NATIONAL HEALTH INSURANCE

Government of the Virgin Islands

"Your Security For A Lifetime"
The Government of the Virgin Islands is preparing to introduce the National Health Insurance system. This health financing system is designed to ensure that all legal residents of the Virgin Islands have equal access to all necessary health services.

National Health Insurance is a contributory health insurance plan that provides coverage for legal residents of the Territory, against the cost of a defined benefits package of health services. By reinvesting in the health care sector, this coverage is used for health promotion, prevention and treatment in times of illness or injury. All persons are required to contribute to the plan.

As part of the education process, we have prepared this informational brochure to assist you with understanding the NHI and how it is designed to work. With the current health reform that is underway, this health financing system is vital to strengthening our health sector.

This initiative is one of Government’s health reform strategies as we improve the standard of living for all and build a better Virgin Islands.

Ronnie W Skelton
Minister for Health and Social Development
THE PLAN FOR NATIONAL HEALTH INSURANCE

National Health Insurance (NHI) provides coverage for all legal residents of the Territory. Coverage is provided against the cost of a defined benefits package of health services to improve health, prevent illness and provide treatment.

It is based on two fundamental principles:

1. All legal residents have equal access to healthcare benefits.

2. Contributions are shared based on ability to pay, regardless of health risks such as age, occupation or pre-existing health conditions.

Our Aim

- To assist members with meeting the cost of health services
- Increase the resources available to finance health care
- To improve the quality of health services
- To control costs in the system
**The Right to Healthcare**  
Each individual has a right to healthcare. Statistics show that 47% of our population has a non-communicable disease/condition (high blood pressure, diabetes, cancer) and almost 65% of the population do not have health insurance and cannot afford healthcare.

**About Us:**  
The Social Security (Amendment) Act, 2014, established a National Health Insurance System (NHI) as a division of the Social Security Board (SSB). The NHI will be the financing and purchasing mechanism for facilitating equitable access to a stated schedule of benefits that will allow lifetime health insurance coverage for all beneficiaries. Although the NHI is a division of the SSB, it will perform its functions with its own financing independent of the Social Security Funds. The Ministry of Health and Social Development will maintain ultimate responsibility for monitoring the standards of healthcare services throughout the Territory.

**Our Providers:**  
Registered In-Network Healthcare Providers include:

I. Public Healthcare facilities  
   (i) Peebles Hospital  
   (ii) Community Clinics  
II. Contracted Private healthcare facilities (On-island)  
III. Contracted Overseas healthcare facilities

Out of Network Providers include:

I. Non contracted Private healthcare facilities (On-island)  
II. Non contracted Overseas healthcare facilities
Funding of NHI:
The NHI will be funded by contributions from:

a) Employers
b) Employees
c) Self-employed persons
d) Employees on behalf of un-employed spouses
e) Pensioners with other sources of income;
f) Government:

- All children - from newborn to age 18 years and up to 25 years, once enrolled in full time education, at an accredited educational institution. This includes children with special needs.

- Indigent persons (as defined by the Social Development Department or the established National standard requirement)

- Wards of the State such as residents of the Rainbow Children’s Home, the Adina Donovan Home for the Elderly, the Elderly Home on Virgin Gorda and Prisoners.

- Risk Officers including: Police, Customs, Immigration and Fire.
**Contribution Breakdown**

The contribution rate will be 7.5% of your insurable income through shared contributions of 3.75% paid by your employer and 3.75% paid by you as an employee. Your employer will deduct your contribution from your insurable wages or salary, and remit it, along with his/her contribution to the NHI.

The minimum wage is presently $4.00 per hour, which equals $640.00 per month. Employees and employers in this category would each pay $24.00 per month.

