

## Charges to Overseas Visitors – A Guide for Practices

Guidance is derived from The National Health Service (Charges to Overseas Visitors) (Scotland) Regulations 1989, as amended.

Entitlement to NHS care in Scotland is generally based on residency status, not nationality. Visitors to Scotland (i.e. those not ordinarily resident in Scotland for more than 3 months of each year, or 6 months for state pensioners who spend the other 6 months in a member state of the European Economic Area) are **NOT** entitled to NHS care without charge unless they are accepted for care under one of the negotiated reciprocal health care agreements or fall within a specific exemption category as set out in the above mentioned Regulations.

Residents of EEA countries (and Switzerland), who are insured under their country's health system, are now entitled, on the basis of the European health insurance card or its equivalent, to all medically necessary treatment during a temporary stay in another Member State, taking into account the nature of the care and the expected length of stay. Necessary treatment, in this context, includes treatment of chronic and existing illnesses and is aimed at enabling an insured person to remain in another Member State, under safe medical conditions, for the duration of their planned length of stay. The revised provision does not extend to elective treatment where the aim of the visit is specifically to obtain medical treatment.

The term overseas visitor may be defined as a person not Ordinarily Resident in the United Kingdom and it is on this basis access to the NHS is determined.

Visitors who fall within the following categories are exempt from private charges and are entitled to receive treatment under the NHS.

- Residents of the United Kingdom for the past 12 months
- Those in employment in the United Kingdom \*
- Family Planning Services
- Anyone coming to the United Kingdom to take up permanent residence \*
- An overseas student who is pursuing a full time course of study from their first day of arrival in this country as are their dependants. Dependants are defined as spouse, registered civil partner and children under 16, or under 19 if that child is also pursuing a full time course of study. The exemption from NHS charges should continue for one month after the conclusion of the course of study.
- Members of HM Forces, Crown Personnel and NATO Personnel
- Workers posted temporarily to another EEA member state \*+
- UK residents working overseas who have had at least 10 years continuous residence in the UK and have been working abroad for not more than 5 years or have been taking home leave in the UK at least once every two years or have a contractual right to do so \*
- Seamen on UK registered ships

- Au Pairs that have completed 12 months residence in the UK (but see category two above, if the Au Pair is from a country listed in Category Two, then they are entitled to receive the same entitlements)
- Offshore workers on the UK sector of the continental shelf where the operator has a principle place of business in the United Kingdom
- Diplomatic staff who are present in the UK as accredited diplomats and other members of embassy, consular or Commonwealth High Commission
- Those requiring Oxygen Therapy
- Those suspected of having a reportable infectious disease
- Those in receipt of a UK war pension
- Refugees on production of relevant supporting Home Office or other documentation
- Prisoners and detainees
- Those who are lawfully resident in the United Kingdom
- Those who have been receiving treatment, on the basis that no charge would be made, to complete that course of treatment on the same basis, where it has been established that the person does not meet the residence qualification
- Residents of EEA countries (and Switzerland), who are insured under their country's health system on the basis of the European Health Insurance Card or its equivalent for all medically necessary treatment during a temporary stay, including treatment of chronic and existing illnesses. But not for elective treatment where the aim of the visit is specifically to obtain medical treatment.
- British state pensioners\* who spend up to 6 months of the year living in another EEA State.

\* Including his/her dependants  
 + and for known pre-conditions

Practices should insist upon a letter from the student's academic institution showing acceptance on a full time course of study, the start date and duration of the course of study – this would give the practice an assurance as to eligibility and a date when this eligibility ceases.

The regulations direct that no charge shall be made in respect of any services forming part of the health service provided for an overseas visitor for a range of medical issues, amongst others:

- at a hospital accident and emergency department, casualty department, unless and until he has been accepted as an in-patient at the hospital for treatment of the condition in respect of which such services are provided; or
- otherwise than at, or by staff employed to work at, or under the direction of, a hospital; or
- for treatment in respect of a disease listed in Schedule 1 (see below); or
- at a special clinic for the treatment of sexually transmitted diseases
- who is detained in a hospital, or received into guardianship, under Mental Health legislation

