



Burton Hospitals NHS Foundation Trust



OVERSEAS VISITOR POLICY

Trust Executive Committee

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Burton Hospitals NHS Foundation Trust POLICY INDEX SHEET

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POLICY FRAMEWORK

CONTENTS

Paragraph No	Subject	Pa e No.
1	Introduction	1
2	Purpose	1
3	Definitions	1
4	Duties and Responsibilities of Staff	2
5	General Guidance	2
6	Identification	3
7	Assessment of Eligibility	4
8	Exemptions	5
9	EEA Visitors	6
10	Reciprocal Agreements	7
11	Invoicing	9
12	Information	9
13	Claim Forms	10
14	References	10
Appendix 1:	Patient Status Questionnaire	11
Appendix 2:	Agreement to Pay Form	13
Appendix 3:	Exempt Diseases	15

Burton Hospitals NHS Foundation Trust

OVERSEAS VISITOR POLICY

1. INTRODUCTION

- 1.1 This policy is concerned with the management of charges to individuals who do not normally live in the UK (overseas visitors) when they seek treatment from the Burton Hospitals NHS Foundation Trust
- 1.2 National guidance on the charging of overseas visitors for NHS treatment is in accordance with Section 175 of the NHS Act 2006, National Health Service (Charges to Overseas Visitors) Regulations Guidance on Implementing the Overseas Visitors Hospital Charging Regulations 2015 and related documents published alongside the Guidance.
- 1.3 The National Health Service (NHS) provides healthcare free of charge to people, who are ordinarily resident (OR) in the United Kingdom (UK). People who are not OR in the UK are not automatically entitled to use the NHS free of charge. Residency is therefore the main qualifying criterion, applicable regardless of nationality, ethnicity or whether the person holds a British passport, or has lived and paid taxes or National Insurance contributions in the UK in the past.
- 1.4 The charging regulations place a legal obligation on NHS Trusts in England to establish if people to whom they are providing NHS hospital services are not OR in the UK. If they are found not to be ordinarily resident in the UK then charges may be applicable for the NHS services provided. In these cases the Trust must charge the person liable (usually the patient) for the cost of NHS services.

2. PURPOSE

2.1 This policy has been produced to provide clear guidelines to staff for the management of access by overseas visitors to Trust services.

3. **DEFINITIONS**

- 3.1 Overseas Visitor someone who is not ordinarily resident in the UK.
- 3.2 **Ordinarily Resident** A person who is **NOT** ordinarily resident in the UK simply because they have British nationality, hold a British passport, are registered with a GP, have an NHS number, own a property in the UK or have paid (or are currently paying) national insurance contributions and taxes in the UK. **OR** is defined; living in the United Kingdom voluntarily and for settled purposes as part of the regular order of their life for the time being. There must be identifiable purpose for their residence here, there can be one purpose or several, and it may be for a limited period. The purpose of living in the UK must have a sufficient degree of continuity to be properly described as "settled".

- 3.3 **EEA Visitors** visitors who are nationals of or ordinarily resident in a European Economic Area (EEA) country. Due to EEA Regulations the charging regulations are different for EEA visitors and those visitors who are nationals or residents of Non-EEA countries.
- 3.4 **EHIC** The European Health Insurance Card entitles European visitors who are insured through their own State healthcare system to access emergency NHS treatment without charge. The card details must be provided to gain this entitlement.
- 3.5 S2 The S2 (formerly E112) route entitles visitors to state-funded elective treatment in another EEA country or Switzerland. This applies to visitors from the EEA or Switzerland who wish to have planned treatment in the UK.
 Non-EEA Visitors- A non-EEA national without Indefinite Leave to Remain can only pass the OR test if they are not subject to immigration control e.g. they are a diplomat posted to the UK, or have a right of residence here by virtue of their relationship with an EEA national who is resident here.
- 3.6 **Payment By Results Tariff (PBR)** The national tariff schedule that the NHS uses for charging for treatment
- 3.7 **Market Forces Factor (MFF)** The centrally calculated and nationally published percentage that is added to the NHS tariff to reflect the individual cost pressures of each NHS Trust.

