

# **Overseas Visitors Procedure**

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## **Appendices**

- 1. OV Liability of Overseas Patient Charges
- 2. Model request for Advice from Doctor/Dentist
- 3. Patient Information Notice
- 4. DOH flowchart to show eligibility for free treatment
- 5. DOH flow chart explaining A&E route of GP referral route (treat or not treat)
- 6. Quote for care.

#### 1.0 Procedure Statement

The purpose of this procedure is to advise Trust staff of the Government regulations regarding overseas patients and the actions to take when a patient is identified as being an overseas visitor.

An overseas visitor can be defined as any person of any nationality who is not ordinarily resident in the UK.

Any suspicions of false representations/declarations or false ID documents should be reported to the Local Counter Fraud Specialist

The associated Department of Health (DoH) paper is:

 Guidance on implementing the overseas visitor charging regulations February 2021. <a href="https://www.gov.uk/government/publications/overseas-nhs-visitors-implementing-the-charging-regulations">https://www.gov.uk/government/publications/overseas-nhs-visitors-implementing-the-charging-regulations</a>.

Information within this procedure and the definitions used are extracted from the above DoH papers.

#### 2.0 Accountabilities

- 2.1 The Chief Executive of The Royal Wolverhampton NHS Trust, supported by the Trust Board, accepts responsibility for the implementation of this procedure. Trust Directors, Divisional Managers, Directorate Managers and Specialty General Managers have the responsibility for ensuring full compliance within their respective areas.
- 2.2 The Directorate Manager Patient Services will advise staff of any new procedures to follow or updated regulations from the department of health.
- **2.3** All staff within the Trust have a responsibility to inform the Overseas Visitors Team of any patient who may fall within the overseas visitor category.

#### 3.0 Procedure Detail

- 3.1 The NHS is intended primarily for the benefit of those who live in the United Kingdom. Since 1989, regulations have been in force which places a legal duty on NHS Trusts to identify and charge people who are not entitled to free NHS hospital treatment because they are overseas visitors or no longer reside in the UK.
- 3.2 Patients who are overseas visitors who are not entitled to free NHS hospital treatment must be identified at the earliest possible opportunity prior to treatment and payment must be received prior to treatment taking place. However, immediately necessary or urgent treatment that cannot wait until the patient returns home must not be withheld or delayed if the patient does not pay in advance. The patient will still be required to pay for the treatment.
- **3.3** All Trusts have a legal obligation to:
  - 1. Ensure that patients who are not ordinarily resident in the United Kingdom are identified:
  - 2. Assess liability for charges in accordance with the charging regulations;
  - 3. Charge those liable to pay in accordance with the regulations;



