

Summary comparison of legislative changes July – November 2016

Legislative Changes					
	Section	July Legislation	Change Made	Provider Impact	Patient Impact
<i>Bermuda Health Council Amendment Act 2016</i>					
1.	Definition of Financial Interest	Related to dividends and general income	Added reference to <u>incentive based</u> income	<ul style="list-style-type: none"> Excludes staff who are employees and receive salaries 	<ul style="list-style-type: none"> Informs patients of interests which may influence care
2.	Definition of Financially Vested Referral	Related to financial incentives or general rewards	Added reference to <u>financial</u> rewards	<ul style="list-style-type: none"> Limits definition to financial implications Encourages use of non-financial incentives 	<ul style="list-style-type: none"> Informs patients of interests which may influence care
3.	Definition of High Risk Health Technology	Related to contact, organs, invasiveness, and systemic effects	Revised to further prioritize patient safety and clarify specific areas of concern	<ul style="list-style-type: none"> Definition is clear Restricts policy to specific named equipment 	<ul style="list-style-type: none"> Protects public from exposure to harmful risks Provides clarity for the public
4.	Definition of Significant Influence	Related to managing or operating a business	Deleted definition	<ul style="list-style-type: none"> Recognizes professionals who are paid to manage a practice 	<ul style="list-style-type: none"> Establishes accountability with the correct parties, namely, the providers
5.	Importation of technology	Penalty as \$20,000 fine and/or 12 months imprisonment	Reduces penalty to \$15,000 and/or 6 months imprisonment	<ul style="list-style-type: none"> Supports levels of offences Acknowledges degree of harm caused Consistent with existing legislation for providers and of regulators 	<ul style="list-style-type: none"> Protects the public from harmful risks and exposure to potentially dangerous equipment Holds the provider accountable for harm
6.	Inspections of health technology	Related to records for fees and services	Adds provision to require records related to technology, financially vested referrals and the quality of care	<ul style="list-style-type: none"> Protects proprietary information Focuses on quality services and patient safety 	<ul style="list-style-type: none"> Ensures patient safety through monitoring medical appropriateness, equipment safety & maintenance, and quality assurance Allows Council to confirm the standards of care to enable patients to make informed choices

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					<ul style="list-style-type: none"> • Reassures public about competency of equipment operators
7.	Consequential amendment	No reference to NDC Act	Excludes facilities that are regulated by Ministry of National Security	<ul style="list-style-type: none"> • Removes administrative duplication for facilities with multiple accountabilities • Reduces the confusion surrounding the registration process • Streamlines registration between various regulators and government agencies 	<ul style="list-style-type: none"> • Reassures public of oversight and safety
<i>Health Service Provider Licensing Regulations 2016</i>					
8.	Fees	No provision to waive or reduce fees	Added provision to waive and reduce fees	<ul style="list-style-type: none"> • Reduces costs for providers that may be accredited • Accounts for charities, nursing homes, and other providers who have limited budgets 	<ul style="list-style-type: none"> • Minimizes the cost impact to patients
9.	Contravening condition of license	Penalty as \$20,000	Increases penalty to \$30,000 and 2 years imprisonment and allows conviction on indictment	<ul style="list-style-type: none"> • Modulates penalty to match the risks to the public • Supports levels of offences • Acknowledges degree of harm caused • Consistent with existing legislation for providers and of regulators 	<ul style="list-style-type: none"> • Assures the public that health and safety is a real concern, with serious penalties for their endangerment • Promotes sense of justice and fairness • Provides effective protection to the public by identifying and discouraging harmful behaviors
10.	Suspending a license	Publication on website	Removed provision to publish provider name	<ul style="list-style-type: none"> • Avoids reputational risks to provider for matters that can be rectified • Protect providers that have 	<ul style="list-style-type: none"> • Promotes patient confidence in providers • Ensures that patient confidentiality is protected