4. DUTIES AND RESPONSIBILITIES OF STAFF

- 4.1 The Director of Finance is responsible for ensuring that Trust policy is in line with statutory duties and national guidance and that charges are made where applicable.
- 4.2 It is the responsibility of all staff to ensure that this policy is adhered to and that the **Overseas Visitors Officer** is informed about any patient who may not be eligible to access free NHS care.

5. GENERAL GUIDANCE

- 5.1 Enquiries regarding overseas visitors should be made to the Overseas Visitors Officer. If the issue is still unclear, advice will be sought from the Department of Health or the Trust's Legal Advisors.
- 5.2 An individual department or person cannot intervene in individual cases. The decision about whether an individual patient is liable for charges rests with the Overseas Visitors Manager acting for the Director of Finance.
- 5.3 All staff must refrain from giving advice on and individual's eligibility for free treatment unless the Overseas Visitors Officer has advised them accordingly.

- 5.4 In order for the Trust to recover all income in respect of the treatment of overseas visitors, all activity must be notified to the Overseas Visitors Office and recorded on the Meditech Patient Record.
- 5.5 The Overseas Visitors Officer shall work closely with administration staff, bookings staff, ward staff and departmental clinical staff as required in order to ensure that effective communication takes place in respect of overseas visitor activity.
- 5.6 The Overseas Visitors Office will liaise with external bodies such as the Department of Health, Home Office, University and Local Counter Fraud Service as required.

6. IDENTIFICATION

6.1 Emergency Department (ED) Attenders

- 6.1.1 There is no exemption from charge for 'emergency' treatment (other than that given within the 4 walls of the ED) The Trust will always provide immediately necessary treatment if it is to save the patient's life. In this instance treatment must not be delayed whilst the patient's chargeable status is determined. Failure to do so is in direct breach of the Human Rights Act 1998. Charges still apply for immediately necessary treatment if the overseas visitor is not themselves exempt from charge.
- 6.1.2 Although no charges can be made to a patient for treatment carried out in ED, if the patient has a European Health Insurance Card (EHIC) the cost of treatment can be recovered centrally from the European Economic Area (EEA) member state by the Overseas Visitors Office back into the NHS. The Trust then receives an additional payment in respect of all successful EHIC claims, including ED, Outpatient and Inpatient episodes.
- 6.1.3 All patients attending ED must be asked where they have been lawfully resident for the last 6 months. Anyone whose answers indicate that they have not been resident in the UK for the last 6 months must be asked to complete a Pre-Registration Form (Appendix 1).
- 6.1.4 ED staff will ask to see any supporting documents and then photocopy any passports, visas or EHIC's that the patient presents. They will put the Pre- Registration Form (Appendix 1) and any photocopied documents in to the Overseas Visitors tray in the ED reception

6.2 Ward Admissions

6.2.1 If ward staff identify, after admission, that a patient may not be resident in the UK then they will ask the patient to complete a Pre-Registration Form (Appendix 1) and send it, along with any copies of documents, to the Overseas Visitors Office.

6.3 Outpatient Appointments

6.3.1 If outpatient appointment staff identify that a patient may not be resident in the UK then they will contact the Overseas Visitors Office urgently so that the patient can be

assessed for eligibility before the patient is given an appointment. If the referral is a two week rule or urgent, the appointment should be made immediately.

6.4 GP Referrals

6.4.1 In cases where the GP referral letter indicates that the patient has recently arrived in the UK or is a resident abroad then the booking team will either contact Overseas Visitors Office or send them a copy of the letter. If in the opinion of the medical staff the appointment is not classed a two week rule or urgent referral, treatment eligibility must be established before any appointments are made or any treatment is given.

6.5 Elective Admissions that clinicians consider non-urgent

- 6.5.1 Where the patient is chargeable, the Trust should **NOT** initiate any treatment process, e.g. by putting the patient on a waiting list, until a deposit equivalent to the estimated full cost of treatment is obtained. If no deposit is obtained then the Trust should **NOT** perform the procedure.
- 6.5.2 A patient from an EEA member state can be added to a waiting list in the same way as an NHS patient, as long as they have an S2 (previously E112) form from their member state authorising payment for their treatment in the UK. The Overseas Visitors Officer will submit the claim to the EEA member state to ensure funding is returned centrally to the NHS.