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- 4. Report all overseas patient treatment carried out using a valid EHIC/PRC/S2 byst using the OHS portal, which can be accessed at http://services.nhsbsa.nhs.uk/ovt/Pages/;
- 5. Any countries with which the UK has reciprocal agreements are to be claimed from the Host CCG as non-contract activity. This activity **does not** need to be submitted via the web portal to Department of Work and Pensions (DWP) OHT.
- To establish whether a patient is liable for overseas visitors (OV) charges, baseline questions will need to be answered by the patient. These are included in the form OV1 (Appendix 1). All reception areas have notices displayed to inform patients of the necessity to ask baseline questions as outlined in (Appendix 3).
- 3.5 Any patient attending the Emergency Department (ED) or a walk-in clinic is entitled to free emergency treatment, however if they are admitted to a ward, they will be liable for NHS Overseas Visitors charges. If they are referred for further outpatient treatment this will also be chargeable. Reception staff at ED or a walk-in clinic will ask the patient the baseline questions to establish whether the person is an overseas visitor and these will also be asked by ward receptionist/ nursing staff of the receiving ward.
- 3.6 All new patients or patients with a new referral for treatment attending for outpatient appointments must be asked the baseline questions at all reception points throughout the Trust as set out in the regulations. Staff must follow the Trust procedures at all times. If there is any doubt whether the patient is liable, advice must be sought from the Overseas Visitors Team on extension 85546 or 85541
- 3.7 Where staff identify that a patient may be an overseas visitor an OV1 form needs to be completed (Appendix 1). Once completed the OV1 form must be sent to the Private Patients and Overseas Visitor Team via email <a href="mailto:rwh-tr.PrivatePatientsTeam@nhs.net">rwh-tr.PrivatePatientsTeam@nhs.net</a>.
- **3.8** Flow charts **Appendix 4** and **Appendix 5** give more information on eligibility and status of overseas visitors.
- 3.9 An Overseas Visitors Team member will visit any patient who has been identified as being an overseas visitor, and the patient, or their representative, will be informed if they are chargeable for treatment. The patient will then be provided with either a quotation for treatment (Appendix 6) that has not yet taken place or will receive an invoice if treatment has already taken place. Payment will be expected at the point the estimated costs are identified and there must be no further treatment before payment has been received (except in the circumstances outlined in 4.2). If the visitor has private insurance, they will have to take responsibility of claiming this themselves and they must be made aware that they must pay the invoice or quotation raised in full prior to treatment.
- 3.10 Overseas visitors will also be informed that if patients fail to pay for NHS treatment for which charges have been levied, it may result in a future immigration application to enter or remain in the UK being denied. Necessary personal information may be passed via the DOH to the UK Border Agency for this purpose.
- **3.11** Where a patient has been identified as being an overseas visitor, clinical staff will be sent or given a form (Appendix 2) to complete, as per the Government regulations. The form must be completed, signed and returned to the Overseas Visitors Team via email or post.
  - Overseas visitors must not be put on a waiting list for further treatment unless they have paid for their treatment in advance or it is lifesaving treatment and Appendix 2 has been signed with this stated by a clinician.
- 3.12 The computer system PAS will be updated with the overseas status by the Overseas Visitors Team. The patient's health record must also be updated with the current details

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regarding the overseas status at every new appointment visit.

### 4.0 Equipment Required

No equipment required

## 5.0 Training

- **5.1** Training will be given on PAS and any other computer systems that require staff to record Overseas Status.
- **5.2** Standard order of case notes training will encompass the new regulations and be provided to all staff with front line duties.
- **5.3** Frontline staff will be given the opportunity to attend violence and aggression courses to help them to be better equipped in dealing with patients regarding this sensitive issue.

### 6.0 Financial Risk Assessment

1	Does the implementation of this policy require any additional Capital resources?	No
2	Does the implementation of this policy require additional revenue resources?	No
3	Does the implementation of this policy require additional manpower?	No
4	Does the implementation of this policy release any manpower costs through a change in practice?	No
5	Are there additional staff training costs associated with implementing this policy which cannot be delivered through current training programmes or allocated training times for staff.	No
6	Other comments	None

## 7.0 Equality Impact Assessment

This Policy has been assessed as not affecting the equality and diversity of any one particular group of stakeholders.

#### 8.0 Maintenance

This procedure will be monitored by the Chief Finance Director and disseminated to the appropriate staff.

#### 9.0 Communication

In order to enforce this responsibility all trusts will need to have systems in place with staff that have the appropriate skills to:

- 1. Ensure that all those patients who are not ordinarily resident are identified;
- 2. Interview non-ordinarily resident patients to establish whether they are exempt from charges or liable for charges;



- 3. Charge for treatment prices set by the DOH;
- 4. Recover charges owed;
- 5. Inform the Department of Health and the Nationwide Clearing Service.
- **9.1** The trust will provide written information on how to deal with overseas visitors for all members of new staff including medical staff at the Trust induction.
- **9.2** The procedure will be included in Local Induction for Clinical and other staff.

