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NHI IMPLEMENTS POLICY TO ENSURE QUALITY CARE FOR BENEFICIARIES

Policy places three-time 'cap' on doctor visits on the same diagnosis within 30 days

Road Town, Tortola, May 27, 2019– National Health Insurance (NHI) has implemented a three visit 'cap' for a specified diagnosis within a 30-day timeframe.

The policy states that beneficiaries are allowed a primary visit with a medical practitioner, followed by a maximum of two follow-up visits for a specified diagnosis within a thirty-day timeframe.

Manager of Beneficiary and Advisory Services, Ms. Casandra Lewis said, "The goal of the policy change is to ensure all beneficiaries receive quality care, with a view to improved healthcare services throughout the Virgin Islands, along with adequate fiscal responsibility of the NHI fund."

Ms. Lewis explained that the policy is flexible for those patients requiring additional visits, stating: "If further visits are required for the same diagnosis, NHI must be notified in this regard and additional visits may be granted on a case by case basis. NHI reserves the right to recommend a second opinion or referral to a specialist for the beneficiary if deemed necessary or if one was not previously sought by the practitioner providing service."

Medical Director, Dr. Harlan Vanterpool, said that one of NHI's mandates is to ensure medical care provided to beneficiaries is not only affordable and accessible, but also *appropriate*.

Dr. Vanterpool said, “In some cases reviewed by NHI, it has been found that some providers have not been thorough enough in their medical assessments of beneficiaries, resulting in the misdiagnosis of beneficiaries, and by extension, the commencement of treatments deemed inappropriate. In some of these cases the needed specialist input was not sought in a timely manner.”

The medical director continued, “This has resulted in patients seeing the same physician repeatedly, continuing with the same treatment, and not seeing any improvement in their condition. Again, in these cases, beneficiaries are not receiving appropriate care, which may result in their conditions worsening or they may also develop other issues associated with being administered inappropriate treatments.”

In explaining what is done during patient assessment, Dr. Vanterpool said practitioners usually follow established healthcare standards.

He said, “NHI utilizes the Milliman Care Guidelines (MCG) for guidance, in addition to clinical knowledge and experience in making all decisions for pre-authorizations received for processing.”

Ms. Lewis said that NHI is working closely with providers and has already informed them of the new policy.

To this end, she said, “NHI has established protocols with various medical providers in the NHI-network, as detailed in the NHI Providers Contracts. These contracts are renewed annually and specifically indicate that NHI reserves the right to change policies or processes, as deemed necessary from time to time.”

For more information, beneficiaries can call (284) 852-7860, or email info@vinhi.vg, or visit the NHI office at the Social Security Board Building on Wickham’s Cay I.

National Health Insurance is designed to improve health outcomes and provide financial risk protection by ensuring that every resident of the Virgin Islands will have affordable access to the health services they need.

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Notes to Editor(s): Flier is attached.

Flier Design: April Glasgow