7. ASSESSMENT OF ELIGIBILITY

- 7.1 All patients who provide information that suggests they may not be eligible to access free NHS treatment will be asked to complete a Pre-Registration Form (<u>Appendix 1</u>). These will then be sent to the Overseas Visitors Office for assessment.
- 7.2 The Overseas Visitors Officer will conduct a patient interview with any patient where further information is required to establish their potential overseas status after completing a Pre-Registration Form (Appendix 1)
- 7.3 In accordance with Department of Health Regulations and Guidance, it is the responsibility of the patient to prove their entitlement to access NHS care. Failure to provide sufficient evidence to prove eligibility will usually result in an overseas visitor being recorded as NHS Chargeable and charges will be incurred.
- 7.4 If a patient has indicated that they are a visitor to the UK or that they are on holiday, the overseas address must be entered onto the Meditech system as the permanent address and the UK address as a temporary address.
- 7.5 Once the status of the patient has been established the Overseas Visitors Officer will get a signed Overseas Agreement to Pay Form from the patient. (Appendix 2).
- 7.6 Patients deemed to be chargeable must show insurance details and acquire authorisation or provide payment equal to the value of the expected total cost of treatment to be received before treatment is commenced, unless urgent or needed immediately. If that is not possible, for example, due to their admission taking place at a

weekend then payment or authorisation must be provided on the next working day or as soon as possible but should be prior to discharge.

8. EXEMPT SERVICES

- 8.1 Treatment is chargeable to Overseas Visitors with the exception of:
 - Treatment in Accident & Emergency
 - Family Planning Services
 - Diseases deemed exempt for Public Health reasons (Appendix 3)
 - Sexually transmitted diseases, including human immunodeficiency virus (HIV)
 - Treatment given to people detained, or liable to be detained, or subject to a community treatment order under the provisions of the Mental Health Act 1983, or other legislation authorising detention in a hospital because of mental disorder
 - Treatment (other than that covered by the Mental health Act 1983 exemption above) which is imposed by, or included in, an order of the Court
 - Services provided other than in a hospital or by a person who is employed to work for, or on behalf of, a hospital. This means that services provided in the community will be chargeable only where the staff providing them are employed by or on behalf of an NHS hospital
 - People who have paid the health surcharge (or were exempt from paying it) whose visa is more than 6 months length remain valid.
 - Refugees and asylum seekers, including failed asylum seekers supported by the Home Office under section 4 (2), of the Immigration and Asylum Act 1999 or s21 of the National Assistance Act 1948. (Failed asylum seekers not supported by the Home Office/LA are chargeable from the date their appeal is rejected but courses of treatment under way will remain free)
 - Those supported under section 95 of the IAA 1999.
- Children in the care of the Local Authority
- Victims and suspected victims of human trafficking and their family members.
- Treatment required for a physical or mental condition caused by:
 - Torture; Female genital mutilation; domestic violence or sexual violence except where the visitor has travelled to the UK for the purpose of seeking that treatment.
- Exceptional humanitarian reasons as approved by the Secretary of State for Health

- NATO personnel and attached civilians and their family members
- People who receive UK war pensions and their family members
- Members of HM UK forces and their family members
- People working abroad as crown servants, or for the UK Government, or for the British Council or the Commonwealth War Graves Commission who were ordinarily resident in the UK prior to being posted overseas and their family members
- Prisoners and detainees
- People working on ships registered in the UK
- Any UK state pensioner resident in another EEA member state or Switzerland who has registered an S1 document in that state. The person's spouse/civil partner and children under 18 are also exempt when lawfully visiting the UK with them, unless they are entitled to hold a non-UK EHIC.