#### 10.0 Audit Process

Criterion	Lead	Monitoring method	Frequency	Committee/ Group
Forms	Overseas	Individual checks	Monthly	Directorate
completed by	Administrator	on all Overseas		Management
clinicians		Visitor paperwork		Meetings
Income	Finance Team	Report on income	Monthly	Audit
recovery		received		Committee
Numbers of	Patient	Database	Six Monthly	Finance
patients	Services			Team
identified.	Manager			

#### 11 References

The associated Department of Health (DOH) papers are:-

 Guidance on implementing the overseas visitor charging regulations February 2021. <a href="https://www.gov.uk/government/publications/overseas-nhs-visitors-implementing-the-charging-regulations">https://www.gov.uk/government/publications/overseas-nhs-visitors-implementing-the-charging-regulations</a>

## 12. Appendices

- 1.OV Liability of Overseas Patient Charges
- 2. Model request for Advice from Doctor/Dentist
- 3. Patient Information Notice
- 4.DOH flowchart to show eligibility for free treatment
- 5.DOH flow chart explaining A&E route of GP referral route-
- 6.Quote for care.



Procedure Name  Overseas Patient Procedure	Version: 7.0  December 2021		Status: Final	Author: Directorate Manager/ Financial Controller  Director Sponsor: Chief Financial Officer
Version /	Version	Date	Author	Reason
Amendment History	1	September 2005	Lynne Graff	Introduction
	2	September 2009	Elaine Roberts	Review
	3	October 2012	Elaine Roberts/Matt West	Review
	4	August/ Sept 2015	Elaine Roberts/Matt West	Early review due to new Government regulations
	5	May 2017	Elaine Roberts/Emma Greybanks	Change from Policy to Procedure
	6	May 2019	Patient Services Manager	Review by Director of Finance – September 2019 – Pending full review
	6.1	August 2019	Patient Services Manager	Reviewed by Chief Operating Officer – extended to January 2020
	6.2	November 2019	Patient Services Manager	Reviewed by Chief Operating Officer – extended to April 2020



	T	The Royal Wolverhampton
April 2020	Directorate Manager Patient Services	Advice from Government since we came out of Europe is that all procedures and guidelines for Overseas visitors will stay the same until December 2020.
November 2020	Directorate Manager Patient Services	Extension approved until March 2021.
January 2021	Directorate Manager Patient Services	Extension approved until September 2021
December 2021	Directorate Manager Patient Services	Updated Procedure due to new government regulations and full review undertaken.
	November 2020  January 2021  December	November Directorate Manager Patient Services  November Directorate Manager Patient Services  January 2021 Directorate Manager Patient Services  December Directorate Manager Patient Services  December Directorate Manager Patient Manager Patient

**Intended Recipients:** Medical and other staff involved in the admission of overseas visitors' patients

**Consultation Group / Role Titles and Date:** Government regulations change Feb 2021/ NHSEI Overseas Visitors Improvement Team/ NHS Cost Recovery – DHSC/ Overseas Department/Finance Dept – Financial Controller

Name and date of group where reviewed	Trust Policy Group December 2021
Name and date of final approval committee	Trust Policy Group December 2021 TMC January 2022
Date of Procedure issue	February 2022 v7.0
Review Date and Frequency	December 2024 (3 yearly)



<b>Training and Dissemination:</b> Training given to all new staff via local induction, Overseas staff have more in-depth training via certain government training facilities				
Publishing Requirements: Can this do	ocument be published on the Trust's public			
page:				
Yes				
To be read in conjunction with:				
To be read in Conjunction with.				
<ul> <li>Guidance on implementing the overseas visitor charging regulations February 2021. <a href="https://www.gov.uk/government/publications/overseas-nhs-visitors-implementing-the-charging-regulations">https://www.gov.uk/government/publications/overseas-nhs-visitors-implementing-the-charging-regulations</a></li> </ul>				
Initial Equality Impact Assessment:	Completed Yes Full Equality Impact			
assessment (as required): Completed Yes				
Contact for Review Directorate Manager Patient				
Contact for Review	Services/Financial Controller			
Monitoring arrangements  Patient Services Management Group. Finance & Performance Committee				
Document summary/key issues covered. Process to follow for Trust staff when an overseas				
visitor attends for treatment. Legal requirement for all staff to follow				
Key words for intranet searching purposes Overseas/ Patients/team				



#### **OP01 Attachment 9**

### Ratification Assurance Statement

Name of document: Overseas Visitors Procedure OP69

Name of author: Elaine Roberts Job Title: Directorate Manager Patient Services –

I, Elaine Roberts the above named author confirm that:

