

Standard Operating Procedure for Implementing the Overseas Visitor Policy				
State whether the document is:  Trust wide Business Group Local		State Document Type  Policy  Standard Ope  Guideline Protocol	erating Procedure	
APPROVAL & VALIDATION		Risk Management	Committee	
DATE OF APPRO	OVAL & VAL	IDATION	May 2016	
INTRODUCTION	DATE		May 2016	
DISTRIBUTION		Risk Management Heads of Nursing Risk Management Services Microsites	and Patient and Customer	
REVIEW			Review Date April 2019	
CONSULTATION	I		Risk Management	Committee
EQUALITY IMPACT ASSESSMENT (Tick)		<ul><li>□ Screening</li><li>☑ Initial</li><li>□ Full</li><li>□Not Applicable as</li></ul>		
RELATED APPROVED TRUST DOCUMENTS		Oversea Visitor Police Private Patient Police		
AUTHOR/FURTHER INFORMATION		Risk and Safety Assi Head of Risk and Cu		
THIS DOCUME				
Document Cha				Dete
Issue No	Page	Changes made (include rationale and in		Date



#### 1.0 INTRODUCTION

This procedure sets out how the principles within the Overseas Visitors Charging Policy are to be implemented within Stockport NHS Foundation Trust.

This procedure document should be read in conjunction with the Trust Overseas Visitors Charging Policy, which can be accessed via the Risk and Safety Intranet Site

## 2.0 STATEMENT OF INTENT / SCOPE OF THE DOCUMENT

The objective of this procedure document is to define the administrative processes relating to overseas patients receiving treatment at Stockport NHS Foundation Trust. This SOP concerns what should happen when a person who is not ordinarily resident in the UK needs NHS treatment provided by Stockport NHS Foundation Trust. Such a person will be subject to the *National Health Service (Charges to Overseas Visitors) Regulations 2011*, (the "Charging Regulations"). A person who is not 'ordinarily resident' in the UK falls within the definition of an overseas visitor and may incur a charge for treatment.

A person does not become ordinarily resident in the UK simply by: having British nationality; holding a British passport; being registered with a GP; having an NHS number; owning property in the UK, or having paid (or currently paying) National Insurance contributions and taxes in this country.

## 3.0 THE PROCESS OF IMPLEMENTING THE OVERSEA VISITOR POLICY

### 3.1 Asking the Baseline Questions

All Administration Staff with patient contact (i.e. Ward Clerks, General Reception Staff etc.) are responsible for asking the base line question at each patient contact.

The baseline questions should be:

#### Question 1:

"Where have you lived for the last 12 months?" (Those who have lived in the UK for the past 12 months are likely to be ordinarily resident here; all others should be referred to the Medico Legal Team.)
If not lived in the UK for the last 12months proceed to question 2

#### Question 2:

## "Do you have a non-UK EHIC/PRC/S2?"

If yes, take details then refer them to the Medico Legal Team. The UK can recover the cost of their healthcare (including A&E services). If no (i.e. the person is a non-EEA national), proceed to question 3

#### Question 3:

#### "Do you have indefinite leave to remain in the UK?"

If yes, where have you lived for the past six months? (Non-EEA nationals with indefinite leave to remain who have lived in the UK for the past six months are likely to be ordinarily resident here; others should be referred to the Medico Legal Team)

If no, proceed to question 4

#### Question 4:

"Do you have a valid visa or leave to enter/remain in the UK?"

If yes, have you paid the health surcharge or are you exempt or waived from paying it? (If yes, then they are exempt from charges; if no, then refer them to the Medico Legal Team.)



The vast majority of patients will not be liable for charges. The purpose of asking the baseline questions at this stage is to quickly identify that majority in a way that avoids discrimination and to ensure that all patients who may be liable for charges are identified.

This also applies equally to patients who have registered with local General Practitioners (GPs) as temporary residents and been referred to the hospital for treatment, as to those without a GP. In all cases where the patient has not lived in the UK for 12 months, or there is an element of doubt, arrangements should be made to alert the Medico Legal Department to enable further questioning to be undertaken and entitlement to free treatment established. The patient should be told that further questioning of their eligibility for free treatment will be undertaken by a member of staff from the Medico Legal team.

Treatment given in the Emergency Department is exempt from charges however baseline questioning should still be asked within this vicinity in order that those patients who are 'admitted' can be assessed under the Charging Regulations. 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 25% of all successful EHIC claims, including ED, Outpatient and Inpatient episodes.

Overseas patients are to be registered with their overseas addresses with any local address added as a temporary residence. It is important that patients are aware as soon as possible that there may be a charge for treatment. Whilst it may not be always practicable for interviews to happen immediately i.e. when a patient is admitted to Critical Care, the Medico Legal team should still be informed. Failure to do so could result in complaints from the patient or their family at a later date.

## Things not to do at this stage

Staff completing administration forms should not do anything other than ask the baseline questions and alert the Medico Legal Team if necessary. Staff at this stage should not be asking supplementary questions or carrying out detailed investigations themselves.

## 3.2 Exempt services and individuals

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 <u>Mental Health Act 1983</u>, 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.

## 3.3 Interviewing Patients who may be liable to Charges

Once the Medico Legal team has been alerted and informed, the patient can then be interviewed by a member of the Medico Legal team to establish if they are in fact ordinarily resident here, exempt from charges via another category or if they have to pay. The definition of Ordinary Resident is described in the Oversea Visitor Policy.