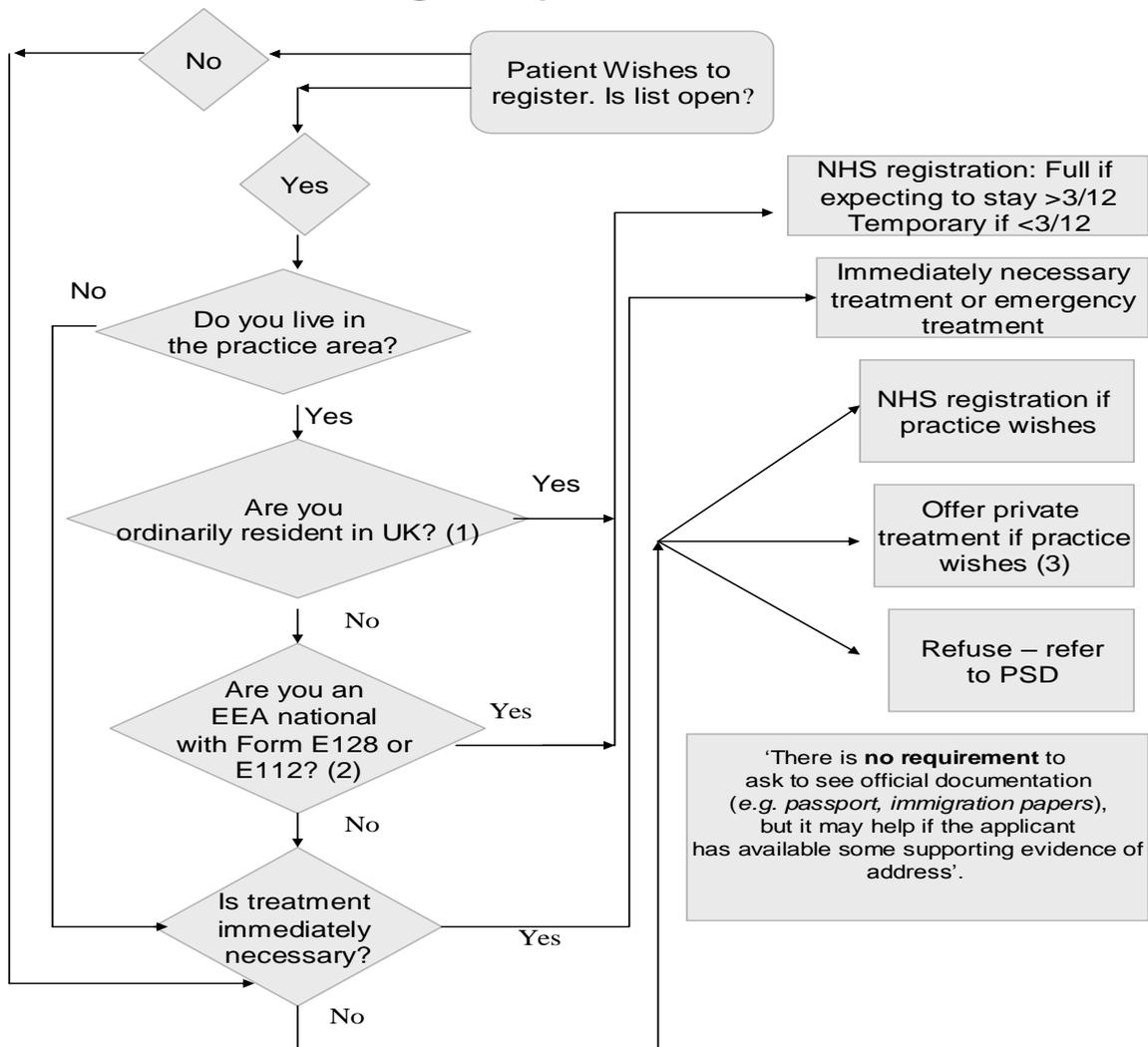
## SCHEDULE 1

### Regulation 3(c)

#### DISEASES FOR THE TREATMENT OF WHICH NO CHARGE IS TO BE MADE

Anthrax  
Bacillary dysentery  
Chickenpox  
Cholera  
Diphtheria  
Erysipelas  
Food poisoning  
Legionellosis  
Leptospirosis  
Lyme disease  
Malaria  
Measles  
Membranous croup  
Meningococcal infection  
Mumps  
Paratyphoid fever  
Plague  
Poliomyelitis  
Puerperal fever  
Rabies  
Relapsing fever  
Rubella  
Scarlet fever  
Typhoid fever  
Smallpox  
Tetanus  
Toxoplasmosis  
Tuberculosis  
Severe Acute Respiratory Syndrome  
Typhus fever  
Viral haemorrhagic fevers  
Viral hepatitis  
Whooping cough

# Patient Eligibility Criteria



## Remember:

- Asylum seekers and refugees are entitled to NHS treatment as if they were ordinarily resident in the UK.
- Any GP who refers an overseas visitor to hospital should warn the patient that she/he is liable to be charged by the hospital, even if the GP has treated the patient under the NHS.
- The question of whether a patient comes from a country with bilateral healthcare agreements with the UK is generally irrelevant to primary care but may have more significance for hospital treatment.
- All hospitals are entitled to establish whether a person is “ordinarily resident” in the UK, as this should give a right to secondary care.

## Definitions

**(1) 'Ordinarily resident':** For the purposes of both primary and secondary care, a person is regarded as ordinarily resident if he or she is living in the UK for a 'settled purpose'. Generally this means work or study, and the purpose must have sufficient continuity to be properly described as settled. This usually means intending to stay for at least 3 months  
**Asylum Seekers:** 'A person who has formally applied for asylum in the United Kingdom is entitled to NHS treatment without charge for as long as their application (including appeals) is under consideration' (Department of Health, 2003).

**(2) The following countries are in the EEA:**

Austria, Belgium, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Slovak Republic, Slovenia, Spain, Sweden, United Kingdom, Iceland\*, Liechtenstein\*, Norway\*, Switzerland\*\*.

\*These countries are in the EEA, but are not members of the European Union.

\*\* Switzerland is not in the EEA, but an international treaty means that from 1 June 2002 Swiss nationals have a similar right to live in the UK as EEA nationals.

**E128 Form:** EEA Nationals who have a form E128 are entitled to treatment on the same basis as UK residents. They are issued to people who have come to the UK to work or study, and any members of their family who accompany them.

**E112 Form:** Patients from EEA member countries with E112 are eligible for free medical treatment of the specified condition.

**(3)** The Department of Health Circular 1999/018 encourages GPs in such circumstances to treat the patient, on a private, paying basis.