- The Procedure presented for ratification meet all legislative, best practice and other guidance issued and known to me at the time of development of the said document.
- I am not aware of any omissions to the said document, and I will bring to the attention of the Executive Director any information which may affect the validity of the document presented as soon as this becomes known.
- The document meets the requirements as outlined in the document entitled Governance of Trust- wide Strategy/Policy/Procedure/Guidelines and Local Procedure and Guidelines(OP01).
- The document meets the requirements of the NHSLA Risk Management Standards to achieve as a minimum level 2 compliance, where applicable.
- I have undertaken appropriate and thorough consultation on this document and I have detailed the names of those individuals who responded as part of the consultation within the document. I have also fed back to responders to the consultation on the changes made to the document following consultation.
- I will send the document and signed ratification checklist to the Policy Administrator for publication at my earliest opportunity following ratification.
- I will keep this document under review and ensure that it is reviewed prior to the

review date. Signature of Author: Elaine Roberts

Date:26/10/2021

Name of Person Ratifying this

document: Job Title:

Signature:

To the person approving this document:

Please ensure this page has been completed correctly, then print, sign and email this page only to: The Policy Administrator



## Implementation Plan template for Policy / procedural documents

To be completed showing all implementation requirements and attached to the policy when submitted to the appropriate committee for consideration / approval.

Title of document:	OP	69 – Oversea	as Visitors Policy	
Reviewing Committee	TM	TMC		Date reviewed: Nov 2021
Previous document already in use?			Implementation lead: Elaine	Elaine Roberts Ext 85571
If yes, state name, in what format and where located?		Procedure OP69/ tranet/PDF	Roberts	
Implementation issues to	be c	onsidered [a	dd additional issu	es where necessary]
Implementation Issue		Action	n Summary	Action lead / s [Timescale for completion]
Training Consider 1. Mandatory training approval process 2. Completion of mandator training form	ry	Training undertaken is with new health records staff to understand the relevant questions to be asked at reception points and Manager performs group sessions when needed for anyone in the Trust		Health Records Management –
Development of Forms, leaflets etc. Consider 1. Type 2. Quantity required 3. Where they will be kept accessed 4. Where stored when completed	1	Leaflets /posters and slides on totem screens developed by Department of Health are available in outpatient areas and ED More stock available in Overseas Office if needed		Elaine Roberts
Policy / Procedure communication Consider 1. Key communication messages from the policy / procedure, who to and how? Financial cost implementation Consider 1. Business case development		for many ye established updates are	lications for	
Other specific Policy issues / actions as require e.g. Risks of failure to implement, gaps or barrier to implementation				



## **Appendix 1**

## LIABILITY TO OVERSEAS PATIENT CHARGES

Patients Name:-	
UK Address:-	
Overseas Addres	ss:
Hospital Numbei	:
Date of Birth	//
•	ments regarding status will be investigated
QU	ESTIONNAIRE FOR STAGE 1
	Are you a UK/EEA/Swiss national or do you have a valid visa or leave to enter/remain in the UK?
	Yes No (please circle)
	Which countries have you lived in during the last year?
Question 3	On what date did you arrive in the UK?
<b>N</b> I	Overseas Visitors to the overseas team on the
PIPASA TATAT SII (	IVERSEAS VISITORS TO THE OVERSEAS TEAM ON THE

Telephone – 01902 695541 or 01902 695541 or email-rwh-tr.PrivatePatientsTeam@nhs.net