The interview should take place in private and, wherever possible, before treatment has started. The medico legal team will asked the patient to complete the Pre Attendance Form (Appendix 1). The interviewer should begin by explaining that a person not ordinarily resident in the UK can, in some circumstances, be liable for the cost of their treatment. The interviewer should explain that the interview is taking place because the patient indicated during the process of administration (or because admissions staff have indicated) that he or she may not normally live in the UK, or has been unable to show that they have the right to live here. Some patients will be clear that they are not normally resident here but others may dispute the assessment. The first issue to explore during the interview, therefore, is whether the patient may be ordinarily resident even though they have not lived here for twelve months. A patient cannot be charged if they are ordinarily resident in the UK.

If, after questioning, the interviewer decides that the patient is not ordinarily resident here, then that patient is an overseas visitor for the purpose of the Charging Regulations. The next stage of the interview therefore needs to be to determine if the patient is properly settled in the UK in order to establish if they are ordinarily resident. The Ordinary Resident Tool can be used as a guide to determine those exempted.

# 3.4 Overseas visitors claiming exemption – supporting documentary evidence

Where a patient claims to be covered by any of the exemptions, or indeed claims to be ordinarily resident, the Trust is required, by provision of the Charging Regulations, to make "such enquiries as it is satisfied are reasonable in all the circumstances", to confirm that is the case.

The onus is on the patient to provide whatever evidence he or she thinks is appropriate to support their claim. Patients will be able to provide satisfactory documentary evidence e.g. pension details, letters from employers or colleges etc to support their claim. Where, however, the patient does not have the evidence to hand an interviewer may be asked to



either accept confirmation from a reputable third party e.g. a letter from a solicitor or, in some cases, to accept the word of the patient without supporting evidence.

It is for the patient to satisfy the Trust of the validity of their claim to free treatment and the relevant Trust is entitled to ask for supporting documentary evidence, as long as it does not behave unreasonably. Where the patient cannot support their claim, the trust may decide to charge for treatment. However, in making this decision it should take account of the individual circumstances and judge each case on its own merits. If charged, the patient can claim reimbursement at a later date providing that sufficient evidence can be produced to show that he or she was entitled to free treatment at the time it was given.

- 3.5 In cases where a patient refuses to give their permission to contact Home Office and has not provided valid evidence to support their claim to be living lawfully in the UK, a relevant NHS body can decide to levy a charge where no other exemption applies
- 3.6 Template Letters and Documents to be issued to Patients

The following documents/letters can be issued once it is determined that the patient is liable for charges

- Appendix 2: Request for information re chargeable status
- Appendix 3: Reminder for patient information to establish chargeable status
- Appendix 4: Document acknowledgement that patient is non-chargeable
- Appendix 5: Payment Request Letter



# **Appendix 1- Pre Attendance Form**

		Pre-Attenda	ance Form	
Why have I been asked	to complete th	nis form?		
NHS hospital treatment is not free to all. All hospitals have a legal duty to establish if patients are entitled to free treatment. Please complete this form to help us with this duty. A parent/guardian should complete the form on behalf of a child. On completing the form, you must read and sign the declaration below.				
Please complete this fo	rm in BLOCK	CAPITALS		
Family name/surname:				
First name/given name:			Date of birth:	
DECLARATION: TO BE	COMPLETED	BY ALL		
Home Office. The inform include enforcing immigr also share this information including national security	ation provided of ration controls of on with other law ty, investigation	may be used and overseas, at the p w enforcement a and prosecution	or personal, non-dinical information will be sent to the diretained by the Home Office for its functions, which corts of entry and within the UK. The Home Office may and authorised debt recovery agencies for purposes in of crime, and collection of fines and civil penalties.	
If you are chargeable but fail to pay for NHS treatment for which you have been billed, it may result in a future immigration application to enter or remain in the UK being denied. Necessary (non-clinical) personal information may be passed via the Department of Health to the Home Office for this purpose.  DECLARATION:  I have read and understood the reasons I have been asked to complete this form  I agree to be contacted by the trust to confirm any details I have provided.  I understand that the relevant official bodies may be contacted to verify any statement I have made.  The information I have given on this form is correct to the best of my knowledge.  I understand that if I knowingly give false information then action may be taken against me. This may include referring the matter to the hospital's local counterfraud specialist and recovering any monies due.				
Signed:			Date:	
			Relationship to patient:	
Print name: On behalf of:		1. ALL: PERSONAL DETAILS - Please answer all questions that apply to you		
On behalf of:	TAILS – <i>Pl</i> ease	answer all qu	estions that apply to you	
On behalf of: 1. ALL: PERSONAL DE				
On behalf of:  1. ALL: PERSONAL DE Do you usually live in the			Nationality:	
On behalf of:  1. ALL: PERSONAL DE Do you usually live in the				
On behalf of:  1. ALL: PERSONAL DE Do you usually live in the Address in the UK:			Nationality: Passport number:	
On behalf of:  1. ALL: PERSONAL DE Do you usually live in the Address in the UK: Telephone number:			Nationality:  Passport number:  Country of issue:	
On behalf of:  1. ALL: PERSONAL DE Do you usually live in the Address in the UK:  Telephone number:  Mobile number: Email:			Nationality:  Passport number:  Country of issue:  Passport expiry date:	
On behalf of:  1. ALL: PERSONAL DE Do you usually live in the Address in the UK:  Telephone number: Mobile number: Email: Will you return to live in your home country?	YES:		Nationality:  Passport number:  Country of issue:  Passport expiry date:  Dual Nationality:  Date of entry into the UK:	
On behalf of:  1. ALL: PERSONAL DE Do you usually live in the Address in the UK:  Telephone number: Mobile number: Email: Will you return to live in your home country?	YES:	NO: 🗆	Nationality:  Passport number:  Country of issue:  Passport expiry date:  Dual Nationality:  Date of entry into the UK:	
On behalf of:  1. ALL: PERSONAL DE Do you usually live in the Address in the UK:  Telephone number:  Mobile number: Email:  Will you return to live in your home country?  Address OUTSIDE the U	YES:	NO: 🗆	Nationality:  Passport number:  Country of issue:  Passport expiry date:  Dual Nationality:  Date of entry into the UK:	
On behalf of:	YES:	NO: 🗆	Nationality:  Passport number:  Country of issue:  Passport expiry date:  Dual Nationality:  Date of entry into the UK:  If yes, when?  Name and address of Employer (UK or overseas):	



