



National Health Insurance

A Shared Responsibility

Response to **Public Consultation**

A Modern Framework for
Increasing **Health Insurance Coverage**
in The Bahamas

January 31st, 2019



**National Health
Insurance Authority**



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A MESSAGE FROM THE CHAIRMAN

To the Bahamian People,

In October 2018, we unveiled a proposal for public consultation that is designed to revolutionize the way we deliver healthcare to patients in this country, providing Bahamians with affordable, efficient access to health services. A proposal with a clear goal: momentum towards **achieving Universal Health Coverage**. This is a **shared goal** across The Bahamas with a **shared responsibility** to achieve it. As in most countries the journey to National Health Insurance in The Bahamas has been a long process, a 40-year long path maneuvering through the social, economic and political gauntlet of decision making.

Over the course of time the need for Universal Health Coverage has increased significantly. Too many of our people are dying or experiencing a terribly poor quality of life, because they lack affordable access to healthcare. The burden of non-communicable diseases including hypertension, diabetes and cancers is having a staggering impact on the lives of too many Bahamians. We do not have time to wait and the time to do something about it is now.

The proposal was informed by medical professionals, robust financial analysis and taking best practices from around the world, but what it was missing was the most important element — talking to you. We needed to hear from you, from Bahamians across our beautiful archipelago — we needed to understand how this proposal impacts you.

Over the course of the consultation period we heard formal feedback and recommendations from more than 500 sources. All across our islands through individual stakeholder meetings, town halls, formal submissions and online feedback, Bahamians came together to make better and smart policy. What we heard was clear: **Bahamians believe in Universal Health Coverage**.

This document explains what we heard and what policy amendments we are proposing to make as a result of this consultation to make our mutual plan even stronger. For all of your contributions, thoughts, ideas and recommendations, we want to say simply; **thank you** for contributing to building a stronger National Health Insurance.

We are excited to present to you our revised plan to achieve our shared ambition.

Sincerely,

A handwritten signature in black ink, appearing to be 'R. Roberts', written in a cursive style.

Dr. Robin Roberts
Chairman, National Health Insurance Authority



1.0 Our Shared Goal: Universal Health Coverage for The Bahamas

Over the course of our history, we have achieved significant advancements in healthcare for our country. We have some of the most competent and dedicated healthcare workers in the world and a competitive and thriving private healthcare market that provides capacity and innovation. However, while we have achieved great success, we have failed at providing patients broad access to affordable quality care and minimizing the impact of some of our most significant health burdens.

Today, our country is facing a wave of unprecedented health challenges. The burden of obesity, hypertension, diabetes and other non-communicable disease is reaching a near epidemic level, while cancer continues to ravage families physically, emotionally, and financially. The reality is that while some of our population has some form of health insurance coverage, approximately 70% of Bahamians do not and are left to fend for themselves. This is unacceptable. We need to do better.

National Health Insurance Bahamas (NHI Bahamas) is a concept that stretches beyond traditional political boundaries. Fundamentally, this programme represents the path to achieving our shared goal of true Universal Health Coverage (UHC) for The Bahamas. In short, a prosperous Bahamas requires a healthy population, and a healthy population requires universal access to a strong health system.

The initial phase of NHI Bahamas was an important step in this process, providing access to care for the approximately 50,000 people enrolled so far. However, it was clear from a sustainability standpoint, and given scarce public sector resources, that we needed to design a structure that shared the responsibility among all stakeholders in a pragmatic way. The Bahamian public has voiced

their support for universal healthcare and NHI. All too often we see Bahamians and their families scramble to pay for life-saving medical treatments through cookouts and other fundraising means; this needs to end. We are our brother's keeper and our health system should be structured as such, allowing people who can pay their fair share to do so, while collectively supporting those who are most in need.

On October 23, 2018, the National Health Insurance Authority (NHIA) released a draft policy paper for consultation entitled *National Health Insurance: Our Shared Responsibility*. The consultation formally concluded on January 30th, 2019. The draft policy paper detailed NHIA's plan for achieving this shared goal of UHC, aligning an ambitious vision with a practical plan relying on all stakeholders in our country to contribute their fair share: employers, employees, and Government.

