



BERMUDA

HEALTH INSURANCE (ARTIFICIAL LIMBS AND APPLIANCES) REGULATIONS
1971

SR&O 21 / 1971

[made under section 40 of the Health Insurance Act 1970 and brought into operation on 1 April 1971]

[NB Formerly the Hospital Insurance (Artificial Limbs and Appliances) Regulations 1971. Title amended, and references to "hospital insurance", "Hospital Insurance Fund" and "Commission" substituted by "health insurance", "Health Insurance Fund" and "Council" by 2004:22 s.19 & Sch para 2 effective 1 January 2006; references to "standard hospital benefit" substituted by "standard health benefit" by 2015 : 26 s. 10 effective 29 June 2015. These amendments are not individually noted.]

Standard health benefit in relation to artificial limbs

1 Where a contract of health insurance provides standard health benefit, such contract shall, in relation to any benefit payable thereunder in respect of expenses for the supply, maintenance, repair and renewal of any artificial limb, or other artificial appliance, be construed subject to the following provisions of these Regulations.

[Regulation 1 amended by BR 20/1990 effective 1 April 1990; by BR 18/1995 effective 1 April 1995; and by 2004:22 effective 1 January 2006]

Interpretation

2 In these Regulations "artificial appliance" means any non-surgical appliance, as approved by the Council, and any surgically implanted prosthetic appliance for the regulation, control or improvement of any bodily function but does not include any cosmetic, dental, ophthalmic or hearing appliance.

[Regulation 2 amended by 2017 : 25 s. 5 effective 1 June 2017]

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Liability limited

3 (1) Subject to paragraph (1A), the liability for expenses in respect of the supply, maintenance, repair and renewal of any artificial limb, or artificial appliance shall be that of the insurer under the contract of health insurance which is in effect on the relevant date.

(1A) Notwithstanding paragraph (1), where—

- (a) prior to the date of the coming into operation of these Regulations a person was not insured; and
- (b) that person, after that date, takes out a contract of health insurance,

the insurer shall not, before the expiration of twelve months next after the date of the taking out of such contract of health insurance, be liable in respect of artificial limbs or other artificial appliance, or both.

(2) The Liability of an insurer in respect of the supply of an artificial limb, orthopaedic brace or artificial appliance shall be limited to a maximum of \$100,000; however, where the amount of the maximum liability is not exhausted in the supply thereof then liability can only be in respect of the maintenance, repair or renewal of any artificial limb, orthopaedic brace or artificial appliance and such liability shall be limited to 80% of the unexhausted portion of the \$100,000.

(3) In this regulation “the relevant date” means—

- (a) in relation to an accident or injury, the date on which the accident or injury giving rise to the need for an artificial limb, or artificial appliance occurs; and
- (b) in relation to an illness, the date on which the surgical treatment for the removal of the natural limb or the implantation of the artificial appliance occurs or the date on which the initial use of the occurs.

[Regulation 3 amended by BR 20/1990 effective 1 April 1990; by BR 18/1995 effective 1 April 1995; by BR 21/1998 effective 1 April 1998; by 2004:22 effective 1 January 2006; by 2015 : 26 s. 7 effective 29 June 2015; paragraph (2) amended by 2017 : 25 s. 5 effective 1 June 2017]

[Amended by:

SR&O 70 / 1976
BR 24 / 1980
BR 13 / 1983
BR 20 / 1990
BR 18 / 1995
BR 21 / 1998
2004 : 22
2015 : 26
2017 : 25]