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				non-serious infringements from being unfairly highlighted	<ul style="list-style-type: none"> • Avoids alarming patients unnecessarily
11.	Returns and Records	Requires reporting of clinical outcomes	Deleted reporting of clinical outcomes	<ul style="list-style-type: none"> • Further protects patient confidentiality • Promotes collaboration with providers on a voluntary basis in clinical care matters 	<ul style="list-style-type: none"> • Reassures the public that individual health data is excluded from scrutiny and protected
12.	Self-referrals and financially vested referrals	Requires permission to make a self-referral	Removed requirement to seek permission to make a self-referral or financially vested referral	<ul style="list-style-type: none"> • Assumes integrity of providers 	<ul style="list-style-type: none"> • Promotes continuity of patient care • Acknowledges benefits of responsible in-sourcing • Encourages patients to be active participants in their care via informed decision making
13.	Applying for permission to make referrals	Requires application	Removed section	<ul style="list-style-type: none"> • Assumes integrity of providers 	<ul style="list-style-type: none"> • Same as #12
14.	Determining an application to make referrals	Sets criteria for determining if a provider can make referrals	Removed section	<ul style="list-style-type: none"> • Assumes integrity of providers 	<ul style="list-style-type: none"> • Same as #12
15.	Provider to use guidelines	Requires providers to adhere to guidelines	Removed section	<ul style="list-style-type: none"> • Avoids administrative duplication by including guidelines in the Code of Practice 	<ul style="list-style-type: none"> • Same as #12
16.	Code of practice	Requires consultation with providers before issuing the Code	Provision revised to require consultation with both providers and insurers before issuing the Code	<ul style="list-style-type: none"> • Ensures all stakeholders are involved in process • Collaboration creates stakeholder buy in and rapid adaption 	<ul style="list-style-type: none"> • Same as #12
17.	Application fees	Sets fees for hospital at	Fee increased to \$17,150	<ul style="list-style-type: none"> • Accounts for patient volume 	<ul style="list-style-type: none"> • Costs modeled to ensure no

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		\$2,600		and complexity of acute care facilities <ul style="list-style-type: none"> • Distributes fees equitably among providers 	financial impact to patients
High Risk Health Technology Regulations 2016					
18.	Fees	Requires publication of providers whose fees are waived	Removed provision	<ul style="list-style-type: none"> • Protects provider privacy • Accounts for diverse reasons for waiving fees 	<ul style="list-style-type: none"> • No real public benefit or disadvantage
19.	Suspending registration	Allows suspension where Council has “reason to believe” the provider has contravened condition of equipment registration	Removed provision so that Council must “confirm” and have evidence of contravention	<ul style="list-style-type: none"> • Protects integrity of providers 	<ul style="list-style-type: none"> • Assures evidence is confirmed before interrupting patient care
20.	Suspending registration	Allows Council to publish when registration of technology is suspended	Removed provision	<ul style="list-style-type: none"> • Avoids reputational risks to providers for matters that can be rectified 	<ul style="list-style-type: none"> • Maintains public confidence in care
21.	Returns and records	Requires reporting on utilization	Removed provision	<ul style="list-style-type: none"> • Avoids administrative duplication • Streamlines reporting via quality control reports 	<ul style="list-style-type: none"> • Provides reassurances about safe, clinically appropriate care
22.	Offences and contraventions	Sets fine of \$20,000 for obtaining a certificate of entry with false information	Increases penalty to \$30,000 and 2 years imprisonment and allows conviction on indictment	<ul style="list-style-type: none"> • Modulates penalty to match the risks to the public • Supports levels of offences • Acknowledges degree of harm caused • Consistent with existing legislation for providers and of regulators 	<ul style="list-style-type: none"> • Assures the public that health and safety is a real concern, with serious penalties for their endangerment • Promotes sense of justice and fairness • Provides effective protection to the public by identifying and discouraging harmful behaviors
23.	Offences and contraventions	Sets fine of \$5,000 for 1 st offence and \$10,000 for	Decreases penalty to \$2,500 and \$5,000	<ul style="list-style-type: none"> • Modulates penalty to match the risks to the public 	<ul style="list-style-type: none"> • Same as #22

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		2 nd offence for failing to file a return	respectively	<ul style="list-style-type: none"> • Supports levels of offences • Acknowledges degree of harm caused • Consistent with existing legislation for providers and of regulators 	
24.	Civil penalties	Allows publication of provider name who has been given a civil penalty	Removes provision to publish	<ul style="list-style-type: none"> • Avoids reputational risks to provider for matters that can be rectified 	<ul style="list-style-type: none"> • Promotes patient confidence in providers • Ensures that patient confidentiality is protected • Avoids alarming patients unnecessarily
25.	Registration and re-registration fees		Adds provision to charge registration and re-registration fees of \$200	<ul style="list-style-type: none"> • Aligned with existing legislation for providers • Removes financial barriers to using equipment with clinical value 	<ul style="list-style-type: none"> • Costs modeled to ensure no financial impact to patients