Current non-EU passport with valid entryvisa Student visa Student visa Visa twisa Asylum Registration Card (ARC) Other – please state:  BRP No.  ALL: YOUR STAY IN THE UK – You may be required to provide documentation Please tell us about the purpose of your stay in the UK (check all that apply): Holiday/visit friends or family On business To live here permanently To work To study To seek asylum Other – please state: How many months have you spent OUTSIDE the UK in the last 12 months? None Up to 3 months 3-6 months Over 6 months Please indicate the reason for any absence from the UK in the last 12 months (check all that apply) I live in another country A holiday/to visit friends To work I frequently commute (business/second home overseas) To study Other – please state:  I. ALL: GP DETAILS – If you are registered with a GP in the UK SP/surgery name: SP telephone: HIS number: S. HEALTH OR TRAVEL INSURANCE DETAILS – If the UK is not your permanent place of residency Ooyou have insurance? YES: NO: Mame and address of insurance provider: Wembership number Insurance telephone! S. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS – If you live in another EEA country Woo you have a non-UK EHIC? YES: NO: Hyou are visiting from another EEA country and do not hold a current EEA country to the hospital as an outpatient.  S. TUDENT DETAILS – If you have come to the UK to study Name of college/university: Dourse dates From: Number of hours/week four treatment outside the A&E department, charges may	Current United Kingdom passport	☐ Current European Union passport
Asylum Registration Card (ARC)  Other – please state:  BRP No.  ALL: YOUR STAY IN THE UK – You may be required to provide documentation  Please tell us about the purpose of your stay in the UK (check all that apply):  Holiday/ist friends or family On business To live here permanently To work To study To seek asylum  Other – please state:  How many months have you spent OUTSIDE the UK in the last 12 months?  None Up to 3 months Over 6 months  Please indicate the reason for any absence from the UK in the last 12 months (check all that apply)  I live in another country A holiday/to visit friends To work  I frequently commute (business/second home overseas) To study  Other – please state:  ALL: GP DETAILS – If you are registered with a GP in the UK  SP/surgery name:  Address of GP surgery:  Address of GP surgery:  SP telephone:  HIS number:  Membership number SP YES: NO: Name and address of insurance provider:  Membership number SP YES: NO: If yes, please enter the data from your EHIC below:  Other – please state:  SEUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS – If you live in another EEA country  Other value insurance? YES: NO: If yes, please enter the data from your EHIC below:  Of any the amend received outside the Accident and Emergency (AEE)  dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  SIDENT DETAILS – If you have come to the UK to study  Name of college/university.  SIDENT DETAILS – If you have come to the UK to study  Number of hours/week    You are admitted to any ward or referred for further treatment outside the A&E department, charges may  You are admitted to any ward or referred for further treatment outside the A&E department, charges may		
Asylum Registration Card (ARC)  Other – please state:  BRP No.  ALL: YOUR STAY IN THE UK – You may be required to provide documentation  Please tell us about the purpose of your stay in the UK (check all that apply):  Holliday/hist friends or family		
Other – please state:  BRP No.  BALL: YOUR STAY IN THE UK — You may be required to provide documentation  Please tell us about the purpose of your stay in the UK (check all that apply):  Holiday/isit friends or family	Asylum Registration Card (ARC)	
ALL: YOUR STAY IN THE UK — You may be required to provide documentation  Please tell us about the purpose of your stay in the UK (check all that apply):    Holiday/visit friends or family   On business   To live here permanently     To work   To study   To seek asylum		BRP No.
Please tell us about the purpose of your stay in the UK (check all that apply):    Holiday/visit friends or family		
Holiday/visit friends or family On business To live here permanently To work To study To seek asylum Other – please state:  How many months have you spent OUTSIDE the UK in the last 12 months?  None Up to 3 months 3-6 months Over 6 months  Please indicate the reason for any absence from the UK in the last 12 months (check all that apply)  I live in another country A holiday/to visit friends To work  I frequently commute (business/second home overseas) To study  Other – please state:  ALL: GP DETAILS – If you are registered with a GP in the UK  SP/surgery name:  Address of GP surgery:  SP telephone:  NHS number:  S. HEALTH OR TRAVEL INSURANCE DETAILS – If the UK is not your permanent place of residency  Do you have insurance? YES: NO: Mame and address of insurance provider:  Membership number:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS – If you live in another EEA country  Do you have a non-UK EHIC? YES: NO: If yes, please enter the data from your EHIC below:  If you are visiting from another EEA country and do not hold a current EHIC, you may be bidled for the coat of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  S. STUDENT DETAILS – If you have come to the UK to study  Name of Course dates From: Number of hours/week.  Telephone: Number of hours/week.  Telephone: Number of hours/week.	B. ALL: YOUR STAY IN THE UK – You may be requ	ired to provide documentation
To work	Please tell us about the purpose of your stay in the UK	K (check all that apply):
Other - please state:	Holiday/visit friends or family On busines	ss To live here permanently
How many months have you spent OUTSIDE the UK in the last 12 months?    None	☐ To work ☐ To study	☐ To seek asylum
None	Other - please state:	
Please indicate the reason for any absence from the UK in the last 12 months (check all that apply)  I live in another country	How many months have you spent OUTSIDE the UK in	n the last 12 months?
I live in another country	■ None ■ Up to 3 months	3-6 months Over 6 months
I frequently commute (business/second home overseas)   To study	Please indicate the reason for any absence from the U	JK in the last 12 months (check all that apply)
Other – please state:  A. ALL: GP DETAILS – If you are registered with a GP in the UK  GP/surgery name:  GP telephone:  NHS number:  Address of GP surgery:  S. HEALTH OR TRAVEL INSURANCE DETAILS – If the UK is not your permanent place of residency  Do you have insurance?  YES:  NO:  Name and address of insurance provider:  Membership number:  Insurance telephone  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS – If you live in another EEA country  Do you have a non-UK EHIC? YES:  NO:  If yes, please enter the data from your EHIC below:  If you are vielting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment evolved outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS – If you have come to the UK to study  Name of college/university:  Course dates From:  To:  Number of hours/week  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	I live in another country  ☐ A holiday/f	to visit friends 🔲 To work
