


BERMUDA HEALTH PLAN 2020



STANDARD HEALTH BENEFIT (SHB)

BERMUDA HEALTH PLAN (DRAFT)

HEALTH INSURANCE PLAN (HIP)

FUTURE CARE

Current SHB Hospitalization, Kidney care, Imaging, Home medical	No co-pays	No co-pays	No co-pays	No co-pays
Doctor Visits (Primary Care)	none	Unlimited. \$25 CO-PAY	4 Visits. CO-PAY VARIES	Unlimited. CO-PAY VARIES
Specialists Visits	none	2 Visits. \$50 CO-PAY	5 Visits. CO-PAY VARIES	5 Visits. CO-PAY VARIES
Overseas Care	none	Medically Necessary. CO-PAY TBD	Medically Necessary. HIGH CO-PAY	Medically Necessary. CO-PAY VARIES
Dental	none	Basic. \$20 - \$40 CO-PAY	Basic. CO-PAY VARIES	Basic.
Vision	none	Basic.	Basic.	Basic.
Personal Home Care	none	✓	✓	✓
Outpatient Mental Health Care	none	Basic.	Basic.	More cover.
Other Supplemental Coverage	none	Local Radiation Treatments	More cover.	More cover.
Prescription Drugs	none	\$400	none	\$2000
Non Hospital Rehab (Allied Health)	none	none	none	Basic.

GRAPHIC AT-A-GLANCE COMPARISON OF BENEFIT PLANS



GOVERNMENT OF BERMUDA
Ministry of Health