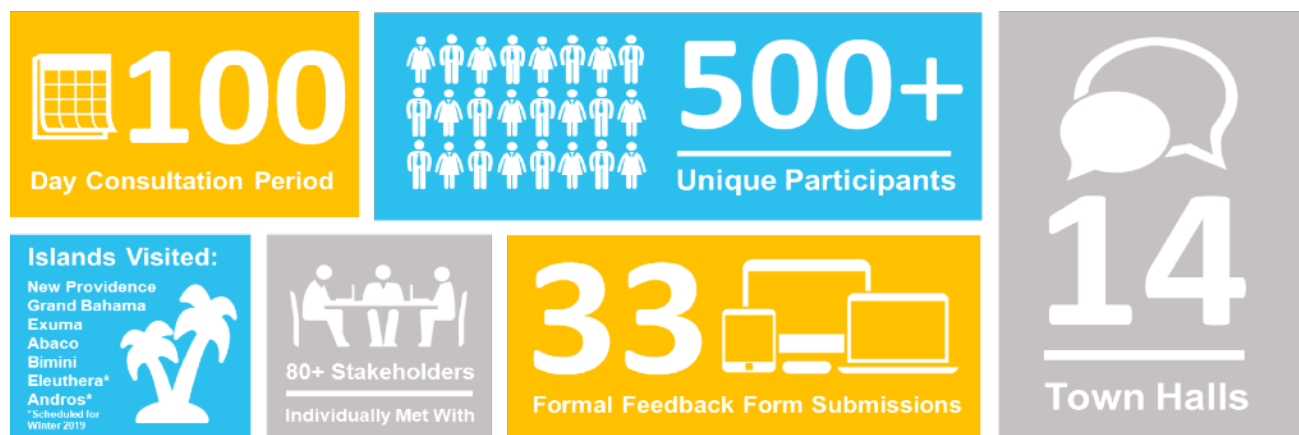
This document details what we heard from the general public, other stakeholders, their opinions, their support and concerns, and the recommendations they were willing to share with us. This document also introduces policy amendments to our suggested plan based on this feedback. While this report is not able to address every concern from every stakeholder, we believe we are able to put forward a plan that improves the proposal for the future of NHI Bahamas in a meaningful way for every impacted group, while protecting the principles of accessibility and equity. What is clear is that there is a very strong shared belief in UHC; the principle that eligible legal residents of The Bahamas should have equitable access to affordable, high-quality medical care irrespective of their personal wealth or health history is a national value we clearly hold dear.

2.0 Consultation Feedback: What We Heard

This solution is a made-in-The-Bahamas plan, taking lessons from some of the best health systems in the world and our regional peers, while tailoring our plan to the realities of the Bahamian context. That context is not something that we as the NHIA, nor the Ministry of Health can determine alone. We needed to hear from you, from the private sector, and from those who disagree with us. This consultation period was not a hoop to jump through for a pre-determined plan, but rather a necessary step to building the best possible plan for our people.

Digesting thousands of comments – through town halls, stakeholder meetings, and formal submissions – has allowed us to better understand the impact of what we are proposing and recognize that while much of the plan is widely accepted, there are elements that merit amendment based on the feedback given.

Figure 1: Consultation Statistics Summary



To date, we have had over 500 formal pieces of feedback to consider and assess. This does not include all those who attended town halls, or provided feedback online, or by telephone. The plan was also widely publicised in the press, on our website, and through social and other media. We made an effort to engage with Bahamians from New Providence and the Family Islands and any stakeholder group who was willing or wanted to meet with us. Some stakeholders demonstrated an outpouring of support for the proposed plan, while others identified changes that they felt needed to be made. What was consistent however, was support for the principles of what we are trying to achieve: a healthier and better Bahamas, united behind UHC.