relevant numbers below:-



**APPENDIX 2** 

[EXAMPLE REQUEST FOR ADVICE FROM DOCTORS/DENTISTS]
Dear Doctor
NAME OF PATIENT
Date of Birth/
Hospital Number
This patient is an overseas visitor as defined in the National Health Services (Charges to Oversea Visitors) Regulations 2011. Having interviewed the patient, we found him/her to be liable for charges as a overseas visitor.
Government advice to safeguard NHS resources is to obtain payment where possible before treatment is given. In this case, the patient has declared that he/she will not be able to pay prior to receipt of the treatment.
However, relevant NHS bodies must also ensure that treatment which clinicians consider to be immediately necessary is provided to any patient, even if they have not paid in advance. <b>Failure to do so may be unlawful under the Human Rights Act 1998.</b> Urgent treatment which clinicians do not consider immediately necessary, but which nevertheless cannot wait until the person can be reasonably expected to return home, should also be provided to any patient, even if deposits have not been secured.
The patient is likely to return home on or around / /21
Therefore, would you please tick one of the declarations below?
Having made the appropriate diagnostic investigations, I intend to give treatment which is immediately necessary to save the patient's life/prevent a condition from becoming immediately life-threatening or needed promptly to prevent permanent serious damage occurring. All maternity treatment is considered immediately necessary.
Having made the appropriate diagnostic investigations, I intend to give <b>urgent</b> treatment which is not immediately necessary to save the patient's life but cannot wait until the patient returns home. If the patient's ability to return changes I will reconsider my opinion.
Having made the appropriate diagnostic investigations, I do not intend to provide treatment unless payment is made in advance, since the patient's need is <b>non-urgent</b> and it can wait until they return home. If the patient's ability to return changes I will reconsider my opinion.
I must make further investigations before I can assess urgency.
Where treatment is given (or has been given already), the relevant NHS body is obliged to raise an invoice for the cost of such treatment, and to recover the cost of treatment where possible. Debts should be writte off as losses where unrecoverable.
DateSigned(Doctor)
DateSigned(Overseas Visitors Manager)
1 Relevant NHS hodies are NHS trusts. NHS foundation trusts, primary care trusts, strategic health authorities and special

health authorities.



