



PROTOCOLS FOR ACCESSING HEALTHCARE

Updated December 2021



COLINA



Contact our Medical
Unit at 396-5100

Choosing a medical provider (within The Bahamas)

Colina has an extensive local provider network. When accessing medical care, we strongly encourage you to choose a 'Participating Provider' from our list of network providers contained in our Bahamas Provider Directory, or at www.colina.com in order to minimize your out-of-pocket costs. You may also contact our in-house Medical Unit at 396-5100 who will be happy to assist you with coordinating your care. If you choose to receive medical care from a 'Non-Participating Provider' Colina will only pay 50% of Usual, Customary, and Reasonable Charges (URC), **after applicable co-payments, coinsurance & deductible have been met, and you will be responsible for the balance.**

Choosing a medical provider (outside The Bahamas)

Colina also has an extensive overseas provider network. Prior to travelling overseas to obtain medical care, you will be required to contact our in-house Medical Unit at 396-5100 who will coordinate your care through our overseas Third Party Administrator (TPA), Sanus Health Corporation. If you choose to receive medical care from a 'Non-Participating Provider', Colina will only pay 50% of Usual, Customary, and Reasonable Charges (URC), **after applicable co-payments, coinsurance & deductible have been met, and you will be responsible for the balance.**

If an insured requires care while on vacation or attending college/ university, contact our overseas healthcare partner Sanus Health at the telephone number on the back of your insurance ID card to coordinate your care.

Case Management & Coordination of Care

Case management services are provided by Colina's in-house Medical Unit and our overseas TPA Sanus Health Corporation, which comprises a number of certified Registered Nurses and physicians with specialized training. These experts use their clinical experience to evaluate the appropriateness and cost-effectiveness of medical care provided to our insureds, while in hospital and are able to coordinate all aspects of your care and provide guidance when you need it the most.

Pre-Certification: Getting approvals for services

Procedures or services requiring pre-certification or pre-authorization from the Company, prior to services being rendered, are outlined in detail in your Policy Contract under the Pre-Certification Program. A covered person must follow this program in order to receive full benefits payable under his/her policy. The provider office will typically obtain the required pre-certification, however, it is ultimately the covered person's or policyholder's responsibility to ensure that the pre-certification requirements have been met. If you fail to obtain pre-certification, **Colina will only pay 50% of Usual, Customary, and Reasonable Charges (URC), after applicable co-payments, coinsurance & deductible have been met, and you will be responsible for the balance.**



You will be required to obtain pre-certification prior to using any of the following services:

- Hospital Admission
- Overseas Care
- Surgical Services
- Rehabilitation, Skilled Nursing Facility Confinements
- Home Health Care
- Diagnostic Procedures such as MRI, CAT Scans
- Air Ambulance or Air Transportation
- In-patient treatment
- Behavioral Health Disorders such as drugs or alcohol addiction
- Human Organ Transplants
- Certain medications
- Return/Repatriation of Deceased

When is a referral required?

If you require specialist care locally or overseas, you must adhere to the following referral rules. Referrals are valid for one (1) month from the date of issue.



Overseas Care

Colina must coordinate and approve all non-emergency overseas medical services. It is your responsibility to provide Colina with a letter of medical necessity and referral from a Specialist in The Bahamas to a Specialist overseas for a second opinion or for treatment not available locally. Should you require emergency care while travelling, please access the nearest medical facility and/or contact Sanus Health Corporation, using the number on the back of your ID card. If you fail to obtain a referral, which must be approved by Colina, prior to obtaining non-emergency medical services overseas, **Colina will only pay 50% of Usual, Customary, and Reasonable Charges (URC), after applicable co-payments, coinsurance & deductible have been met, and you will be responsible for the balance.**

Local Care

To obtain the following services, we require a Referral from your attending physician, prior to obtaining medical services. If a Referral is not obtained, prior to obtaining medical services, Colina will only pay 50% of Usual, Customary, and Reasonable Charges (URC), after you have paid your applicable out-of-pocket expenses, and you will be responsible for the balance.

- Counseling
- Prosthetics
- Private Duty Nursing/Home Health Care
- Sleep Studies
- Wound Care
- Chiropractic care
- Physiotherapy
- Speech Therapy
- Occupational Therapy
- Masseurs Therapy

What to do in the event of a local medical emergency

In the event of a medical emergency, call 911 or go to the nearest private hospital emergency room. You will be required to make payment as stipulated in your Schedule of Benefits and according to the classification of the care administered. A referral is not required for emergency care. The Pre-Certification Program requires that a covered person, or someone on his behalf, contact the Company as soon as possible, but no later than 48 hours after a weekday admission, or within 72 hours if the admission is on a weekend or legal holiday, for an Emergency confinement to hospital.

What to do in the event of a medical emergency overseas

In the event of a medical emergency while overseas, go to the nearest hospital emergency room. A referral is not required for emergency care overseas. The Pre-Certification Program requires that a covered person, or someone on his behalf, contact the Company as soon as possible, but no later than 48 hours after a weekday admission, or within 72 hours if the admission is on a weekend or legal holiday, for an Emergency confinement to hospital.

Your health insurance ID card

All covered persons under your health plan will receive an ID card with their own Member ID. Your Member ID is on the card which identifies you as a covered person. You are required to present this card whenever you visit a provider to receive medical services.