It is clear from feedback that Bahamians overwhelmingly support the Implementation of Universal Health Coverage in our country

2.1 Reaffirming Our Approach

The original draft policy proposal outlined in the “National Health Insurance: Our Shared Responsibility” policy paper, was grounded on three fundamental elements:

- (1) **Establishing a Standard Health Benefit:** Developing a national minimum standard of health care coverage that all Bahamians would be entitled to with no co-payments or deductibles.
- (2) **Creating a Private Health Insurance Mandate for Employed Persons:** Mandating those of working age to have private health insurance from their employer, sharing the cost of coverage between employers and employees in a fair and equitable manner.
- (3) **Enabling Affordability and Access through a National Risk Pool:** Establishing a system that allows for fundamental protections to all Bahamians, including guaranteed coverage regardless of pre-existing health status and a common premium rate for all.

While the consultation period has helped to refine and amend our proposal to better suit the needs of the Bahamian people and stakeholders, detailed in depth in the second half of this document, it has also demonstrated significant support for the basic elements of the proposal. Even with stakeholders who were critical of the proposal, they agreed in principle with the direction and the importance of improving access to healthcare, focusing feedback on the policy details, timelines, and implementation considerations. None of these groups suggested any alternative approaches that adhered to the same principles of accessibility and equity.

No alternative approaches have been suggested that adhere to similar principles of universal accessibility and equity

It is for these reasons that we plan to continue moving forward with the proposed structure of the Standard Health Benefit, employer mandate, and risk equalization with amendments detailed in subsequent sections of this paper.

We are thankful for all the contributions made by stakeholders, health care leaders, the private sector, and the general public. We are confident that this information has led The Bahamas to a thoughtful and creative solution.

2.2 Key Themes In Feedback

Through our meetings with and feedback from the various stakeholder groups, we have identified four reoccurring themes. This is not a comprehensive review of all feedback, but rather a summary of the substantive feedback that we have evaluated as being relevant and meaningful. In general, feedback was fairly consistent, with minor considerations for specific groups being identified and dealt with as appropriate.

The four substantive feedback themes identified are as follows:



Improve Individual Capacity to Pay

Many stakeholders, particularly those representing large employers noted that the 2% of income premium cap on employees did not represent a progressive approach to premium sharing, noting that those with high incomes should probably pay more and should not have a cap put in place. Recommendations also shared a common theme of efforts being needed to make the premium more affordable, particularly for low income earners given the recent VAT increase. For fairness across sectors, wages, for calculation purposes, should include base pay, overtime, tips and bonuses.



Enhance the Benefits Package

While many reaffirmed that our approach to designing the Standard Health Benefit was appropriate, as we focused on primary care and support for select high prevalence conditions, concerns were identified regarding the need for more comprehensive coverage for children, particularly for paediatric cancers.



Implementation & Logistics Concerns

Concerns were raised regarding the logistics and implementation of the programme. Specifically, the implementation date for large businesses of January 2020 was thought of as being too soon. Further, concerns with respect to how enrolment procedures would function for both NHI Bahamas and private insurers were substantial. Concerns about Grand Bahama's ability to handle this given their economic realities were also clearly heard. Finally, Government transparency and administration of the programme against key performance indicators were identified by business leaders as critical to build credibility and support for the programme.



Ease of Doing Business

The business community delivered a united message that the Government needed to make it easier to do business in The Bahamas. Specifically they recommended raising the small business turnover exemption from \$100,00, establishing a short-term contract exemption for seasonal employment, streamlining the proposed business licensing certification process and allowing for greater wage deductions beyond 50% of the premium for those employees earning high incomes. In general the sentiment expressed was that businesses recognize the role they have to play, but will need greater support and representation in decision making in order to be able to afford it without negatively impacting the economy.

2.3 Feedback on Health System Design

Outside of the four themes identified, there was also significant skepticism regarding the integrity and capacity of the public healthcare system to deliver on these health benefits. It should be noted that NHIA recognizes the legitimacy of these concerns which reinforce NHI Bahamas's catalytic role in a bold health system transformation.

