

STATES OF JERSEY



DRAFT HEALTH INSURANCE (MEDICAL BENEFIT) (JERSEY) REGULATIONS 200

**Lodged au Greffe on 18th October 2005
by the Employment and Social Security Committee**

STATES GREFFE



Jersey

DRAFT HEALTH INSURANCE (MEDICAL BENEFIT) (JERSEY) REGULATIONS 200

REPORT

Rates are negotiated annually with representatives of the medical profession in Jersey for the purposes of providing services to those in receipt of Health Insurance Exception (HIE). An increase of 4.45% across all services has been agreed for 2006 and will come into effect on January 1st 2006. The total additional cost is projected to be £50,000 across nearly 4000 HIE recipients but this may vary slightly dependant on the actual use of general medical practitioner services. The cost of the HIE scheme is shared by the Health Insurance Fund (60%) and General Revenues (40%). Expenditure on medical benefits in 2004 was £1.079M and this is projected to rise to £1.2M in 2006.

These Regulations subsume the 1967 Regulations and all subsequent amendments.

Financial and Manpower Implications

The cost of this proposed increase can be met from within cash limits and without any manpower implications.

Explanatory Note

These Regulations would increase by 4.45% the amount that can be claimed by way of medical benefit by a person excepted from liability to pay social security contributions. The new rates apply to medical services provided after 1st January 2006.

These new Regulations replace the 1967 Regulations which contained out of date and redundant provisions and which had been amended 60 times. They prescribe a class of persons eligible for a different rate of medical benefit by reference to income. The Regulations are to come into force on 1st January 2006.



Jersey

DRAFT HEALTH INSURANCE (MEDICAL BENEFIT) (JERSEY) REGULATIONS 200

Arrangement

Regulation

- | | |
|----------|---|
| <u>1</u> | <u>Interpretation</u> |
| <u>2</u> | <u>General rate of medical benefit</u> |
| <u>3</u> | <u>Different rate of medical benefit for certain classes of insured persons</u> |
| <u>4</u> | <u>Date of applicability of rates</u> |
| <u>5</u> | <u>Regulations repealed</u> |
| <u>6</u> | <u>Citation and commencement</u> |

SCHEDULE 1

ASSESSMENT OF ELIGIBILITY FOR DIFFERENT RATE OF MEDICAL BENEFIT

- | | |
|-----------|--------------------------|
| <u>1.</u> | <u>Income limits</u> |
| <u>2.</u> | <u>Income assessment</u> |

SCHEDULE 2

PART A

DIFFERENT RATES OF BENEFIT IN RESPECT OF MEDICAL SERVICES GENERALLY

PART B

ADDITIONAL DIFFERENT RATES OF BENEFIT IN RESPECT OF PARTICULAR MEDICAL SERVICES

SCHEDULE 3

REGULATIONS REPEALED



Jersey

DRAFT HEALTH INSURANCE (MEDICAL BENEFIT) (JERSEY) REGULATIONS 200-

Made

[date to be inserted]

Coming into force

1st January 2006

THE STATES, in pursuance of Articles 9 and 29 of the Health Insurance (Jersey) Law 1967,^[1] have made the following Regulations –

1 Interpretation

In these Regulations, unless the context otherwise requires –

“1974 Law” means the Social Security (Jersey) Law 1974;^[2]

“Law” means the Health Insurance (Jersey) Law 1967;

“public holiday” means a day appointed to be observed as a public holiday by the Public Holidays and Bank Holidays (Jersey) Act 1952.^[3]

2 General rate of medical benefit

The rate of medical benefit for the purposes of Article 9(1) of the Law is £15.

3 Different rate of medical benefit for certain classes of insured persons

(1) This Regulation applies to an insured person –

- (a) who has been resident in Jersey for at least 5 years;
- (b) who is not eligible to pay employed persons’ primary Class 1 contributions under the 1974 Law; and
- (c) whose weekly income (as assessed in accordance with paragraph 2 of Schedule 1) does not exceed the amount applicable to that person as set out in paragraph 1 of that Schedule.

