Dear Secretary of State,

I am writing to you about a national pilot, led by the Department of Health and NHS Improvement, focused on recovering the cost of NHS care from overseas patients across 20 NHS trusts, which has been brought to my attention.

I understand that under the National Health Service (Charges for Overseas Visitors) Regulations 2015, services for the diagnosis and treatment of sexually transmitted diseases and those for a select list communicable diseases are exempt from charges, except if individuals have travelled to the UK specifically for the purpose of seeking treatment.

A letter from one of the NHS trusts participating in the pilot has been shared with me, in which the trust instructs patients attending an appointment at its Infectious Diseases Department to bring two forms of identification proving their permanent residence in the UK. The letter goes on to mention that those who are not ordinarily resident in the UK, or those who are exempt from charges for some other reason, may be charged for any treatment they receive.

I am concerned that patients in areas covered by the pilot may be deterred from accessing treatment, particularly if they have misunderstood the pilot’s purpose and/or are not aware of the exemptions that apply to them.

I recognise the importance of recovering the cost of NHS care from overseas visitors and preventing misuse of NHS services. However, exemptions concerning the diagnosis and treatment of sexually transmitted diseases and communicable diseases were introduced within the regulations to protect the wider community as well as the health of individuals accessing services. As Chair of the Health Committee, I would welcome your assurance that these protections will not be compromised by the implementation of the Department of Health and NHS Improvement’s pilot.

Consequently, I would be grateful if you could write to me explaining:

• the purpose of the pilot, including the type of NHS services it applies to;
• the names of the NHS trusts participating;
• details of any impact assessment that has been carried out;
• any guidance issued to participating NHS trusts on how to communicate the pilot to patients; and
• steps the Department of Health and/or NHS Improvement have in place to evaluate the pilot before it is rolled out nationally, and specifically how the wider public health will be protected as well as vulnerable individuals during the pilot.

Thank you for your assistance in this matter and I look forward to your reply. I shall share your reply with the Committee, once established, and invite the Committee to agree to its publication.

Yours sincerely,

Dr Sarah Wollaston MP
Chair of the Committee
Dear Sarah,

Thank you for your letter dated 21 July, regarding the eligibility-checking pilots we are conducting.

You’ll be aware that since your letter, the pilot in the Infectious Diseases Unit in Newcastle that you referred to has been cancelled. The Trust decided that, on reflection, there was too great a risk of confusing patients using the Infectious Diseases Unit, as this treatment is exempt from overseas charging. I can assure you that treatment for infectious diseases remains exempt from the Overseas Charging Regulations.

The pilots are being launched in a cohort of Trusts to test the efficacy of asking all patients for two forms of ID prior to treatment. As my officials discussed with the Public Accounts Committee in November 2016, we want to understand whether this process improves the ability of the NHS to identify non-eligible patients earlier in the patient pathway. We also want to understand whether asking for ID allows chargeable patients to make more informed choices about whether they continue to seek care in England when the cost is made clear. Please see attached the list of Trusts where the pilots are being run. We have ensured that all Trusts have engaged with local stakeholders and commissioners to ensure patients understand the purpose of the pilots and that they will not be denied treatment if it is urgent and immediately necessary.

These pilots are an important piece of work to improve processes ensuring fair access to the NHS. However, I understand your concerns about limiting access to vulnerable groups and so we are working with each Trust to ensure their communications are absolutely clear in this respect. In addition, our evaluation of the pilots will look at
the impact on attendance rates as well as the impact of ID checks on the experience of patients and staff. We have commissioned Ipsos Mori to formally evaluate the pilots over a three-month period and we will use the findings to conduct a thorough analysis of any proposals later this year.


JEREMY HUNT
Annex A – List of Trusts conducting eligibility-checking pilots

- Barking, Havering and Redbridge University Hospitals NHS Trust
- Barts Health NHS Trust
- Bradford Teaching Hospitals NHS Foundation Trust
- Cambridge University Hospitals NHS Foundation Trust
- Chelsea & Westminster NHS Foundation Trust
- University Hospitals Coventry & Warwickshire NHS Trust
- Guy’s & St Thomas’ NHS Foundation Trust
- The Hillingdon Hospitals NHS Foundation Trust
- Imperial College Healthcare NHS Trust
- King’s College Hospital NHS Foundation Trust
- Leeds Teaching Hospitals NHS Trust
- University Hospitals of Leicester NHS Trust
- Royal Liverpool and Broadgreen University Hospitals NHS Trust
- London North West Healthcare NHS Trust
- Nottingham University Hospitals NHS Trust
- Royal Free NHS Foundation Trust
- St George’s University Hospitals NHS Foundation Trust
- University College London Hospitals NHS Foundation Trust