Specifically, this programme will help in providing the public health system the necessary resources it needs to deliver better quality care. It will alleviate capacity pressures in the public system by encouraging greater partnership with the private sector to provide care. Further, NHIA is making a significant investment in establishing a common Electronic Health Record information system at the primary care level which will help in enabling more coordinated and efficient care. It will also provide the much-needed data to monitor and incentivize quality care delivery, and in turn provide better value for money.

We recognize that skepticism is natural, but not doing anything will only make the current situation worse. We are determined to combat this narrative, work with the public health system in the process of reform, and in turn, chart our course to becoming the healthiest country in the Caribbean with the best system of healthcare available. NHI is a fundamental catalyst for reforming the public system and making this change possible. The results from our Primary Care programme demonstrate this, with over 90% of patients indicating they are satisfied with the services they receive.

NHI Bahamas is a major catalyst for driving broad reaching improvements across our existing health system

2.4 Existing Health Insurance Plans

There were widespread concerns that the introduction of this new programme could hurt those who have health insurance plans that work for them effectively right now. To be absolutely clear, we want to help, not hurt these individuals and allow for private sector innovation to thrive. Regulations will be drafted to protect existing coverage for plans that meet the requirements of the Standard Health Benefit established through collective agreements and employment contracts. For most with private health insurance, your coverage will be strengthened through the elimination of co-pays and deductibles for the Standard Health Benefit.

The establishment of a standard premium rate will allow for significant protections for Bahamians, making it difficult for existing plans to be negatively impacted. Those who have health insurance plans through collective agreements and employment contracts will not lose their coverage, but rather will see their coverage strengthened.

We should also note that some stakeholders, including health insurers and members of the business community, recommended that VAT on health insurance premiums should be removed for the purposes of financial accessibility and the symbolic notion of establishing healthcare as a Government priority. While we recognize the benefits of this suggestion, we also recognize the potential fiscal impacts. Thus, we have suggested that the amount of VAT levied on private health insurance be allocated directly to the NHIA to help pay for those who do not have private insurance and will be accessing benefits through NHI. Given tax policy is outside of our mandate as the National Health Insurance Authority, it will be up to the purview of central Government leaders and the Ministry of Finance to determine the feasibility and ability to fulfill this request. We believe that where Government revenue is raised from the health system, that money should be re-invested back into improving the health of all Bahamians.

Existing private health insurance plans will be strengthened by the expansion of NHI Bahamas

2.5 Introducing a Bahamian Sugary Drinks Tax

When we unveiled the original proposal for the next stage of NHI Bahamas, we also announced a recommendation for the implementation of a sugary drinks tax in The Bahamas building on best practice examples from the United Kingdom, Mexico, Australia, France, and others following recommendations by the World Health Organization. We are happy to say that with the exception of certain soft-drinks producers and one fast food operator, there was near universal support for a sugary drinks tax for The Bahamas, with many advocacy groups recommending a more broad-ranging market based approach to better food consumption. This included recommendations for taxing all unhealthy foods. Taxing fast food was also identified by many individuals as an opportunity to generate revenue. However, we do not intend to pursue this approach at this time and recommend an incremental approach starting with sugary drinks.

The results of a sugary drinks tax in jurisdictions across the world have been positive. In the United Kingdom, this initiative resulted in the reduction of 45 million kilogrammes of sugar consumed per year, equivalent to the weight of 9,000 African Elephants. We are confident that effective jurisdictional analysis and robust stakeholder support indicates that this may be the right direction for our country. In the near future, NHIA will release a report outlining our recommendations for how a sugary drinks tax could look in the Bahamian context.

All money raised by a sugary drinks tax will be spent to promote, encourage, and reward health and wellness for Bahamians



3.0 Building a Better Plan

As promised, we listened to Bahamians on how to make our proposal better, more equitable and fair, while supporting local job creators. The outpouring of support and feedback far exceeded expectations. Based on this feedback, we have been able to amend the draft policy from the original form as outlined in the *National Health Insurance: A Shared Responsibility*. We have been able to address concerns about the persons' capacity to pay, the benefits package, the implementation and logistics, as well as the proposal's impact on the ease of doing business in our country.