9. EEA VISITORS

- 9.1 Arrangements for European Union Overseas Visitors are governed by the <u>European Union (EU) Social Security Regulations (Regulations (EC) 883/2004 and 987/2009 for EU member states, and Regulations (EEC) 1408/71 and 574/72 for Iceland, Liechtenstein, Norway and Switzerland).</u>
- 9.2 In practice this applies to residents of other EEA states and Switzerland, including third country nationals, who are entitled to hold a European Health Insurance Card (EHIC) issued by their country of residence or, in some cases, the country which is the 'competent authority' for them.
- 9.3 For the purposes of the Overseas Visitors Charging Regulations, the EEA comprises all the EU member states (Austria, Belgium, Bulgaria, Croatia, Cyprus (Southern), Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Republic of Ireland, Romania, Slovakia, Slovenia, Spain, Sweden and the UK), plus Iceland, Liechtenstein, Norway and Switzerland.
- 9.4 The EHIC provides for free NHS treatment that is medically necessary during their visit. Visitors from Switzerland or the EEA (except Republic of Ireland) that do not provide an EHIC/PRC must be charged for their NHS hospital treatment (except for treatment within the Accident & Emergency Department), unless a different exemption applies to them under the Charging Regulations. In order for the UK to make a claim to the relevant EEA state or Switzerland for treating their residents, it is imperative that the data from a valid EHIC/PRC (for unplanned treatment) or S2/or Maltese quota number (for planned treatment) is recorded and reported to the Overseas Healthcare team at the DWP.

9.5 Visitors from the Republic of Ireland do not need to provide an EHIC but simply must provide evidence that they are resident in the Republic of Ireland in order to receive free NHS treatment that is medically necessary during their visit.

10. RECIPROCAL AGREEMENTS

- 10.1 Within the reciprocal agreements there are a number of variations in the level of free treatment afforded to visitors travelling to the UK. Generally, only immediate medical treatment is to be provided free of charge, to allow the overseas visitor to return home for other needs. Also, the agreements do not usually apply when the person has travelled to the UK for the purpose of obtaining healthcare. However, this is not always the case.
 - 10.2 Patients covered by a Reciprocal Agreement are as follows:

Country	Level of cover provided (see key)	Further information
Anguilla	1*	Applies to all residents of that country. Can also refer four patients to the UK for free NHS hospital treatment.
Australia	1*	Applies to all residents of that country.
Barbados	1*	Applies to all residents of that country.
Bosnia and Herzegovina	3	Applies to all insured persons of that country.
British Virgin Islands	1*	Applies to all residents of that country. Can also refer four patients to the UK for free NHS hospital treatment.
Falkland Islands	4	Applies to all residents of that country. Can refer an unlimited number of patients to the UK for free elective treatment.
Gibraltar	3	Applies only to citizens resident in that country when that citizen is not expected to stay in the UK for more than 30 days. Can also refer an unlimited number of patients to the UK for free elective treatment (see 10.4).
Isle of Man	2	Applies to all residents of the Isle of Man for a period of stay in the UK that has not exceeded, nor is expected to exceed, three months.
Jersey ₁₂	2	Applies to all residents of Jersey for a period of stay in the UK that has not exceeded, nor is expected to exceed, three months.
Kosovo	3	Applies to all insured persons of that country
Macedonia	3	Applies to all insured persons of that country.

Montenegro	3	Applies to all insured persons of that country.
Montserrat	1*	Applies to all residents of that country. Can also refer
		four patients per year for free NHS hospital treatment.
New Zealand	2	Applies only to citizens resident in that country.
Serbia	3	Applies to all insured persons of that country.
St Helena	1*	Applies to all residents of that country. Does not include
		Ascension Island or Tristan da Cunha. Can also refer
		four patients per year for free NHS hospital treatment.
Turks and	1*	Applies to all residents of that country. Can also refer
Caicos Islands		four patients per year for free NHS hospital treatment.

10.3 Key:

- 1) Immediate medical treatment only.
- Only treatment required promptly for a condition which arose after arrival into the UK or became, or but for treatment would have become, acutely exacerbated after such arrival. Services such as the routine monitoring of chronic/pre-existing conditions are not included and free treatment should be limited to that which is urgent in that it cannot wait until the patient can reasonably return home.
- 3) All treatment on the same basis as for a person insured in the other country, including services such as routine monitoring of pre-existing conditions, but not including circumstances where a person has travelled to the other country for the purpose of obtaining healthcare.
- 4) All treatment free on the same terms as for an eligible UK resident (an ordinary resident), including elective treatment.
- 10.4 For all levels of coverage, it will be for a doctor or dentist employed by the relevant NHS body to provide clinical input into whether required treatment meets a specific level of coverage.
- 10.5 * For these countries, the agreement will also apply to those persons requiring treatment if they are a member of the crew, or a passenger, on any ship, vessel or aircraft travelling to, leaving from or diverted to the UK and the need for urgent treatment has arisen during the voyage or flight.
- 10.6 Any patients coming to the UK from these countries for elective treatment need to be assessed by Overseas Visitors Office to ensure that the relevant authorisation is received from the reciprocal country.
- 10.7 All other overseas visitors will be deemed to be NHS Chargeable.

