

PATIENT LEAFLET

As a visitor to the United Kingdom, you may be required to pay for your NHS funded secondary care treatment¹. This applies regardless of your nationality, having an NHS number, being registered at a GP practice or being referred for care by your GP. It applies even if you are a former UK resident or are a past or present UK tax payer.

If you consider that you are not a visitor to the UK and instead are ordinarily resident here, or that you are otherwise eligible to free NHS care, you may have to provide documentary evidence to support this.

If you are liable for the cost of NHS care you are advised to have adequate travel/health insurance to cover your health needs.

How your eligibility may be assessed

Providers of NHS funded secondary care are required to check all patients for their eligibility to treatment without charge. This is done by assessing if a patient is ordinarily resident in the UK or exempt from charge. It is your responsibility to show that you are entitled to this treatment without charge by providing documentary evidence. If you do not provide satisfactory evidence to support this, you will be liable for the cost of any treatment you receive.

If you consider yourself to be ordinarily resident in the UK, you should be prepared to provide evidence of this such as by providing copies of:

- i. at least one item with your photo (passport/national ID card/UK Biometric Residence Permit/Driving Licence); and
- ii. at least one item to prove where you live (utility or Council Tax bill; bank or building society statement or rental agreement).
- iii. If you are a EU national, proof of your settlement scheme status (www.gov.uk/view-prove-immigration-status)

If you are in the UK on a temporary stay of more than 6 months, and have paid the Immigration Health Surcharge at the time of your visa application, you will receive free NHS care whilst your visa is valid, except for assisted conception services in England and charges that residents have to pay. Be prepared to provide a sharecode of you eVisa via the GOV.UK website. (www.gov.uk/view-prove-immigration-status)

¹ Secondary care is treatment beyond what is considered primary care. Primary care includes general practice, community pharmacy, dental, and optometry (eye health) services. Secondary care is often, though not always, provided in a hospital setting.

If you are a visitor or student from the EEA you should be prepared to show a valid European Health Insurance Card (EHIC), S1 or S2 form – see section below.

If you are otherwise exempt from charge, e.g. you are from a country that has a reciprocal healthcare agreement with the UK, such as Australia, you will need to provide evidence of this. A full list of exemptions can be found on the Gov.UK page:

<https://www.gov.uk/government/publications/guidance-on-overseas-visitors-hospital-charging-regulations/summary-of-changes-made-to-the-way-the-nhs-charges-overseas-visitors-for-nhs-hospital-care>

Visitors from EEA countries and Switzerland²

If you are a visitor or a student from the EU and require medical treatment, you need to provide a EHIC to ensure you are not charged for your healthcare. Your EHIC will cover you for all medically necessary treatment during your stay although you should keep in mind that the UK's healthcare system may be different from that in your home country and therefore your EHIC might not cover everything that you would expect to get free in your country. You should also be aware that the EHIC is not an alternative to travel insurance and will not cover any private medical healthcare or being flown back home, or lost or stolen property.

Some visitors from Norway, Iceland, Liechtenstein and Switzerland are eligible to access medically necessary NHS healthcare in England without charge. Please ensure you check with the relevant health authority where you live before travelling to the UK.

If you are a visitor from Ireland or Norway you may use alternative forms of evidence to access medically necessary healthcare, for example a valid passport/proof of residence.

Planned treatment is also not covered by the EHIC and unless you have valid documentation (an "S2" form) you may be charged for treatment.

Services free to all

Anyone can register with a General Practitioner for NHS primary care services. Primary care services are free to all, wherever provided. Some services or treatments carried out in an NHS hospital are also free of charge to all people. These include:

- accident and emergency services (not including emergency treatment if you are admitted to hospital);

² This includes the EU countries (Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Republic of Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, The Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden) plus Iceland, Liechtenstein Norway and Switzerland.

- family planning services (this does not include maternity care or termination of pregnancy);
- diagnosis, and, if positive, treatment for most infectious diseases, eg Covid-19, and all sexually transmitted infections (STIs);
- treatment required for a physical or mental condition caused by torture, female genital mutilation, domestic violence or sexual violence (this does not apply if you have come to the UK for the purpose of seeking that treatment).

Paying for Treatment

If you are chargeable for your treatment, you will receive an invoice and will be required to pay the full cost at the relevant tariff. Where treatment needs are non-urgent you must pay in advance of receiving the treatment. The invoice will be estimated based on expected treatment. However, if the final cost of treatment is different to the estimated cost you will be either reimbursed any money owed to you or additional charges will be made to cover the higher cost of treatment.

If the treatment you require is deemed by the clinician to be immediately necessary or urgent, it will not be withheld if you cannot pay in advance and will go ahead without delay, although you will still be required to pay afterwards.

All maternity services – including routine ante-natal treatment – are regarded as immediately necessary. If you require any maternity services, these will be provided to you although you will still be required to pay afterwards.

You can pay for treatment using credit/debit cards, bank transfers, cash or by direct debit.

Not paying for treatment

Always ensure you have adequate travel insurance in place to cover unexpected health needs during your stay. You should discuss with the hospital if you have difficulty paying any debt.

If you need a visa or permission to come to the UK and fail to pay for the treatment you have received, it may mean that a future request for a visa is turned down.

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