**APPENDIX 3** 

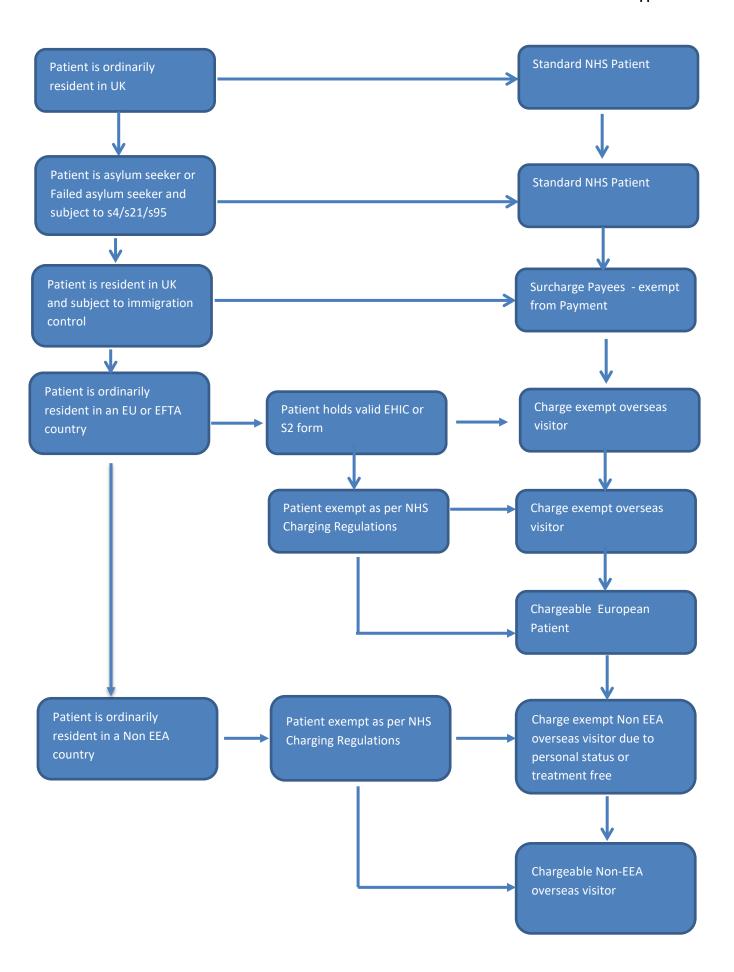
# **IMPORTANT PATIENT INFORMATION**

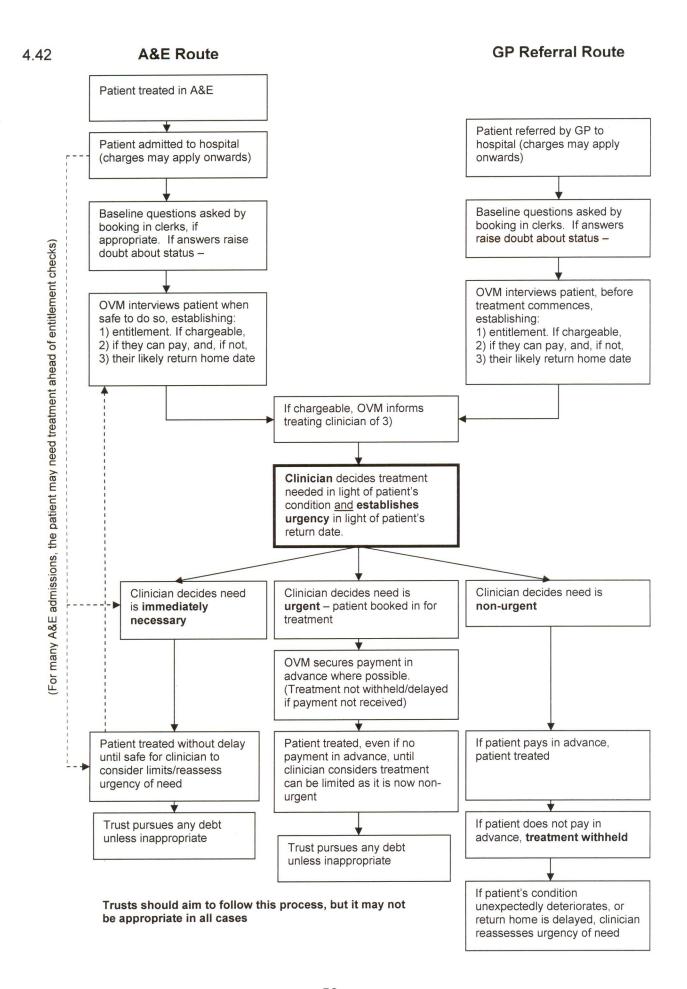
Hospital treatment is free to people who live in the United Kingdom (UK). If you do not normally live here then you may be asked to pay for any treatment you might need. This is regardless of whether you are a British citizen or have lived or worked here in the past.

To ensure that this policy is effectively managed you will be asked by the receptionist to confirm you have been in the UK for twelve months immediately prior to treatment.

To gain the information required to progress your treatment our staff need to check your current status, so please do not be offended by their questions.

If you have any concerns please ring our Patient and Liaison Service on ext 5362.







New Cross Hospital Wolverhampton Road Wolverhampton West Midlands WV10 0QP

Tel: 01902 307999

#### uotation for Care

Prepared on //21 by		
Patient Name		
Date of Birth	Postcode	
Home Address:	,	
Overseas Address		
Ward/Area	Admission Date Discharge Date	
	· ·	
MINIMUM REQUIRED	£	

The above quotation is based upon projections of care; if there are any complications with the patient or after delivery, or my child requires further treatment, I understand that there will be an additional charge.

I shall pay Royal Wolverhampton NHS Trust for the full amount of the cost of care using the most appropriate method to the Trust (credit/debit card, cash, cheque + guarantee card to the limit, bankers draft).

I understand that if I leave the UK without paying, that Royal Wolverhampton NHS Trust shall make reasonable efforts to recover the debt using an international debt collection agency.

Any non-payment of the debt may have further implications on any future entry requirements into the UK.

I have read the quotation and the statement and I understand and agree the terms quoted.

Signed (patient)	Date
Signed (on behalf of RWHT)	Date

Chairman: Professor Steve Field CBE Chief Executive: David Loughton CBE Preventing Infection - Protecting Patients

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