11. INVOICING

- 11.1 Patients who are identified as potentially not fitting the criteria for free access to NHS care, i.e. not ordinarily resident in the UK, will be asked to complete the Pre-Registration Form (Appendix 1), as detailed in section 3.
- 11.2 Any patient not eligible for free NHS care is deemed to be NHS Chargeable. The Overseas Visitors Office will ensure an invoice is raised from the information given on the Overseas Patient Agreement to Pay Form, (Appendix 2).
- 11.3 The invoice raised will be based on the methodology used in the Charging Regulations 2015, which is based on Payment by Results (PBR) Tariff plus the Trust Market Forces Factor (MFF) with a 50% mark up for patients resident outside the EEA
- 11.4 For any non urgent elective Overseas Visitors who are not covered by an S2 form, an invoice will be raised by the Overseas Visitors Office as detailed above and payment must be received in advance of the admission.
- 11.5 Overseas Visitors Office will make the appropriate arrangements for any planned treatment charges under an S2 to be made to the correct EEA member state.
- 11.6 The Overseas Visitors Office will be responsible for collecting payments in line with Trust guidelines. They will liaise with the Finance Office regarding any outstanding accounts.
- 11.7 The Overseas Visitors Office will follow due process to report any debts by non-EEA nationals that are over £1,000 and have been outstanding for 3 months to the Department of Health, in line with the Charging Guidelines 2015. This results in that person being normally refused entry to the UK and encourages payment of debt.

12. INFORMATION

- 12.1 Records will be maintained by the Overseas Visitors Office including the following information in accordance with DPA requirements:
 - Patient's name, address and telephone number
 - Completed Patient Pre-Registration Form
 - Copies of any Passports/Visas
 - Completed Agreement to Pay Form
 - Health Insurance details for insured patients
 - Details of all treatment received, admission and discharge dates
 - Home Office Evidence and Enquiry responses
 - Correspondence sent to and received from patient
 - Invoices raised
- 12.2 No copies of this information are to be kept in the patient notes.

13. CLAIM FORMS

13.1 Patients may submit insurance claim forms to the Overseas Visitors Office who will complete relevant sections and then ensure other relevant sections are completed by the Consultant.

14. REFERENCES

NHS Act 2006

National Health Service (Charges to Overseas Visitors) Regulations 2015

Guidance on Implementing the Overseas Visitors Hospital Charging Regulations 2015

Mental Health Act 1983

Immigration and Asylum Act 1999

European Union (EU) Social Security Regulation (EC) 883/2004

European Union (EU) Social Security Regulation 987/2009

Regulation (EEC) 1408/71

Regulation (EEC) 574/72

APPENDIX 1: PRE-REGISTRATION FORM

Pre-Attendance Form

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Please tell us which of the following documents you currently hold (check all that apply):

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APPENDIX 2: AGREEMENT TO PAY FORM

AGREEMENT TO PAY FORM NHS

Chargeable Overseas Visitor

To be completed by the Patient or their representative, in block capitals:

Name of Patient:	Date of Birth:
UK Address:	
Home Address:	
Name of person giving undertaking:	
UK Address:	
Home Address:	
Relationship to Patient:	
I accept liability for payment of the charges determ accommodation, treatment, investigations and all cpatient, including all diagnostic tests, procedures, from this hospital course of treatment.	other services provided to me as a chargeable
I accept that the Trust reserves the right to require and conditions as enclosed.	payment of its charges in advance and terms
Signed:	Date:
Witnessed:	Status:
Do you have Private Health Insurance? If YES please fill in the details below:	Yes No
Policy No:	Authorisation Code:
Insurance Company:	
Address:	
	Telephone:
In the event of non-payment or a payment shortfa	all, under the terms of the patient's medical

insurance agreement, I undertake to settle the outstanding balance upon request.