NHI is a Bahamian solution designed specifically for achieving Universal Health Coverage in our country

We are confident that our proposal establishes the appropriate balance of ambition and pragmatism, while not compromising in any way on the principles of quality, accessibility, and universality of care that we all agree on. It is with these principles that we propose the following amendments to the policy recommendations.

3.1 Addressing Individual Affordability

To address individual affordability we need to achieve two outcomes:

- i) Lower the burden for those who are the most financially challenged; and
- ii) Fairly distribute the cost to those who can afford it.



Lowering Employee Contribution to 1.5% of Income

Therefore, NHIA recommends that the eligible wage deduction be lowered from 2.0% of income to 1.5% of income. Further, we would eliminate the 50% of the premium cap maxing out at the median wage. This would allow employers to deduct up to 100% of the premium for high wage earners at no more than 1.5% of income per month. The following table details how this would look for various income levels. Further, for the purposes of equitable premium sharing, income will include all base wages, hourly wages, overtime, bonuses and tips.

Also, to be clear, Bahamians who do not work will not make contributions. This includes seniors and the young. These individuals will access services through NHI Bahamas free of charge

Figure 2: Proposed Premium Sharing Cost Projections

Premium Sharing Policy Comparison				
Annual Employee Earnings	New Policy Proposal (1.5% Capped Annually)		Old Policy Proposal (2.0% Capped Monthly)	
	Employee Cost Monthly	Employer Cost Monthly	Employee Cost Monthly	Employer Cost Monthly
\$5,000	\$6.25	\$77.08	\$8.33	\$75.00
\$10,000	\$12.50	\$70.83	\$16.67	\$66.67
\$15,000	\$18.75	\$64.58	\$25.00	\$58.33
\$20,000	\$25.00	\$58.33	\$33.33	\$50.00
\$25,000	\$31.25	\$52.08	\$41.67	\$41.67
\$35,000	\$43.75	\$39.58	\$41.67	\$41.67
\$45,000	\$56.25	\$27.08	\$41.67	\$41.67
\$55,000	\$68.75	\$14.58	\$41.67	\$41.67
\$65,000	\$81.25	\$2.08	\$41.67	\$41.67
\$66,667+	\$83.33	\$0.00	\$41.67	\$41.67

Finally, to improve individual affordability we would recommend to the Government that it establish regulations to eliminate all co-payments and deductibles for services provided at public healthcare institutions, aligning with recommendations from the Pan-American Health Organization (PAHO) and the World Health Organization (WHO) on achieving UHC.

There will be no co-payments and no deductibles for Standard Health Benefits under NHI Bahamas



Removing the 50% Cap on Employee Premium Contributions

We will be removing the 50% of the premium cap on monthly wage deductions, allowing for higher earning employees to pay more than 50% of the premium, up to 1.5% of monthly income.

3.2 An Accessible, Affordable, and Effective Standard Health Benefit



Adding all Pediatric Cancers to the Standard Health Benefit

Given the feedback received by stakeholders, NHIA proposes to add all paediatric cancers to the Standard Health Benefit, with paediatric congenital conditions and a priority list of additional conditions to be investigated for further adoption in subsequent years of the programme. We fundamentally agree with comments that the benefits package could be strengthened with more comprehensive coverage, however, we set out to make NHI Bahamas affordable, so we needed to respect that a pragmatic approach grounded in progressive universal coverage starts with a strong foundation. We need to acknowledge that demands for government spending are plentiful and resources are limited. In the same theme, our system needs to allow businesses to thrive and we should provide for predictable and incremental contributions rather than an “all at once” approach.