Address of GP surgery:  GP telephone:  NHS number:  S. HEALTH OR TRAVEL INSURANCE DETAILS — If the UK is not your permanent place of residency Do you have insurance?  Membership number:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS — If you live in another EEA country Do you have a non-UK EHIC? YES:  NO:  Name and address of insurance provider:  Membership number:  Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS — If you live in another EEA country Do you have a non-UK EHIC? YES:  NO:  If yes, please enter the data from your EHIC below:  Address of GP surgery:  Name and address of insurance provider:  If you have a non-UK EHIC? YES:  NO:  If yes, please enter the data from your EHIC below:  Address of GP surgery:  Name and address of insurance provider:  If you have a non-UK EHIC?  To:  Number of hours/week  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving from a admitted to any ward or referred for further treatment outside the A&E department, charges may	I frequently commute (business/second home over a second home)	verseas) 🔲 To study
Address of GP surgery:  GP telephone:  NHS number:  5. HEALTH ORTRAVEL INSURANCE DETAILS—If the UK is not your permanent place of residency Do you have insurance?  YES: NO: Name and address of insurance provider:  Membership number Insurance telephone  6. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS—If you live in another EEA country Do you have a non-UK EHIC? YES: NO: If yes, please enter the data from your EHIC below:  If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS—If you have come to the UK to study Name of college/university:  Course dates From: To: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Other - please state:	
Address of GP surgery:  GP telephone:  NHS number:  5. HEALTH ORTRAVEL INSURANCE DETAILS—If the UK is not your permanent place of residency Do you have insurance?  YES: NO: Name and address of insurance provider:  Membership number Insurance telephone  6. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS—If you live in another EEA country Do you have a non-UK EHIC? YES: NO: If yes, please enter the data from your EHIC below:  If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS—If you have come to the UK to study Name of college/university:  Course dates From: To: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	A ALL - CD DETAILS - Norward and sold and sold and	CD in the UV
GP telephone:  NHS number:  5. HEALTH OR TRAVEL INSURANCE DETAILS — If the UK is not your permanent place of residency Do you have insurance?  YES: NO: Name and address of insurance provider:  Membership number: Insurance telephone  6. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS — If you live in another EEA country Do you have a non-UK EHIC? YES: NO: If yes, please enter the data from your EHIC below:  If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS — If you have come to the UK to study Name of college/university:  Course dates From: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may		
NHS number:  5. HEALTH OR TRAVEL INSURANCE DETAILS — If the UK is not your permanent place of residency Do you have insurance?  YES: NO: Name and address of insurance provider:  Membership number Insurance telephone  6. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS — If you live in another EEA country Do you have a non-UK EHIC? YES: NO: If yes, please enter the data from your EHIC below:  If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS — If you have come to the UK to study Name of college/university:  Course dates From: To: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may		Address of GP surgery:
5. HEALTH OR TRAVEL INSURANCE DETAILS — If the UK is not your permanent place of residency Do you have insurance?  YES: NO: Name and address of insurance provider:  Membership number Insurance telephone  6. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS — If you live in another EEA country Do you have a non-UK EHIC? YES: NO: If yes, please enter the data from your EHIC below:  If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS — If you have come to the UK to study Name of college/university:  Course dates From: To: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may		
Membership number: Insurance telephone  6. EUROPEAN HEALTH INSURANCE CARD (EHIC) DETAILS — If you live in another EEA country  Do you have a non-UK EHIC? YES: NO: If you see wisting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS — If you have come to the UK to study  Name of college/university:  Course dates From: To: Number of hours/week  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	NHS number:	
Do you have a non-UK EHIC? YES: NO: If yes, please enter the data from your EHIC below:  If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS — If you have come to the UK to study  Name of college/university:  Course dates From: To: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving from another EEA and the A&E department, charges may and or referred for further treatment outside the A&E department, charges may	5. HEALTH OR TRAVEL INSURANCE DETAILS – If	the UK is not your permanent place of residency
Do you have a non-UK EHIC? YES: NO: If yes, please enter the data from your EHIC below:  If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS — If you have come to the UK to study  Name of college/university:  Course dates From: To: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Do you have insurance? YES: NO: Membership number	
If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS — If you have come to the UK to study  Name of college/university:  Course dates From:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Do you have insurance? YES: NO: Membership number Insurance telephone:	Name and address of insurance provider:
country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS — If you have come to the UK to study Name of college/university:  Course dates From:  To: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Membership number: Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC)	Name and address of insurance provider:  DETAILS – If you live in another EEA country
of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS – If you have come to the UK to study  Name of college/university:  Course dates From:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Do you have insurance?  YES: NO:   Membership number	Name and address of insurance provider:  DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:
the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS – If you have come to the UK to study  Name of college/university:  Course dates From:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Membership number: Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO:	Name and address of insurance provider:  DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:
dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7  STUDENT DETAILS – If you have come to the UK to study  Name of college/university:  Course dates From:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Membership number: Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO:  If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost	Name and address of insurance provider:  DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:
Telephone:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving from a grant and any ward or referred for further treatment outside the A&E department, charges may	Membership number Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC)  Do you have a non-UK EHIC? YES: NO:   If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside	Name and address of insurance provider:  DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:
Name of college/university:  Course dates From: To: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Membership number Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC)  Do you have a non-UK EHIC? YES: NO:   If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are	DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:  3 4 5 6
Name of college/university:  Course dates From: Telephone: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving from a demitted to any ward or referred for further treatment outside the A&E department, charges may	Membership number: Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO:  If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return	DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:  3  4  5 6
college/university:  Course dates From: Telephone:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Membership number: Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO: If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.	DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:  3  4  5 6 7 8 9
Course dates From: To: To: To: To: Number of hours/week:  If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Membership number: Insurance telephone  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO:   If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.	DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:  3  4  5 6 7 8 9
If you have completed this form in the A&E department, please give it to a receptionist or nurse before leaving if you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Membership number: Insurance telephone  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO:   If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS — If you have come to the UKName of	DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:  3  4  5  6  7  8  9
If you are admitted to any ward or referred for further treatment outside the A&E department, charges may	Membership number: Insurance telephone  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO:   If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  V. STUDENT DETAILS — If you have come to the UK Name of college/university.	DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:  3  4  5  6  7  8  9
	Membership number: Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO:   If you are visiting from another EEA country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS — If you have come to the UK Name of college/university:  Course dates From: To	Name and address of insurance provider:  DETAILS – If you live in another EEA country  If yes, please enter the data from your EHIC below:  3 4 5 6 7 8 9  K to study  Telephone:  Number of hours/week:
	Membership number Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO: If you are visiting from another EAN country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS—If you have come to the UK Name of college/university. Course dates From: In the A&E department for you are admitted to any ward or referred for further the figure admitted to any ward or referred for further the supply if you are admitted to any ward or referred for further the figure admitted to any ward or referred for further the supply in the A&E department for the supply in the A&E department for you are admitted to any ward or referred for further the supply in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in th	Name and address of insurance provider:  DETAILS — If you live in another EEA country  If yes, please enter the data from your EHIC below:  3  4  5  6  7  8  9  Kto study  Telephone:  Number of hours/week:  Int, please give it to a receptionist or nurse before leaving treatment outside the A&E department, charges may
	Membership number Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO: If you are visiting from another EAN country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS—If you have come to the UK Name of college/university. Course dates From: In the A&E department for you are admitted to any ward or referred for further the figure admitted to any ward or referred for further the supply if you are admitted to any ward or referred for further the figure admitted to any ward or referred for further the supply in the A&E department for the supply in the A&E department for you are admitted to any ward or referred for further the supply in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in th	Name and address of insurance provider:  DETAILS — If you live in another EEA country  If yes, please enter the data from your EHIC below:  3 4 5 6 7 8 9  We to study  Telephone:  In please give it to a receptionist or nurse before leaving treatment outside the A&E department, charges may
	Membership number Insurance telephone:  S. EUROPEAN HEALTH INSURANCE CARD (EHIC) Do you have a non-UK EHIC? YES: NO: If you are visiting from another EAN country and do not hold a current EHIC, you may be billed for the cost of any treatment received outside the Accident and Emergency (A&E) dept. Charges will apply if you are admitted to a ward or need to return to the hospital as an outpatient.  7. STUDENT DETAILS—If you have come to the UK Name of college/university. Course dates From: In the A&E department for you are admitted to any ward or referred for further the figure admitted to any ward or referred for further the supply if you are admitted to any ward or referred for further the figure admitted to any ward or referred for further the supply in the A&E department for the supply in the A&E department for you are admitted to any ward or referred for further the supply in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in the A&E department for the supply in the first form in th	Name and address of insurance provider:  DETAILS — If you live in another EEA country  If yes, please enter the data from your EHIC below:  3  4  5  6  7  8  9  Kto study  Telephone:  Number of hours/week:  Int, please give it to a receptionist or nurse before leaving treatment outside the A&E department, charges may