TERMS OF BUSINESS FOR NHS CHARGEABLE OVERSEAS VISITOR

Introduction

Following completion of a Pre-registration form (Appendix 1) the patient has been deemed to be chargeable and the Trust is required under the provisions of section 175 of the National Health Service Act 2006 and other statutes and NHS regulations to make charges in respect of Overseas Visitors.

General Information

A written undertaking to pay the charges must be given before a patient can be treated as an Overseas Visitor. The hospital charges used are the nationally agreed NHS tariff (plus 50% for non-EEA patients).

Insured Patients

If the patient is insured they must indicate their insurance details on the Agreement to Pay Form, retaining one copy only for your records.

It should be noted that being insured does not mitigate the patient's liability as an individual to pay for any and all treatment given by the Trust should the insurer, for whatever reason, not agree to reimburse the Trust in respect of any and all charges levied by the Trust for care.

The patient should check with the insurer that the policy held covers the treatment. Some insurance companies will provide an authorisation number for each episode of treatment, which should be indicated on the Agreement to Pay Form.

Where the patient is covered by an insurer, the Trust will expect that payment of any and all charges not covered by the policy and/or which the insurer refuses to pay for within 14 days of the date of the Trust's invoice.

Non-insured Patients

If the patient has elected to pay for the treatment themselves, this must be indicated this on the Agreement to Pay Form.

Methods of Payment

Paying by cheque: Cheques should be made payable to 'Burton Hospitals Foundation Trust' and crossed account payee only. You should send your cheque in the envelope with your Agreement to Pay Form.

Paying by debit/credit card: Debit/credit card payments should be made to the Treasury office (Finance Department) by phone or through personal visit. Please ensure that you have your card details available including the card company, card number, card expiry date and the full name of the person listed on the card. Please telephone 01283 566333 extension 5969. Note all card payments incur a 2% fee.

Paying by cash: Cash payments should be made to the cashiers Office by personal visit within normal working hours of 9:00 am to 3.00 pm, Monday to Friday.

Queries

If you do have any queries please do not hesitate to contact the Overseas Visitors Manager on 01283 566333 extension 5969

APPENDIX 3: EXEMPT DISEASES

EXEMPT DISEASES

Certain diseases are exempt for Overseas Visitors where treatment is necessary to protect the wider public health. This exemption from charge will apply to the diagnosis even if the outcome is a negative result. It will also apply to the treatment necessary for the suspected disease up to the point that it is negatively diagnosed. It does not apply to any secondary illness that may be present even if treatment is necessary in order to successfully treat the exempted disease. These diseases are defined in the Department of Health Guidance on Implementing the Overseas Visitors Hospital Charging Regulations (April 2015)

The exempt diseases are:

- Acute encephalitis
- Acute poliomyelitis
- Anthrax
- -Botulism
- Bruscellosis
- √Cholera
- Diphtheria
- Enteric fever (typhoid and paratyphoid fever)
- Food poisoning
- Haemolytic uraemic syndrome (HUS)
- Human Immunodeficiency Virus (HIV)
- Infectious bloody diarrhoea
- Invasive group A streptococcal disease and scarlet fever
- Invasive meningococcal disease (meningococcal meningitis, meningococcal septicaemia and other forms of invasive disease)
- Legionnaires' Disease
- Leprosy
- Leptospirosis
- √Malaria
- Measles
- -Mumps
- Pandemic influenza (defined as the 'Pandemic Phase'), or influenza that might become pandemic (defined as the 'Alert Phase') in the *World Health Organization's Pandemic Influenza Risk Management Interim Guidance*
- Plaque
- Rabies
- √ Rubella
- Sexually transmitted infections
- Severe Acute Respiratory Syndrome (SARS)
- Smallpox
- √ Tetanus

- ▼ Tuberculosis
- Typhus
- Viral haemorrhagic fever (which includes Ebola)
- Viral hepatitis
- Whooping cough
- Yellow fever