



BERMUDA HEALTH COUNCIL CORPORATE PLAN 2016-2017



Bermuda Health Council Corporate Plan 2016-2017

Contact us:

If you would like any further information about the Bermuda Health Council, or if you would like to bring a healthcare matter to our attention, we look forward to hearing from you.

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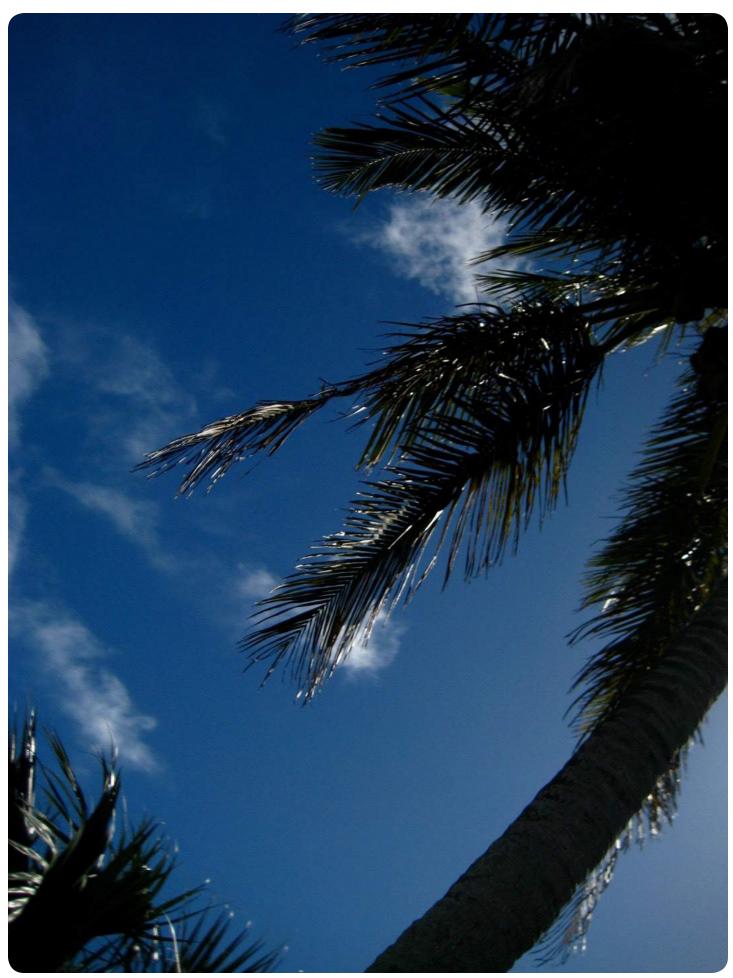
Bermuda Health Council

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Introduction

This year the Health Council celebrates 10 years since we opened our doors in 2006. As we reflect on our achievements and determine our future direction, we pause to celebrate you. Thank you to Bermuda's residents, health professionals, health businesses, health-related charities, and insurers and approved schemes for being there with us. Together we have collaborated to make important changes to Bermuda's health system.

As we start fiscal year 2016/17, we are focusing our efforts on improving quality and redirecting how we pay for appropriate care. Our priority areas are care quality, regulation, finance and economics, and making ourselves more accountable to you. We will do this by:

- ensuring that employed residents have health insurance
- making prescription drugs more accessible to the public
- setting standards for quality and safe care
- monitoring how we spend money in the health system
- coordinating implementation of the Bermuda Health Strategy and Bermuda Health Action Plan

Thank you for taking this journey with us for 10 years; we look forward to working with you in 2016/17. Together, we can continue to deliver on our expansive mandate *to regulate, coordinate and enhance the delivery of health services.*

About Us

We monitor health services and coordinate health system stakeholders to ensure Bermuda's residents have access to health insurance and safe, high quality care. We were established as a QUANGO by the Bermuda Health Council Act 2004 and opened in 2006.

We have a Board of 15 members who are appointed by the Minister of Health, Seniors and Environment and a small team of 8 people.

To fund operations, we receive money in two ways:

- A grant from the Ministry of Health, Seniors and Environment and;
- A transfer of \$1.09, from every health insurance policy to us on a monthly basis.

Our **MISSION** is to regulate, coordinate and enhance the deliver of health services. Our **VISION** is achieving a quality, equitable and sustainable health system.