**Appendix 2: Request for information re chargeable status** 



Medico Legal Department Stepping Hill Hospital Poplar Grove Hazel Grove Stockport SK2 7JE 0161 419 5425

[Recipient's Name]
[Position, Company]
[First address line]
[Second address line]
[Town/city Postcode]

1 January 2014

Dear [Name]

## Your NHS treatment costs - please supply evidence to avoid payment

As a visitor to the United Kingdom, you may need to pay for your NHS treatment<sup>1</sup> received at Surgery/Hospital on 1 January 2014. The NHS is not free to everyone and overseas visitors must be charged for specified services, including NHS hospital services, under the National Health Service (Charges to Overseas Visitors) Regulations 2011. Payment goes towards the NHS doctors and nurses who provide your care.

The hospital requires evidence to determine if you need to pay for your treatment. Visitors who are ordinarily resident<sup>2</sup> in the UK or who fall within certain exemption categories will not need to pay.

It is **your responsibility** to prove that you are entitled to free NHS treatment.

To avoid payment, you need to provide evidence that you are either ordinarily resident in the UK or fall within an exemption category.

What you need to do:

- 1. Send evidence that you are ordinarily resident in the UK or fall within an exemption category. The documents you need to provide are listed on the reverse of this letter. These documents will be used to determine your status (all original documents will be returned).
- 2. Send your documents to

[Region/Department]

[First address line]

[Second address line]

[Town/city]

[County Postcode]

3. We need to receive this by 1 January 2014.

If you do not provide satisfactory evidence to support your claim, you will be liable for the cost of any treatment provided to you. You will be issued with an invoice for the costs of any treatment already provided to you and you will be required to pay the full cost of any future NHS hospital treatment.

<sup>&</sup>lt;sup>1</sup> The National Health Service Act 2006 and the National Health Service (Charges to Overseas Visitors) Regulations 2011 set out which visitors are required to pay for NHS treatment.

<sup>&</sup>lt;sup>2</sup> This means that you are living in the UK on a lawful, voluntary and properly settled basis as part of the regular order of your life for the time being.



If you would like to discuss your claim please contact me by calling (00000) 000 000 between 08:00 and 17:00. Yours sincerely, [Author's name] [Position/title] In order to establish your eligibility for free NHS treatment, please send copies of any of the relevant documents listed below. If more than one document is relevant to you then send all the relevant documents. A) At least one item with your photo: Passport ☐ UK Biometric Residence Permit (BRP) National ID card ☐ Driving licence (if it has a photo) B) At least one item to prove where you live: (The proof you use must be less than 3 months old. Your name and address needs to be on the letter.) Water, gas, electric or Council Tax bill Bank or building society statement ☐ Phone bill C) Any other personal documents that can help establish your eligibility: ☐ Provisional Replacement Certificate (PRC) European Health Insurance Card (EHIC) Letter or statement from HMRC or DWP Wage slip or a P60 National Insurance or benefits letter Evidence of sickness insurance A letter from your college confirming you Copy of any birth/marriage certificates are attending a full-time or part-time An IND and ARC (for patients claiming asylum) course of study (including course duration and number of hours per week of Any other Home Office issued documents attendance) which are relevant to your application. Please note that having an NHS number does not automatically make you eligible for free NHS You should be aware that under immigration rules 320, 321, 321A and 322, a person with outstanding debts of over £1,000 for NHS treatment that are not paid within three months of invoicing, may be denied a further immigration application to enter or remain in the UK. In the absence of prompt full settlement or a reasonable repayment schedule, non-clinical information relating to this debt is provided routinely to the Home Office and may be used by the Home Office to apply the above immigration rules. The information will remain active for the purpose of the above rules until the debt is settled and a record of the settled debt will also be retained, both subject to normal limitation periods. In the event that you may seek entry to the UK or make an advance immigration application after settling an NHS debt in the previous three months, you are advised to retain and carry evidence of payment for potential examination by Home Office officials.

Appendix 3: Reminder for patient information to establish chargeable status

Stockport NHS

NHS F

Stockport NHS

Medico Legal Department Stepping Hill Hospital Poplar Grove Hazel Grove Stockport SK2 7JE 0161 419 5425

[Recipient's Name]
[Position, Company]
[First address line]
[Second address line]
[Town/city Postcode]

1 January 2014

Dear [Name]

# FINAL REMINDER: Your NHS treatment costs - please supply evidence to avoid payment

I wrote to you on 1 January 2014 regarding your eligibility status for free NHS treatment.

As a visitor to the United Kingdom, you may need to pay for your NHS treatment<sup>3</sup> received at Surgery/Hospital on 1 January 2014. The NHS is not free to everyone and overseas visitors must be charged for specified services, including NHS hospital services. Payment goes towards the cost of the NHS doctors and nurses who provide your care.

The hospital requires evidence to determine if you need to pay for your treatment. Visitors who are ordinarily resident<sup>4</sup> in the UK or who fall within certain exemption categories will not need to pay.

It is **your responsibility** to prove that you are entitled to free NHS treatment.

# To avoid payment, you need to provide evidence that you are either ordinarily resident in the UK or fall within an exemption category.

