NHI BAHAMAS
A SHARED RESPONSIBILITY

13th Caribbean Conference on National Health Financing Initiatives

ANGUILLA

November 6-8, 2019
Why NHI in The Bahamas?

**Lack of Access:** 70% of Bahamians do not have adequate access to care
- Coverage options are not affordable and have high OOP costs, resulting in late presentation and leading to untold suffering and death

**Non-Communicable Disease Epidemic:** Global leaders
- 50% of population obese; 16% with diabetes
- Preventable, premature deaths make up 1/3 of all Bahamian deaths

**Unsustainable Health Sector Funding:** Lack of value-based reimbursement
- Massive and growing demand for health services, but limited resources and innovation to funding mechanisms to accomplish shared objectives

**Falling Behind Globally:** Relative NCD indicators and life expectancy getting worse
- As our regional economic peers improve, our relative health system performance continues to drop

95% of Bahamians strongly agree with the statement:

“Bahamians should have access to Universal Health Care”
A ROADMAP TO NHI 2.0

Guiding Principles

1. **AFFORDABILITY, ACCESS & PHASED APPROACH**
   
   Low premium standard health benefit with no co-pays or deductibles

2. **SHARED RESPONSIBILITY**
   
   All contribute and Government covers those most in need

3. **SUSTAINABILITY & RELIABILITY**
   
   Strengthening public sector facilities and building PPPs
Our proposal is stronger, more well-developed and appropriately shares responsibility among stakeholders.

The key theme coming out of the consultations was a re-affirmation of the principle framework for the original proposed strategy.

A ROADMAP TO NHI 2.0

Our Approach

1. A STANDARD HEALTH BENEFIT
2. AN EMPLOYER MANDATE
3. RISK EQUALISATION
The Standard Health Benefit

A ROADMAP TO NHI 2.0

Primary Care Coverage
- Primary Care Physician
  Covers general physician visits, and lab tests
- Screening Programs for Cancer
  Includes mammography, PSA, colonoscopy, pap smears.
- Diagnostic Imaging
  Includes x-rays and ultrasounds
- Health Education
  Healthy living advice, wellness programming and wellness education

High Cost Care Coverage
- Chronic Kidney Disease
  Covers hemodialysis, peritoneal dialysis and kidney transplants
- Cardiovascular Disease
  Covers myocardial infarctions and pacemakers
- Cancer Treatment
  Covers the treatment of breast, prostate, colorectal, cervical and pediatric cancers

The Standard Health Benefit
The Employer Mandate

A requirement for employers to provide Standard Health Benefit Insurance Contracts from a private health insurer to their eligible employees.

Exempt Employers
Small businesses can apply for exempt status given they satisfy criteria.

Exempt Employees
Certain employee types can be exempt (part-time, seasonal, secondary).

Exempt employees and employees of exempt employers receive coverage through NHI.
Risk Equalisation

Data-Driven Process
It is intended that following the claims-based equalisation transition period, sufficient data will be collected to enable a mature risk equalization process using the following data points:

1. **Age**
2. **Sex**
3. **Island of Residence**
4. **Diagnosis/ Medications**
5. **Socioeconomic Status**

Benefits of Prospective Risk Equalisation

**Greater Predictability**
A prospective system has a greater degree of predictability and transparency in the long-run.

**Market Driven**
A prospective programme is market-driven, will enable innovation and does not require regulated medical loss-ratios.

**Competing on Health**
A prospective system will create an incentive structure that benefits insurers to ensure those who are at the highest risk maintain good health.
WHERE IS NHI TODAY?

NHI Payment Mechanisms

Primary Care Providers
Risk Adjusted Capitated Payments

Lab / Diagnostic Services
Fee-For Service From PCP Referral

Maternity Care Services
Risk Adjusted Bundled Payment
We have taken a holistic approach to and addressing the structural challenges our system faces, utilizing best practices technology, wellness programmes and payment reform we can create a sustainable system.
WHERE IS NHI TODAY?

A Snapshot

65,000+

Bahamians have enrolled in NHI since its launch last Spring, and are now receiving access to Primary Care Physicians and Lab Services.

>90

Primary Care providers, including 4 private labs are providing care across New Providence, Grand Bahama, Abaco and Exuma.

95%

Of NHI patients are satisfied with the quality of service they received from their NHI primary care provider.¹

¹Based on findings from approximately 2,000 applicable survey responses from July 2018 to September 2018
WHERE IS NHI TODAY?

NHI Enrolment

We are on a mission to be the healthiest country in our region

NHI Enrolment Over Time

65,263 Bahamians or 25% of the uninsured population

Young People 300+ Under the Age of 5

Senior Citizens 7500+ Over the age of 65

Bahamian Elders 10+ People Over the age of 100

And Everyone In Between...
WHERE IS NHI TODAY?

Where We Are Today

65,600
Bahamians Enrolled in NHI

Young People
3,658 under the age of 5

Senior Citizens
8,993 over the age of 65

55
Provider Facilities
Including Doctors Hospital, Medi Center, Bahamas Pee, and clinics in Abaco, Grand Bahama, Exuma & Cays

94
NHI Physicians

8
NHI lab providers

NHI Enrolment Distribution

Grand Bahama
7,154

Abaco
2,809

Bimini & Berry Islands
298

Eleuthera
1,212

New Providence
51,263

Cat Island
81

San Salvador
29

Andros
967

Exuma & Cays
1,322

Long Island
167

Mayaguana
95

Ragged Island
13

Acklins & Crooked Island
69

Inagua
94
Stakeholder Engagement

- Day Consultation Period: 100
- Unique Participants: 550
- Islands Visited: New Providence, Grand Bahama, Exuma, Abaco, Eleuthera, Andros, Bimini
- 80+ Stakeholders Individually Met With
- Formal Feedback Form Submissions: 33
- Town Halls: 14
Public Support is Strong

Of Bahamians strongly agree with the statement

“Bahamians should have access to Universal Health Coverage”

95%

Of Bahamians agree or strongly agree with the statement

“Private health insurance offerings are too expensive”

92%

Of Bahamians agree or strongly agree with the statement

“I am willing to contribute more to the cost of healthcare if it would guarantee quality of care would improve”

82%

Of Bahamians completely agree or somewhat agree with the statement

“I have personally chosen to not seek health coverage when I should have due to the cost of accessing care”

55%

Between February 6\textsuperscript{th} – 16\textsuperscript{th} 2019, NHIA commissioned Public Domain to conduct an independent telephonic poll using polling methodology, providing appropriate sampling of age, gender, income level and island. With a sample size of n=986, the results represent a 99% confidence level with a 3% margin of error.
Public Support is Strong

How do Bahamians think universal healthcare should be paid for?

- Government through taxation: 25%
- Employees through payroll deductions: 14%
- Employers through a mandate: 11%
- A combination of the above: 57%

87% of Bahamians support the statement that "NHI should be expanded to provide affordable coverage for high cost medical care”.

78% of Bahamians answered "Yes" to the question "I support the revised NHI programme”.

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