With NHI Bahamas, all children under the age of 12 will be fully covered for cancer care

3.3 Streamlined Implementation & Logistics



Proposed Implementation Date for All Businesses: July 1st, 2020

With respect to the logistics and implementation of the plan, the proposed timeline has been adjusted with a start date for both large and small employers of July 1, 2020. This pushes the start date for large employers back six months from our initial proposal, and brings the start date forward for small employers by that same amount. The rationale for this was to simplify the administration of the programme and we believe this provides ample time for all businesses and the insurance industry to prepare for these changes. A single start date makes sense logistically from an administration perspective and makes it easier on the business community. While some may feel that this is too much too soon, we believe given the progress of NHI Bahamas to date, and the approximately 18 month lead time for this plan to July 2020, progressive and well organized businesses will have ample time to prepare.

NHI will be implemented incrementally to ensure it is affordable for our government, our businesses and our citizens



Raising the Small Business Turnover Exemption to \$250,000

For small businesses, we will be increasing the small business turnover exemption to \$250,000 annually, up from \$100,000 annually that was originally proposed. This will allow more businesses, particularly small family businesses or start-ups, to be exempt from contributing the full premium rate. These businesses will contribute \$250 per employee per annum.



Establishing a National Fee Schedule

Further, based on feedback from the private insurance industry, a national fee schedule will be established for all Standard Health Benefit services. Providers in the public and private sector will be contracted under this agreement at fair reimbursement rates for beneficiaries under both private insurance and NHI. Providers who do not register under this national fee schedule will be ineligible for reimbursement for the required basic Standard Health Benefit offering from approved insurers. Upon request of the insurance industry, a detailed care pathway was provided to private insurers where they could provide their own cost estimate, aiding in the design of the plan

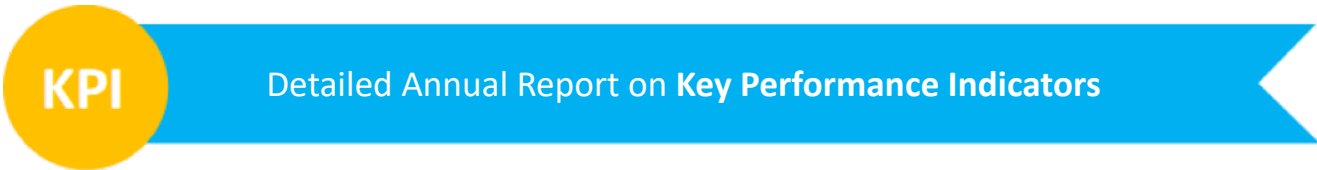


Common Open Enrolment Period for Standard Health Benefit

NHIA would also propose to adopt a system with a common open-enrolment period for all Bahamians and legal residents to enrol in both private insurance and NHI. The rationale for this is to simplify the risk equalization process by creating a common 12 month period in which all enrollees could be equalized against. Individuals could still register in these programmes outside of the enrolment period under the condition that they have experienced a qualifying life event. The period would likely begin May 1st of every year and conclude 45 days later on June 15th. Qualifying life events are provided in Figure 3 below.

Figure 3: Enrolment Outside Common Enrolment - Qualifying Life Events

Qualifying Life Events: Private Insurance	Qualifying Life Events: National Health Insurance
Birth	Birth
Death	Death
Marriage	Divorce
Divorce	Full-time to Part-time Change (< 15 hours per week)
Part-time to Full-time Change (>= 15 hours per week)	Loss of employment
Gain of new employment	Employer gains exempt status
Loss of employment	Contracting a "High Cost Care" Condition
Employer loses exempt status	



With respect to transparency and accountability, NHIA will produce a detailed annual report to be released publicly within four months of each year-end outlining the status on program enrolment and financial sustainability, performance against budgets, reporting on key performance indicators and the National Health Insurance Authority’s progress against these objectives.

3.4 Not Making it Harder to do Business in The Bahamas

A message that we heard loud and clear was to ensure that this programme does not make it harder to do business in The Bahamas. Bahamians, political leaders, and economists alike recognize the importance that job creators have to the economic growth of our nation, and while it is completely reasonable to expect that they pay their fair share in the responsibility of creating a healthier nation, we accept that this must not place undue burden on the business community. As such, we have suggested a variety of key enhancements to the proposal in this regard.