What you need to do:

- 4. Send evidence that you are ordinarily resident in the UK or fall within an exemption category. The documents you need to provide are listed on the reverse of this letter. These documents will be used to determine your eligibility for free NHS treatment (all original documents will be returned).
- 5. Send your documents to

[Region/Department]

[First address line]

[Second address line]

[Town/city]

[County Postcode]

<sup>3</sup> National Health Service (Charges to Overseas Visitors) Regulations 2011

<sup>&</sup>lt;sup>4</sup> This means that you are living in the UK on a lawful, voluntary and properly settled basis as part of the regular order of your life for the time being.



6. We need to receive this by 1 January 2014.

If you do not provide satisfactory evidence to support a claim that you are exempt from charging, you will be liable for the cost of any treatment you receive. You will be sent an invoice and will be required to pay the full cost of any future NHS hospital treatment.

If you do not respond to this letter we will have to assume that you are chargeable. If you would like to discuss your claim please contact me by calling -0 between 08:00 and 17:00.

Yours sincerely,	
[Author's name]	
[Position/title]	
In order to establish your eligibility for free NHS relevant documents listed below.	S treatment, please send copies of any of the
If more than one document is relevant to you the	nen send all the relevant documents.
A) At least one item with your photo:	
☐ Passport	☐ UK Biometric Residence Permit (BRP)
☐ National ID card	☐ Driving licence (if it has a photo)
B) At least one item to prove where you live	9:
(The proof you use must be less than 3 months	old. Your name and address needs to be on the letter.)
☐ Water, gas, electric or Council Tax bill	☐ Bank or building society statement
☐ Phone bill	
C) Any other personal documents that can	help establish your eligibility:
☐ European Health Insurance Card (EHIC)	☐ Provisional Replacement Certificate (PRC)
☐ Wage slip or a P60	☐ Letter or statement from HMRC or DWP
☐ National Insurance or benefits letter	Evidence of sickness insurance
A letter from your college confirming you	☐ Copy of any birth/marriage certificates
are attending a full-time or part-time course of study (including course duration	☐ An IND and ARC (for patients claiming asylum)
and number of hours per week of attendance)	Any other Home Office issued documents which are relevant to your application.

**Please note** that having an NHS number does not automatically make you eligible for free NHS treatment.

You should be aware that under immigration rules 320, 321, 321A and 322, a person with outstanding debts of over £1,000 for NHS treatment that are not paid within three months of invoicing, may be denied a further immigration application to enter or remain in the UK.

In the absence of prompt full settlement or a reasonable repayment schedule, non-clinical information relating to this debt is provided routinely to the Home Office and may be used by the Home Office to apply the above immigration rules. The information will remain active for the purpose of the above rules until the debt is settled and a record of the settled debt will also be retained, both subject to normal limitation periods.



In the event that you may seek entry to the UK or make an advance immigration application after settling an NHS debt in the previous **three months**, you are advised to retain and carry evidence of payment for potential examination by Home Office officials.

Appendix 4: Document acknowledgement that patient is non-chargeable



Medico Legal Department Stepping Hill Hospital Poplar Grove Hazel Grove Stockport SK2 7JE 0161 419 5425

[Recipient's Name]
[Position, Company]
[First address line]
[Second address line]
[Town/city Postcode]

1 January 2014

Dear [Name]

## [Reference]

Thank you for sending the documents we requested on 1 January 2014.

I can confirm that you are eligible for [XXXXXXX (this treatment)] under the NHS free of charge.

Your status will now be noted on your records. Please update us should your circumstances change. You should be aware that we may also receive new information on your status from elsewhere. In either situation we will review your eligibility to access free NHS hospital treatment.

Yours sincerely,

[Author's name]

[Position/title]



**Appendix 5: Payment Request Letter** 

Medico Legal Department Stepping Hill Hospital Poplar Grove Stockport SK2 7JE 0161 419 5425

[Recipient's Name]
[Position, Company]
[First address line]
[Second address line]
[Town/city Postcode]

1 January 2014

## Dear [Name]

## Please pay invoice for £AmountDue for your NHS treatment at [Surgery/Hospital]

We have informed you that you are not eligible for free NHS hospital treatment and must pay for the cost of your care. I enclose an invoice for the treatment you received at this hospital on 1 January 2014.

You signed a declaration committing to pay the NHS hospital the costs for your treatment. A copy of your declaration is enclosed.

### How to pay:

The amount you now must pay is: £AmountDue

Payment must reach us by: 1 January 2014

Payment can be made by credit card by calling this office on (00000) 000 000.

You are also able to pay by cheque. Cheques should be made payable to:
[Payee]

## Where to Pay please send payment to:

[Region/Department]

[First address line]

[Second address line]

[Town/city]

[County Postcode]

## You are currently in the very small minority of NHS patients who owe the NHS money.

The hospital takes action to recover unpaid debts. If payment does not reach the hospital on time you may be liable for additional debt collection and legal fees. Outstanding debts over £1,000 for NHS treatment may mean that any future immigration applications you make to enter or remain in the UK may be denied until the debt is settled.

If you would like to discuss payment of your invoice please contact me by calling (00000) 000 000 between 08:00 and 17:00.

Yours sincerely,



[Author's name] [Position/title]





Office Use Only
Submission Date:
Approved By:
Full EIA needed: Yes/No

# Equality Impact Assessment – Policies, SOP's and Services not undergoing re-design

1	Name of the Policy/SOP/Service	Oversea visitor policy and SOP	
2	Department/Business Group	Risk Management	
3	Details of the Person	Name:	Esther Obi
	responsible for the EIA	Job Title:	Risk and Safety Assurance Manager
		Contact Details:	01614195524
4	What are the main aims and objectives of the Policy/SOP/Service?	needs NHS treatm clinicians, senior n	eplains what should happen when an overseas visitor ent provided in the Trust. It is intended for staff including nanagers and clerks, and in particular staff with a entify and charge overseas visitors.