<table>
<thead>
<tr>
<th>Pay Period</th>
<th>Salary</th>
<th>Contribution</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Employee</td>
<td>Employer</td>
</tr>
<tr>
<td>Minimum Wage</td>
<td>$640.00</td>
<td>$24.00</td>
<td>$24.00</td>
</tr>
<tr>
<td>Weekly</td>
<td>$1,550.00</td>
<td>$58.12</td>
<td>$58.12</td>
</tr>
<tr>
<td>Fortnightly</td>
<td>$3,100.00</td>
<td>$116.25</td>
<td>$116.25</td>
</tr>
<tr>
<td>Semi-monthly</td>
<td>$3,394.34</td>
<td>$127.29</td>
<td>$127.29</td>
</tr>
<tr>
<td>Four Weekly</td>
<td>$6,200.00</td>
<td>$232.50</td>
<td>$232.50</td>
</tr>
<tr>
<td>Monthly</td>
<td>$6,716.68</td>
<td>$251.87</td>
<td>$251.87</td>
</tr>
<tr>
<td>Monthly salary more than</td>
<td>$6,716.68</td>
<td>$251.87</td>
<td>$251.87</td>
</tr>
</tbody>
</table>

The maximum amount on which NHI premiums will be assessed, is two times the upper wage limit for Social Security contributions, which presently equals $6,716.68 per month. Therefore the maximum amount payable by employees and employers would be $251.87 each.

Self-employed persons will be required to contribute 7.5% of their stated income (as employer and employee).

An employed person will be required to make a contribution of 3.75% of his/her salary on behalf of his/her unemployed spouse.
Registration

The NHI staff will:

I. Receive and verify the duly completed registration forms from Employers and Beneficiaries

II. Record specific data in respect of Employers and Beneficiaries

III. Issue an unique NHI Membership Number and NHI Identification Card

To aid in the efficient completion of the NHI registration process, the application shall be accompanied with one or more of the following documents for verification by the NHI office to support the accuracy of any information in the application.

- A birth certificate (for newborns only)
- A belonger’s certificate or card
- A valid passport
- A valid work permit
- Proof of immigration status
- In the event of a name change:
  - A marriage certificate
  - A deed poll or
  - An affidavit in support of any fact

Upon registration the card holder is encouraged to keep his/her NHI card with them at all times. Parents and guardians are asked to secure cards issued to their child/children. Guardians of seniors or persons with special needs are encouraged to secure the NHI card of the persons in their care. Your NHI card must be presented at healthcare facilities or pharmacies when seeking medical services. Having your NHI card will help you to access your benefits without delay.

In the event that you need to access non-emergency healthcare, but do not have your card, you or the authorized person at your doctor’s office can contact NHI for further assistance. You may be asked certain questions to confirm your identity, so that your healthcare services are not interrupted.

Registration forms may be accessed at [www.vinhi.vg](http://www.vinhi.vg) or at the NHI office, Social Security Board, Road Town, Tortola or the Social Security Office, Valley, Virgin Gorda.

If the card is lost or stolen, a report must be made to the NHI Office.
NHI Benefits

The NHI benefits package offers healthcare services at all levels; primary health care, specialized secondary care, and highly specialized tertiary level of care.

Benefits Package

- Primary care and specialist visits
- Preventative care
- Hospital room and board
- Surgery
- Diagnostic procedures
- Intensive care
- Casualty and emergency care
- Pharmaceutical services
- Mental health
- Dental care
- Eye care
- Approved prosthetic devices; and
- Overseas care, if the specialist is not available locally.
- Rehabilitation

The benefits provided will cover preventative, promotive, curative and rehabilitative health services. It is important to note that emphasis will be placed on prevention of disease and promotion of wellness.

DID YOU KNOW?

that there is strength in numbers?

“According to the World Health Organization (WHO), the most effective way to deal with the financial risk of paying for health services is to share it, and the more people who share, the better the protection.

