EXTRAORDINARY

OFFICIAL GAZETTE
THE BAHAMAS

PUBLISHED BY AUTHORITY

NASSAU 26th August, 2016 (B)

NATIONAL HEALTH INSURANCE ACT, 2016

Arrangement of Sections

Section

No. 29 of 2016

NATIONAL HEALTH INSURANCE ACT, 2016

AN ACT TO REPEAL THE NATIONAL HEALTH INSURANCE ACT, 2007, TO IMPLEMENT A NATIONAL HEALTH INSURANCE PLAN, TO ESTABLISH A NATIONAL HEALTH INSURANCE AUTHORITY, TO ESTABLISH A NATIONAL HEALTH INSURANCE FUND AND TO PROVIDE FOR MATTERS CONNECTED THEREWITH

[Date of Assent - 26th August, 2016]

Enacted by the Parliament of The Bahamas

PART I - PRELIMINARY

1. Short title and commencement.

(1) This Act may be cited as the National Health Insurance Act, 2016.

(2) This Act shall come into force on a date to be appointed by the Minister by notice published in the *Gazette* and different dates may be appointed by notice for the coming into force of particular sections or any Part of the Act.

2. Interpretation.

In this Act —

"Act" means the National Health Insurance Act, 2016;

"actuary" means a person who satisfies the National Health Insurance Authority that he is a fellow in good standing of a professional body of actuaries that is internationally recognized;

"Authority" means the National Health Insurance Authority established under section 4;

"beneficiary" means a person who is enrolled to receive benefits under the Plan;

"benefits" means the goods and services specified in the *Second Schedule* and available to beneficiaries under the Plan;

"contribution" means a contribution payable to the Fund in accordance with this Act;

"Fund" means the National Health Insurance Fund established under section 10;

"health care provider" or **"Provider"** means an entity, corporate or unincorporate, approved by the Authority to render benefits under the Plan;

"Insurance Commission" means the Insurance Commission of The Bahamas established pursuant to section 4 of the Insurance Act *(Ch.347)*;

"Minister" means the Minister with responsibility for national health insurance;

"Plan" means the National Health Insurance Plan;

"primary health care" means the outpatient, first level of health care that focuses on prevention, and addresses and coordinates all essential health needs;

"primary care provider" means a licensed entity approved by the Authority to coordinate health care services to be provided to a beneficiary under the Plan in accordance with section 18 of the Act;

"regulated health administrator" or **"Administrator"** means a company carrying on insurance business which —

(a) is registered as a long-term insurance business in carrying on sickness or health insurance in accordance with the Insurance Act *(Ch. 347)*;

(b) is certified as an Administrator by the Insurance Commission in accordance with the provisions of the Insurance Act *(Ch. 347)*; and

(c) has entered into an agreement with the Authority pursuant to section 25 of the Act;

"secondary health care" means specialised health services or benefits provided by a health care provider upon referral by a primary care provider;

"tertiary health care" means specialised consultative health care, provided to inpatients on referral from a primary or secondary care provider in a facility that has personnel and facilities for advanced medical diagnosis and treatment.