(2) Despite Regulation 2, the rate of benefit applicable to persons to whom this Regulation applies is determined by adding the applicable rate prescribed in Part A of Schedule 2 to the applicable rate (if any) prescribed in Part B of that Schedule.

4 Date of applicability of rates

The rates of benefit prescribed by these Regulations apply to medical services provided on or after 1st January 2006.

5 Regulations repealed

The Regulations set out in Schedule 3 are repealed.

6 Citation and commencement

These Regulations may be cited as the Health Insurance (Medical Benefit) (Jersey) Regulations 200- and shall come into force on 1st January 2006.

SCHEDULE 1

(Regulation 3 (1))

ASSESSMENT OF ELIGIBILITY FOR DIFFERENT RATE OF MEDICAL BENEFIT

1. Income limits

- (1) For the purposes of Regulation 3(1)(c) the weekly income limits are –
 - (a) if the person is over the age of 21 and single, £141.45;
 - (b) if the person is over the age of 17 but under the age of 21 and does not live with a parent or guardian or in a hostel, £115.70;
 - (c) if the person is married, £234.55; and
 - (d) if the person does not fall into clauses (a) to (c) and has sole responsibility for a person under full age, £234.55.
- (2) If the person is maintaining a dependent child or young person there shall be added to the applicable income limit set out in sub-paragraph (1) the following amounts for each such child or young person–
 - (a) for a young person aged 18-20 years, £69.20;
 - (b) for a child aged 16 or 17 years, £54.15;
 - (c) for a child under the age of 16, £43.65.
- (3) However, in the case of a person mentioned in sub-paragraph (1)(d), the first child shall be disregarded.
- (4) The following shall be added to the applicable income limit set out in sub-paragraph (1) –
 - (a) the total of any amount paid by the person in rent;
 - (b) one third of any amount paid by the person by way of board and lodging;
 - (c) in the case of a person who is an owner occupier, an amount equivalent to the minimum that would be charged by the Housing Committee by way of rent if the person were a States tenant; and
 - (d) 25% of any fee paid by an insured person –
 - (i) to a hospital or care home for which the Health and Social Services Department is responsible; or
 - (ii) to a home to which the Nursing and Residential Homes (Jersey) Law 1994^[4] applies.

2. Income assessment

- (1) Subject to sub-paragraph (2), the following sources of income are to be included when assessing the weekly income of an insured person –
 - (a) earnings;
 - (b) an amount in respect of income from savings of –
 - (i) £1 in respect of savings of up to £7,092 in the case of a single person and up to £11,773 in the case of a married person, and
 - (ii) 25 pence for each £50 of savings over and above the amounts specified in clause (i);
 - (c) social security benefits;
 - (d) pensions;
 - (e) any deed or gift;

- (f) maintenance payments for the insured person or a dependent child;
 - (g) parish welfare;
 - (h) income from lodgers; and
 - (i) income from letting of property.
- (2) The following are to be disregarded when assessing weekly income –
- (a) in the case of the earnings of an insured person who is a single parent or a pensioner who works less than 25 hours a week, the first £20 earned and half of the amount earned over £20 and under £40;
 - (b) in the case of any training allowance paid by an employer training scheme administered by the States, the same amount as described in clause (a) plus a quarter of any allowance exceeding £40;
 - (c) income from Therapeutic Work Scheme employment;
 - (d) 15% of any allowance payable under the Family Allowances (Jersey) Law 1972^[5] or £8, whichever is the greater;
 - (e) disability transport allowance (within the meaning of Article 2 of the Disability Transport Allowance (Jersey) Law 1997^[6]), attendance allowance (payable under the Attendance Allowances (Jersey) Law 1973^[7]) and any allowance payable under the Invalid Care and Disability Allowances (Jersey) Law 1978,^[8]
 - (f) the first £20.75 of any maternity allowance or long term incapacity benefit payable under the 1974 Law;
 - (g) in the case of an insured person in receipt of an incapacity pension or an old age pension under the 1974 Law –
 - (i) £23 in the case of a single person, and
 - (ii) £38.15 in the case of a married person;
 - (h) survivor's benefit under Article 24 of the 1974 Law;
 - (i) educational grants and grants from charitable organisations;
 - (j) in the case of income from lodgers –
 - (i) if the lodger lives as a member of the family, £39.14,
 - (ii) if the lodger is not provided with food, £31.37,
 - (iii) if the lodger is provided with food, £35.65; and
 - (k) in the case of income from property, 20% of the cost of exterior repairs and 40% of the cost of all other repairs.