Prepayment does not necessarily mean that people pay the full costs of the care they will receive, but that they make payments in advance. It means they contribute to a pool that they, or other, can draw on in the event of illness. In some years, they may receive services that cost more than their contributions, and in some years, less. Whether or not pools are consolidated into one national pool, or kept separate to stimulate competition or to reflect the needs of different regions, is partly a matter of national preference. People have long been voluntarily pooling their money to protect themselves against the financial risk of paying for health services” (Pg. 47, Health Systems Financing, WHO Health Report 2012)
Examples of what the NHI Package does not cover are:

- Cosmetic surgery that is not medically necessary, for instance, botox, liposuction and face-lifts.
- Cosmetic dental procedures such as dental whitening.
- Experimental medications, herbal medications or acupuncture.
- Diagnostic procedures outside of the approved guidelines and protocols.
- There are various therapeutic or preventative health care practices, such as homeopathy, chiropractic, and herbal medicine that do not follow generally accepted medical guidelines or standards and may not have a scientific explanation for their effectiveness. These will not be covered under the NHI system.
- Expenses beyond the coverage limits stated in the benefit package.
Payments

The co-insurance is a fixed percentage of the cost of benefits and varies according to the provider:

<table>
<thead>
<tr>
<th>Provider</th>
<th>Co-insurance</th>
<th>In/Out of NHI Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Health Clinics</td>
<td>0%</td>
<td>In network</td>
</tr>
<tr>
<td>Public Hospital on-island</td>
<td>5%</td>
<td>In network</td>
</tr>
<tr>
<td>Private on-island facility</td>
<td>10%</td>
<td>In network</td>
</tr>
<tr>
<td>Private on-island facility</td>
<td>20%</td>
<td>Out of network</td>
</tr>
<tr>
<td>Overseas facility</td>
<td>20%</td>
<td>In network</td>
</tr>
<tr>
<td>Overseas facility</td>
<td>40%</td>
<td>Out of network</td>
</tr>
</tbody>
</table>

Only in the event of a medical emergency, will the NHI provide coverage for overseas care without preapproval.

Emergency care will be covered by the NHI, less any applicable co-insurance. Members and/or their healthcare provider will have 48 hours from the start of the emergency and/or hospitalization to contact the NHI which will provide further assistance during care. Emergency care accessed at an overseas provider is subject to a 20% co-insurance rate.
Approved overseas care
The Medical Review Committee's (MRC) responsibility is to set preapproved policies and procedures, as well as authorize guidelines to access overseas care in an efficient and rapid manner. This Committee will ensure the appropriate use of this benefit, quality care and cost control.

What happens if you need overseas care?
Coverage of overseas treatment will be guided by a referral system. Once the care is approved by the Medical Review Committee, based on the referral by the medical practitioner, the NHI system will cover all in-network on island and overseas health care costs, in accordance with the co-insurance schedule on page 10.

What will NHI do for you?

**BENEFICIARIES**
- Lifetime coverage
- Choice of public or private healthcare provider
- Guaranteed payment for approved medical services.
- Improved access to healthcare
- Early detection & treatment
- Healthier lifestyle

**EMPLOYERS**
- Affordable benefits for all employees
- More productive employees
- Early treatment with improved access to healthcare and healthier staff

**TERRITORY**
- Expansion of local health services
- Improved data collection, planning and decision-making
- Overall improvement in health and quality of life

On-island and overseas healthcare services received at an out of network facility will be subject to usual reasonable customary charges.

The co-insurance schedule also applies.

DID YOU KNOW?
More than $50M is spent on healthcare annually and almost 65% of the population do not have health insurance and cannot afford healthcare cost.
When accessing services....
Your NHI card is required.

Strengthening the healthcare sector
There will be a number of improvements to the medical infrastructure including the expansion of services through partnerships with local private providers, as well as with overseas providers and facilities. These include enhancing the quality of care and services through the new Peebles Hospital and a modern clinic is currently being built on Virgin Gorda.

We want to hear from you
As the NHI Team progress through the registration process and we move towards the full implementation of the system, we want to hear from you. Tell us what is going well and those areas that require modification to make the system work better for you. Please see our contact details below.

Contact via Phone: 1-284-494-3418 Ext. 406
Contact via Email: info@vinhi.vg

Feedback may also be mailed to:
National Health Insurance
P.O. Box 698
Road Town, Tortola, VG1110
Virgin Islands

Like us on facebook at www.facebook.com/vinhivg and follow us on Twitter at www.twitter.com/vinhivg
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World Health Organization (WHO)