What we do

We make sure health services provide Bermuda's residents with quality, effective and safe care; and we identify areas for improvement by:



Listening to the public and stakeholders to provide the best advice to the Minister on health system improvement



Protecting the vulnerable by reviewing the cost of the basic health insurance package (Standard Premium Rate) annually



Reviewing the benefits included in the basic health insurance package (Standard Health Benefit)



Taking appropriate actions if the public feel health services are not being delivered well



Promoting best practice standards by monitoring health professionals



Monitoring the safety, legal compliance and business practices of local health providers



Conducting thorough investigations to ensure employees have health insurance through their employer



Carrying out in-depth review of health insurers and Approved Schemes to ensure their continued viability

Our Key Achievments

- Set standards of quality and safe care for physicians, dentists, pharmacists and nurses (Standards of Practice)
- Protected the cost of healthcare by setting fees for some health services (Fee Schedules)
- Involved our local health service providers and other health organizations in projects





- Reduced patients' exposure to potentially unnecessary tests and radiation by monitoring providers' ordering rate (Diagnostic Test Rates)
- Listened to you, the public, and acted on your concerns and experiences in receiving care (Health system complaints and queries)



- Protected patients' access to care by verifying the stability of the Island's health insurers (Health insurers licensing)
- Improved healthcare delivery, encouraging insured patients to receive care at home (Home Medical Services Benefit)
- Protected employees' rights to have health insurance through their employer (Employers' Compliance)
- Helped insured patients keep money in their pocket (Upfront payments)



"The Health Council seeks to ensure all residents have a good quality and sustainable health system."



Our Priorities for 2016-2017

At the end of each fiscal year, we identify gaps in healthcare and collaborate with other entities to identify ways to improve the health system for the coming year. Then we set our priorities to reflect the areas that need improving.

For 2016-17 our priorities include:

PATIENTS

1 CARE Increasing collaboration to encourage best practice when delivering healthcare

2 REGULATION Ensuring all organizations that contribute to our health are operating according to the law

FINANCE AND Monitoring resources available for improving the health system and the health of the population

4. ACCOUNTABILITY

Being transparent to the public about what we do and how we do it

Objectives for 2016-2017

We deliver on our priorities by setting specific objectives for the year. For 2016-2017, our objectives by priority area are:

Care Quality & Standards

- 1. Monitor the licensing of health professionals and introduce standards and codes of practice.
- 2. Educate professionals on their diagnostic tests' order rates to ensure appropriate testing.





Regulation

- 1. Enforce compliance with the Claims Regulations 2012 to ensure insured patients are not charged upfront for health services, and health professionals receive prompt reimbursement of electronic claims.
- 2. Monitor and enforce employers' compliance with the Health Insurance Act 1970 to ensure noncompliant employers meet legal obligations.
- 3. Introduce infrastructure needed for an electronic health record (EHR) to improve information exchange across the health system.
- 4. License health service providers (businesses) to ensure quality care, reduce inappropriate self-referrals and monitor health technology.
- 5. License health insurers for 2017 to ensure they are compliant with the Health Insurance Act 1970 requirements.
- 6. License approved Standard Health Benefit (SHB¹) providers to ensure quality care and patient safety.
- 7. Manage and monitor health system complaints and queries to the Health Council.

¹SHB are the benefits that must be provided to all employees and their non-employed spouses. They are included in every insurance policy on the Island and there is no co-payment. These include most hospital services, home medical care and community diagnostic services.

Health System Financing & Economics

- 1. Determine a way to reduce fragmentation in health system financing, in order to improve efficiency and sustainability.
- 2. Publish an Actuarial Review to recommend the cost of the basic health insurance package (Standard Premium Rate) for 2017/18 to the Ministry of Health, Seniors and Environment.
- 3. Publish reports that monitor finance and expenditure trends across Bermuda's health system.
- 4. Publish schedules to set services and fees for non-hospital Standard Health Benefits.
- 5. Develop a prescription drug formulary to make sure key medications are available to those who need it most.





Accountability

- Conduct public education on health sector trends and developments to ensure stakeholders' awareness of and engagement with health issues.
- 2. Coordinate implementation of the Ministry's Bermuda Health Strategy and Bermuda Health Action Plan.
- 3. Ensure efficient and effective operations. We are a small team of 8, and our efficient operations ensure the delivery of our expansive mandate.

Next Steps

We will focus on completing these objectives throughout 2016/17. We will work with everyone to ensure the most effective delivery. Updates on our progress will be provided to the public regularly to ensure we meet our performance objectives.

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