

Coalition News

Sixth in a series of eight articles on National Health Insurance

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WHAT SHOULD BE DONE TO PROVIDE BETTER HEALTH CARE COVERAGE FOR ALL BAHAMIANS – Find out where the National Coalition of Health Care Reform stands on the issues related to the proposed NHI!

The National Coalition for Health Care Reform (NCHCR) has repeatedly noted that it supports improvements to the health care system that will bring tangible and sustainable benefits to the Bahamian People. We are not simply about objecting to the creation of a National Health Care Plan. What we do believe however is that there is a better, more efficient, more effective way to ensure that Bahamians get access to the best possible health care at the best possible prices.

This series of articles will take an in-depth examination of the key principles of the NCHCR and demonstrate what significant issues we have with the current plan proposed by Government. We will also point out alternative approaches that we believe will lead to real and tangible improvements to the delivery of health care in our Country.



Ombudsman for Health

Part Six of the series highlights the sixth principle in our documented Statement of Purpose.

The National Coalition for Health Care Reform (NCHCR) continues to publish a series of articles to explain and provide context to each of the eight guiding principles that shape our view as to how we, as a nation, should proceed to establish a health care plan that can and will ensure that all Bahamian residents get access to quality health care.

This installment examines our sixth principle, which states that there MUST be a body created – independent of the administration of the health care plan – that will have responsibility for overseeing the health care system. This ombudsman will be mandated to ensure that consumer interests are held paramount; it must have the legislative power to investigate instances of abuse and fraud within the system and to initiate disciplinary and corrective measures where appropriate.

The NCHCR insists that this accountability mechanism be included in any discussion of a national health plan. Sadly, to date, there has been little or no discussion by the government's National Health Insurance's (NHI) task force on the issue of accountability and transparency within the planned national health insurance scheme. While the scheme intends to create a central government bureaucracy that will manage \$235 million and handle the health care files of hundreds of thousands of Bahamian residents, the NHI task force has not seen fit to discuss or outline in any material way exactly who will provide independent oversight for the customers (and the public and private providers) within the new NHI scheme.

Why is this important? It is important because national health insurance schemes the world over are notoriously complex and difficult to manage. There are always significant challenges with the proper and appropriate settlement of claims, with the management of client files and with the issue of fraud and abuse.

On the last point, Bahamian private insurers who are members of the NCHCR speak to the considerable amount of real and suspected fraud in the local health care sector. Most Bahamians are not surprised to hear that insurance customers (sometimes with the knowledge of a small number of unscrupulous practitioners) do fabricate medical situations so as to defraud insurance companies. These efforts can range from petty attempts simply to get time off from work with compensation, to more serious situations where persons make claims for medical procedures that never took place.

At the same time, there are individual insurance customers and medical patients who are unhappy and frustrated with the customer service or level of care provided through their insurance plan and physician. The medical professionals also have their legitimate gripes from time to time. They complain about the bureaucracy involved in processing medical claims through private insurers and about the sometimes inordinate length of time it takes them to have payments made by private insurers and the National Insurance Board (NIB).

Given the scope of what is being proposed and the ripe opportunity for fraud and mismanagement, it is not sufficient that the accountability mechanisms be limited to a yearly audit – as is being currently proposed to mirror the National Insurance Board. Not only is the track record of government corporations spotty in terms of keeping pace with their legal requirements to be audited EACH year, the reality is that - as outlined above - the demands, scope and issues that will accompany a universal health care plan will mean that the system must be subject to a strong and independent regulatory body. This entity would be established to consistently monitor the health care network and intervene rapidly in instances of abuse and mismanagement. Indeed, this is the only way to encourage and facilitate the proper and legitimate use of what will be very precious human and financial resources in the NHI plan.

Statement of Purpose Sixth Principle

The Key Issues

The sixth guiding principle of the Coalition is that there should be An Ombudsman for Health.

An independent legislated oversight body for the health care sector should be established with the power to address public or health care provider concerns and investigate, if necessary, violations or breaches of the application of the National Health Plan;

THE WAY FORWARD

Prior to the implementation of the NHI in whatever final form it may take, an office of the Ombudsman's must be established with appropriate powers of oversight and intervention on matters of resource deployment and customer care.

The Ombudsman office, at the pre-launch phase, should be charged with the research and development of accounting and managerial systems that are consistent with international best practices and private sector norms. This office should also be responsible for ensuring that these systems and relevant accountability mechanisms are implemented at launch.

The enabling legislation should set timetables for periodic financial and managerial audits which should be reported directly to the Speaker of the House of Assembly for immediate public scrutiny. The law should also speak to penalties for relevant managers who do not meet audit deadlines or whose performance contributes materially to unsatisfactory audit reports.

The NCHCR fully appreciates the administrative and managerial challenges that will accompany the establishment of a truly universal national health care plan. Nonetheless we do not contend that the difficulty of the task means that we ought not to get it done. As a country, it is critical that we create a working and effective health care plan that guarantees the right of all Bahamians to decent health care.

What we do insist upon however is that we make the best use of scarce resources in whatever system and plan is implemented. Key to this will be accountability and transparency. Unless we develop a plan that pays proper and adequate attention to these requirements, we will end up with a system that is characterized by waste and abuse and that may end up providing Bahamians with worse, not better, access to quality health services.