrals that must be executed within a short period of time usually less than 48 hours, non-urgent referrals or routine referrals are executed over a longer period. As it relates to these urgent referrals it is important for the public to know that:

1. A referral must be sent from the hospital, through the Joint Referral Committee, to NHIB for processing. You must be seen by a doctor at TCI hospital who will then decide whether your case is eligible for urgent referral.
2. The Medical Director reviews the referral and will advise the operations department to proceed.
3. We have an operations team NHIB that checks the eligibility of the beneficiary.
4. Once a beneficiary is eligible, the transfer arrangement begins.
5. Referrals are sent firstly to providers in the region (Jamaica, Dominican Republic and Cayman Islands) for acceptance. If the case cannot be managed within the region, then it is sent to our providers in Colombia.
6. Patient (if able to communicate) or next of kin is contacted and informed that NHIB is in receipt of an overseas referral and what arrangement will be made. The NHIB process is explained during this time.
7. Once a physician and a hospital accept the case, travel arrangement (air ambulance or charter, commercial flight) will begin.





National Health
INSURANCE BOARD

Treatment Abroad Program Challenges and Important Information

We do face a few challenges with the referral service especially when a patient must be flown out of country for special care. One of the major challenges is travel documents. We are asking the public to make sure your documents are up to date as you do not know when you or a loved one that you may have to accompany will face sudden health challenges that require medical attention overseas.

1. NHIB does not pay for travel documents, passport, or visas.
2. Nationalities that require visas to enter another country is responsible for getting their visa, NHIB only assist with medical visas.
3. NHIB provides a subsistence to **assist** with living arrangements and ground transportation. What this means is that we do not cover the cost of your FULL living arrangement while seeking medical treatment abroad. What we do is provide you with a stipend that should assist with your day-to-day expenses.
4. Medical bills for health procedures abroad are 100% covered by the NHIB (subject to the limitations included in NHI (Benefit) Regulations Section 6(3)). This means that when you travel to get medical attention under the Treatment Abroad Program, you do not receive a bill. Your medical expense is fully covered (see above).
5. Work Permit holders are reminded that work permits are to be renewed three months prior to expiry. Beneficiaries with an expired work permit cannot be transferred in the event of an emergency.
6. Some beneficiaries are only entitled to receive on island care.
7. As it relates to Air Ambulance - This is a service which we source from providers overseas. The closest air ambulance company is in the Dominican Republic, others are based within the United States. Air ambulance confirms their ability to transfer based on availability of aircrafts and medical personnel, the nature of the case, and their capacity to transfer a patient safely.

Understanding Co-payments

We also use this opportunity to advise the public that if you are covered and eligible under the National Health Insurance Plan and you visit a clinic to see a private doctor on island, that \$35 is deducted from your bill and paid by NHIB. TCI hospital is our preferred health provider, so once you are eligible, you only pay \$10 copayment when seeking medical services covered by NHIP.





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INSURANCE BOARD

Services NOT covered by National Health Insurance Plan

The following are medical services that are NOT covered by the NHIP:

- Cosmetic procedures
- Long term care
- Long term psychiatric care
- Orthodontics for adults
- Acupuncture
- Homeopathy
- Alternative medicines
- Podiatry
- Lifestyle procedures and sex changes
- Short term nursing or home skilled nursing facility
- Fertility treatments
- Dermatology
- Dentistry

Closing Remarks

I would like to take this time to thank all NHIP's contributors. Once you get a good understanding of the National Health Insurance Plan, you will know that even though you may not require medical attention at this time, someone in need of medication, pre-natal care, emergency treatment, and all that is covered under the NHIP, is able to get the care they need because of your contribution. So, continue to make your contributions, and make them on time to avoid late fee penalties. Let us continue to work together in building a healthy nation one person at a time.

END