SCHEDULE 2

(Regulation 3(2))

PART A

DIFFERENT RATES OF BENEFIT IN RESPECT OF MEDICAL SERVICES GENERALLY

<i>Service</i>	<i>Rate of benefit</i> £
(1) For medical services provided at the approved medical practitioner's surgery	18.85
(2) For medical services provided elsewhere than at the approved medical practitioner's surgery, on any day other than a Sunday or public holiday, between the hours of 8 a.m. and 8 p.m.	31.30
(3) For medical services provided elsewhere than at the approved medical practitioner's surgery – (a) on a Sunday or public holiday, or (b) on any day, between the hours of 8 p.m. and 8 a.m. the following day	76.05
(4) For medical services provided to an insured person at the same time and place as medical services as specified in item (2) or item (3) are provided to a different insured person	18.85

PART B

ADDITIONAL DIFFERENT RATES OF BENEFIT IN RESPECT OF PARTICULAR MEDICAL SERVICES

<i>Service</i>	<i>Rate of benefit</i> £
(1) Injection (where drug supplied by medical practitioner and syringe of disposable type used)	7.45
(2) Blood test	7.45
(3) Insertion of vaginal ring pessary (where appliance supplied by medical practitioner)	8.10
(4) Stitching of minor wound, etc.	7.45
(5) Minor operations (where no anaesthetic is used, or local anaesthetic only is used, and including the cost of stitching but excluding the cost of any anaesthetic used)	26.00
(6) Electrocardiogram	35.30
(7) Ear syringing	7.45
(8) Pregnancy urine test	16.40
(9) Letter from a medical practitioner to a consultant or specialist at the General Hospital referring a patient for examination	7.45
(10) Cervical smear	8.10
(11) Cryo-surgery	7.45

SCHEDULE 3

(Regulation 5)

REGULATIONS REPEALED

Health Insurance (Medical Benefit) (Jersey) Regulations 1967^[9]

Health Insurance (Medical Benefit) (No. 2) (Jersey) Regulations 1968^[10]

Health Insurance (Medical Benefit) (No. 4) (Jersey) Regulations 1972^[11]

Health Insurance (Medical Benefit) (No. 51) (Jersey) Regulations 2000^[12]

Health Insurance (Medical Benefit) (No. 55) (Jersey) Regulations 2001^[13]

Health Insurance (Medical Benefit) (No. 56) (Jersey) Regulations 2002^[14]

Health Insurance (Medical Benefit) (No. 58) (Jersey) Regulations 2004^[15]

Health Insurance (Medical Benefit) (No. 60) (Jersey) Regulations 2004^[16]

-
- [1] Chapter 26.500.
- [2] Chapter 26.900.
- [3] Chapter 15.560.20.
- [4] Chapter 20.725.
- [5] Chapter 26.400.
- [6] Chapter 26.300.
- [7] Chapter 26.100.
- [8] Chapter 26.600.
- [9] Chapter 26.500.18 (R&O.5005)
- [10] R&O.5290.
- [11] R&O.5646.
- [12] R&O.34/2000.
- [13] R&O.198/2001.
- [14] R&O.117/2002.
- [15] R&O.16/2004.
- [16] R7O.160/2004.