Lodged au Greffe on 21st March 2000 by the Employment and Social Security Committee



STATES GREFFE

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Price code: B **Explanatory Note**

The purpose of these Regulations is to increase the amounts of medical benefit payable in respect of specified medical services provided on or after 1st January 2000 by approved medical practitioners to persons who are exempt from liability to pay contributions under the Health Insurance (Jersey) Law 1967 and to clarify the application of the Schedule in which those amounts are set out.

Health Insurance (Jersey) Law 1967

HEALTH INSURANCE (MEDICAL BENEFIT) (AMENDMENT No. 51) (JERSEY) REGULATIONS 2000

(Promulgated on the	day of	2000)

STATES OF JERSEY

The	day of	2000

THE STATES, in pursuance of Articles 18 and 46 of the Health Insurance (Jersey) Law 1967, $^{[1]}$ as amended, have made the following Regulations -

- 1.-(1) At the end of Regulation 2 of the Health Insurance (Medical Benefit) (Jersey) Regulations 1967, as amende [3] (hereinafter referred to as the "principal Regulations"), there shall be inserted the following paragraph -
 - "(6) The rate of medical benefit is determined for the purposes of paragraph (2) or (3) by adding the rate prescribed in Part B of the Schedule to these Regulations in respect of each service referred to in that Part that is provided (if any) to the rate prescribed in Part A of that Schedule."
- (2) For the Schedule to the principal Regulations there shall be substituted the Schedule set out in the Schedule to these Regulations.
 - (3) The Health Insurance (Medical Benefit) (Amendment No. 49) (Jersey) Regulations 1999 are repealed.
- (4) The rates of benefit prescribed in the Schedule set out in the Schedule to these Regulations shall apply in relation to medical services provided by an approved medical practitioner on or after the first day of January 2000.
- 2. These Regulations may be cited as the Health Insurance (Medical Benefit) (Amendment No. 51) (Jersey) Regulations 2000.

SCHEDULE

$(Regulation \ 1(2))$

"SCHEDULE

$(Regulation\ 2(2)\ and\ (3))$

A. Rates of benefit in respect of medical services generally

	Service	Rate of benefit £
(1)	For medical services provided at the approved medical practitioner's surgery	14.25
(2)	For medical services provided elsewhere than at the approved medical practitioner's surgery, between the hours of eight o'clock in the morning and six o'clock in the evening, on any day other than a Sunday or public holiday	23.90
(3)	For medical services provided elsewhere than at the approved medical practitioner's surgery on a Sunday or public holiday, or between the hours of six o'clock in the evening and eight o'clock in the morning of any day	42.50
(4)	For medical services provided as specified in item (2) or item (3) above for any person, other than the first insured person, who received the service on the same premises, and during the same visit as the first insured person	14.25

B. Additional rates of benefit in respect of particular medical services

Service	Rate of benefit £
(1) Injection (where drug supplied by medical practitioner and syringe of disposable type used)	5.60
(2) Blood test	5.60
(3) Insertion of vaginal ring pessary (where appliance supplied by medical practitioner)	6.10
(4) Stitching of minor wound, etc.	5.60
(5) Minor operations (where no, or only local, anaesthetic is used and including the cost of stitching but excluding the cost of any anaesthetic used)	19.65
(6) Electrocardiogram	26.75
(7) Ear syringing	5.60
(8) Pregnancy urine test	12.40
(9) Letter from a medical practitioner to a consultant or specialist at the General Hospital referring a patient for examination	5.60
(10) Cervical smear	6.10
(11) Cryo-surgery	5.60 ".

 $[\]fbox{[1]}$ Recueil des Lois, Volume 1966-1967, pages 530 and 578.

^[2] Recueil des Lois, Volume 1984-1985, page 210.

^[3] Nos. 5005, 9362 and 9425.

^[4] No. 9362.