# For the following question, please use the EIA Guidance document for reference:

5	A) IMPACT	B) MITIGATION
	Is the policy/SOP/Service likely to have a differential impact on any of the protected characteristics? If so, is this impact likely to be positive or negative?  Consider:  Does the policy/SOP apply to all or does it exclude individuals with a particular protected characteristic e.g. females, older people etc?  What does existing evidence show? E.g. consultation from different groups, demographic data, questionnaires, equality monitoring data, analysis of complaints. Are individuals from one particular group accessing the policy /SOP /Service more/less than expected?	Can any potential negative impact be justified? If not, how will you mitigate any negative impacts?  ✓ Think about reasonable adjustment and/or positive action  ✓ Consider how you would measure and monitor the impact going forward e.g. equality monitoring data, analysis of complaints.  ✓ Assign a responsible lead.  ✓ Designate a timescale to monitor the impacts.  ✓ Re-visit after the designated time period to check for improvement.  Lead
Age		

Carers / People with caring responsibilities			
Disability			
Race / Ethnicity	Impact on non-white people or people for whom English is not their first language could be targeted due to speculation or assumption that they are not resident in the UK	Whilst it is recognise that there will be an impact for peoples in different background (non-white people or people for who English is not their first language), this is a government policy that has to be implemented. This policy/SOP reiterates the principle that each patient must be treated the same for the purposes of assessing whether charges are applicable and to treat patients non-discriminatorily by asking all patient the baseline question.	
Gender			
Gender Reassignment			
Marriage & Civil Partnership			
Pregnancy & Maternity			
Religion & Belief			
Sexual Orientation			
General Comments across all equality strands			

EIA Sign-Off	Your completed EIA should be sent to Sue Clark, Equality and Diversity Manager for approval and publication:	
	Susan.clark@stockport.nhs.uk	
	0161 419 4784	





# If you would like this policy in a different format, for example, in large print, or on audiotape, or for people with learning disabilities, please contact:

Sue Clark, Equality & Diversity Manager, Aspen House, Stepping Hill Hospital.

Tel: 0161 419 4784. Email: susan.clark@stockport.nhs.uk

This information can be provided in other languages and formats if you are unable to read English. Please contact the Patient and Customer Services department and inform them of your preferred language. The department telephone number is 0161 419 5678. You could also email <a href="mailto:PCS@stockport.nhs.uk">PCS@stockport.nhs.uk</a>.

يمكن توفير هذه المعلومات في لغات وأشكال أحرى اذا كنت غير قادر على قراءة اللغة الانجليزية. الرجاء الاتصال بدائرة خدمات المريض والزبون وابلاغها بلغتك المفصلة. رقم هاتف هذه الدائرة هو 0161 419 5678. يمكن كذلك بعث بريدا الكترونيا الى PCS@stockport.nhs.uk-

আপনি যদি ইংরেজী পড়তে না পারেন তাহলে এই তথ্য অন্যান্য ভাষায় এবং ফরম্যাটে দেওয়া যেতে পারে। দয়া করে পেশেন্ট অ্যান্ড কাস্টমার সার্ভিসেস এর সাথে যোগাযোগ করে তাদের জানিয়ে দিন আপনার ভাষাটি। ডিপার্টমেন্টের টেলিফোন নম্বর 0161 419 5678, আপনি এছাড়াও ই-মেইল করতে পারেন PCS@stockport.nhs.uk এই ঠিকানায়।

如果您不能閱讀英語,這些資料是可以其他語言和格式來提供。請發電患者及 客戶服務部門,並告知他們您的首選語言,該部門的電話號碼是 0161 419 5678,您還可以發送電子郵件至 PCS@stockport.nhs.uk –

اگر نمی توانید به زیان انگلیسی بخوانید، ما می توانیم این اطلاعات را به زیان ها و فرمت های دیگر در اختیار شما قرار دهیم. لطفا با دیارتمان Patient and Customer Services (خدمات مشتریان و بیماران) تماس بگیرید و زبان مورد نظر خود را به آنها بگویید. تسماره تلفن دیارتمان 5678 419 0161 است. شما می توانید از طریق ایمیل نیز تماس بگیرید: PCS@stockport.nhs.uk

Te informacje mogą być udostępnione w innych językach i formatach jeśli nie potrafisz czytać po angielsku. Proszę skontaktować się z działem 'Patient and Customer Services' i poinformować ich o twoim preferowanym języku. Numer telefonu tego działu to 0161 419 5678. Możesz także wysłać email pod: PCS@stockport.nhs.uk

اگرآپ انگریزی نبین پڑھ کتے تو یہ معلومات دوسری زبانوں اور صور توں میں بھی قراہم کی جاسکتی ہیں۔ براہ کرم پیشٹ اور تسٹر سر وس دالوں سے رابطہ کر کے اُنہیں بتائیں کہ آپ کو نبی زبان میں معلومات چاہتے ہیں۔ اُن کا فون نبیر ہے PCS@stockport.nhs.uk - آپ اُنہیں PCS@stockport.nhs.uk برای میل بھی کر سکتے ہیں۔



