

Overseas Visitor Policy Statement

Solent NHS Trust policies can only be considered to be valid and up-to-date if viewed on the intranet. Please visit the intranet for the latest version.

| Purpose of agreement | To provide clear guidelines to staff for the management of access by overseas visitors to Solent Trust services. |
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| | Governing the identification, treatment and charging of overseas visitors and provide advice and guidance on implementation. |
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Summary

Solent NHS Trust has previously had in place a policy providing guidance to Trust staff in the management of overseas patients who may not be eligible for free treatment. The policy detailed a procedure for identifying and, where applicable, charging, in accordance with the NHS (Charges to Overseas Visitors) Regulations 2015, Guidance on implementing the overseas visitor hospital charging regulations 2015.

The 2015 regulations have been updated a number of times since release with the most recent being *The National Health Service (Charges to Overseas Visitors) (Amendment) (EU Exit) (No. 2) Regulations 2020* from 31st December 2020.

The previous Trust policy was in place for a number of years, however the number of patients charged for Trust services was low/nil, due to a number of factors:

- a) The nature of community and mental health services provided by the Trust means that the volume of overseas visitors not eligible for free treatment is extremely low (and some of the Trust's services are exempt from charging).
- b) Due to the low volumes of patients who may be eligible to be charged, the Trust has not appointed an Overseas Visitors Manager to manage the complex processes required to implement charging arrangements.
- c) Standard operating procedures, training and monitoring would need to be implemented across the Trust's services in order for any appropriate charging arrangements to be properly implemented, administered and monitored.

The Department of Health recommends that relevant NHS bodies identify a designated Overseas Visitor Manager (OVM) to oversee implementation of the Charging Regulations as the rules and processes are complex. The February 2021 *Guidance on implementing the overseas visitor charging regulation* (the Charging Guidance) and supporting information within the OVM toolboxes, available on the Overseas Visitor Manager Forum, describes 5 overarching steps in the process to charge patients under the Charging Regulations:

- Step 1: Determine if the patient is ordinarily resident in the UK

 If the patient is ordinarily resident in the UK they must not be individually charged. If the patient is not ordinarily resident in the UK, proceed to step 2.
- Step 2: Determine if the patient is insured by another member state

 If the patient is not insured by another member country, proceed to step 3.
- Step 3: Determine if the patient is covered by an exemption in the Charging Regulations or if the patient is liable for charges
 - Patients who are not ordinarily resident in the UK and are not insured by another EEA country need to be assessed against the exemptions in the Charging Regulations.
- Step 4: Make and recover charges from chargeable overseas visitors
 Recover the estimated full cost of a course of treatment in advance of providing it unless
 doing so would prevent or delay the provision of immediately necessary or urgent
 treatment. (Since October 2017 relevant bodies are required to recover these charges in full
 in advance of providing them.)
- Step 5: Record the patient's chargeable status on their NHS Record
 When a patient has been identified as an overseas visitor, NHS trusts and foundation trusts
 must record this fact on the patient record via the Summary Care Record application and
 whether or not the overseas visitor is exempt from charge. This should be done as soon as
 possible, by staff who are accredited to do so.

The Trust has reviewed the number of patients who may be required to pay for their treatment in accordance with the Charging Regulations. Based on this review, the Trust has concluded that the cost and effort required to appoint an Overseas Visitors Manager, communicate and monitor the required processes and implement charging arrangements for overseas visitors would be disproportionate to the small number of Trust patients who may be eligible to be charged. The Trust will review the total patients on an annual basis to assess if the position remains the same. If the numbers are seen to be increasing, the Trust will review and compare the potential charges against the cost of setting up the administration of the charging regime and revise the policy if required.

The Trust has therefore agreed not to put in place procedures to routinely assess overseas visitors to determine whether they should be charged for Trust services. The Trust recognises that this is statement of policy does not mirror the requirements within the Charging Regulations, however, given the low volume of overseas visitors seen by Trust services that are not exempt from the Charging Regulations, the Trust believes that this is a pragmatic, justifiable decision, which makes best use of the public pound.

Whilst the Trust has made the decision not to have in place an Overseas Visitors Policy and appoint a manager, this does not preclude Trust employees and members of the public raising concerns in respect of overseas visitors fraud. Any fraud concerns that relate to persons who are alleged to be disclosing false information, with the aim of accessing Trust services, should be reported to the Trusts Local Counter Fraud Specialist. Any counter fraud investigation in regard to patient eligibility matters will be undertaken in line with the NHS Counter Fraud Authority Manual and the Trusts Local Counter Fraud, Bribery and Corruption Policy.

The number of overseas visitors who may not be eligible for free services provided by the Trust will be reviewed regularly and service leads can seek guidance about charging overseas visitors on a case by case basis from the Trust's commercial team (commercial@solent.nhs.uk).

This policy will be reviewed at least annually and updated in light of potential changes to national policy.