Use Self-Reporting instead of Business Licensing

Given that the business licensing process is already difficult and challenging, we heard from the business community that creating additional red-tape was not the right way to ensure compliance. Therefore, we will move towards a self-reporting model, wherein if for whatever reason an employee does not receive private health insurance from their employer, or their employer has not made their contributions to NHI as an exempt status employer, an employee can report this to NHIA and a compliance officer will investigate. Further, random audits will take place to ensure compliance of all businesses in the Bahamas.



Short Term Contract Employees Exemption

While removing the 50% of premium cap on wage deductions will help employers with employees that earn seasonal wages, another area that was identified is the need to support employers who have high numbers of seasonal employees. Therefore, a new exemption has been proposed that would allow businesses to only pay 25% of standard premium rate to NHI for employees who work less than 120 days on a short term contract, with a fixed start and end date. For those whose contract is extended or an additional contract is offered from the same employer beyond 120 days in a calendar year, they will be required to adhere to the mandate.



Removal of Secondary Employees Contribution

Another area in which we are proposing changes to make it easier for businesses, is the removal of the 25% of the standard premium rate contribution to NHI for those who act as a secondary employer. By saving \$250 annually for each employee that falls into this category, this reduces administrative burden and helps those businesses that would have been affected. Please note employers who are exempt from the mandate or who have exempt employees will still have to contribute 25% of the standard premium rate to NHIA.

Overall, it is our assessment that the business community has made a good faith effort to recognize the importance of this proposal and the need for stronger health insurance in The Bahamas, while providing practical recommendations to improve the process. We should note that there was a very limited number of business – most of which employ a high volume of minimum wage employees – who expressed out-right hostility towards the proposal. While we sympathize with the notion that those businesses who pay their employees minimum wage will be the cohort most impacted by the mandate, we also need to stress that statistically speaking, this is the group that is in most desperate need of health insurance. Internationally, health policy data shows us that those with the lowest socioeconomic standing, are also those who experience significant health inequality.



4.0 A Brighter Future

This is an important moment for our country. For decades, a two-tiered health system has challenged the ability of our people to access affordable and quality care, and to do more, be better, and play a role in making The Bahamas the healthiest and most productive country in our region. We have been held back in spite of having medical providers who are well-educated and deeply passionate about population health. What this comes down to is an issue of accessibility, affordability and responsibility. We have always had the ambition and capacity to become global leaders, but what we have now is a plan that makes it possible to achieve our shared goals.

After consulting more than 500 individuals across our islands, 73 stakeholder groups, and thousands of impressions online and in media, we are more confident than ever that the proposal in front of you is the best approach that we can take given our social and fiscal realities. The amended proposal strikes the important balance of pursuing bold, ambitious ideas that are needed for our country to succeed, with pragmatism and sustainability.

Before concluding, it is important that we reflect back to this concept of shared responsibility. Creating Universal Health Coverage – an ambition that we all share – is fundamentally linked to this concept. Shared responsibility means that we look after one another when we are down and develop a system that gives even those who are at their lowest of points, a hand up to allow them to succeed. Despite what critics may tell you, this proposal will not damage our economy. The increased investment in healthcare coupled with a healthier, more productive population will have tremendous long-term benefits to our economy. Experience elsewhere indicates that long-term sustainable economic strength is not possible without adequate access to affordable healthcare.

A healthier Bahamas will be a more a productive Bahamas. The World Bank states that Healthcare services is an investment in human capital like education; it is not a “cost”, it is an “investment”. The healthiest countries are the wealthiest countries. At one point in their history, the healthiest countries in the world – Switzerland, The Netherlands, The United Kingdom and Canada (among others) – made an important step to invest in the current and future health of their country by committing to Universal Health Coverage. The time for The Bahamas to make this step is now.

***A healthier Bahamas will be a more productive and
successful Bahamas***



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