

NHS entitlements: migrant health guide

Advice and guidance for healthcare practitioners on the health needs of migrant patients.

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Introduction

This guidance is about NHS entitlements in England.

The Scottish Government has published separate guidance on [overseas visitors' liability to pay charges for NHS care and services](#).

Further information is also available regarding [health services for overseas visitors in Wales](#).

Free Services

GP and nurse consultations in primary care, treatment provided by a GP and other primary care services are free of charge to all, whether [registering as an NHS patient](#), or as a [temporary patient](#), which is when the patient is in the area for more than 24 hours and less than 3 months.

For secondary care services, the UK's healthcare system is a residence-based one, which means entitlement to free healthcare is based on living lawfully in the UK on a properly settled basis for the time being.

The measure of residence that the UK uses to determine entitlement to free NHS healthcare is known as 'ordinary residence'. This requires non-EEA nationals subject to immigration control to also have the immigration status of indefinite leave to remain.

Individuals who are not ordinarily resident in the UK may be required to pay for their care when they are in England. However, some services and some individuals are exempt from payment.

The [National Health Service \(Charges to Overseas Visitors\) \(Amendment\) Regulations 2017](#) and [Guidance on overseas visitors hospital charging regulations 2017](#) outline the following services in the NHS which are currently free of charge irrespective of country of normal residence (as long as the overseas visitor hasn't travelled to the UK for the purpose of seeking that treatment):

- accident & emergency services, including all A&E services provided at an NHS hospital, e.g. those provided at an A&E department, walk-in centre, minor injuries unit or urgent care centre. This does not include those emergency services provided after being admitted as an inpatient, or at a follow-up outpatient appointment, for which charges must be levied unless the overseas visitor is exempt from charge in their own right;
- services provided for the diagnosis and treatment of a number of communicable diseases, including HIV, TB and [Middle East Respiratory Syndrome \(MERS\)](#) (see [regulations](#) for exact list)
- services provided for the diagnosis and treatment of sexually transmitted infections
- family planning services (does not include the termination of pregnancy or infertility treatment)
- services for the treatment of a physical or mental condition caused by torture, female genital mutilation, domestic violence, or sexual violence
- palliative care services provided by a registered palliative care charity or a community interest company
- services that are provided as part of the NHS111 telephone advice line

The following groups are exempt from charge:

- refugees (those granted asylum, humanitarian protection or temporary protection under the immigration rules) and their dependents
- asylum seekers (those applying for asylum, humanitarian protection or temporary protection whose claims, including appeals, have not yet been determined) and their dependents
- individuals receiving support under section 95 of the Immigration and Asylum Act 1999 (the 1999 Act) from the Home Office
- those whose application for asylum was rejected, but they are supported:
 - under section 4(2) of the Immigration and Asylum Act 1999 by the Home Office
 - by a local authority under section 21 of the National Assistance Act 1948
 - under Part 1 (care and support) of the Care Act 2014
- children looked after by a local authority
- victims, and suspected victims, of modern slavery or human trafficking, as determined by the UK Human Trafficking Centre or the Home Office, plus their spouse or civil partner, and any children under 18 provided they are lawfully present in the UK
- those receiving compulsory treatment under a court order, or who are liable to be detained in an NHS hospital or deprived of their liberty (for example, under the Mental Health Act 1983 or the Mental Capacity Act 2005) are exempt from charge for all treatment provided, in accordance with the court order, or for the duration of their detention
- prisoners and immigration detainees

There may also be exceptional humanitarian reasons where the secretary of state can determine that exemption from charges for relevant services is justified. This exemption also applies to their child and/or companion who is authorised to travel with them, for whom the exemption is limited to treatment that cannot await their return home.

Individuals who are covered by reciprocal healthcare agreements, such as the European Health Insurance Card or who have paid the immigration health surcharge may also be exempt from payment. For further exemptions and information, see [NHS Choices](#) and [Guidance on overseas visitors hospital charging regulations 2017](#).

Services in Scotland

Practitioners in Scotland can refer to the [National Health Service \(charges to overseas visitors\) \(Scotland\) regulations 1989](#).

GP services

Anyone in England can register and consult with a GP without charge.

GPs are self-employed and have contracts with NHS England to provide services for the National Health Service.

An application to join a practice may only be refused if the practice has reasonable grounds for doing so, but a practice cannot refuse an application on the grounds of:

- race
- gender
- social class
- age
- religion
- sexual orientation
- appearance
- disability
- medical condition

The practice will ask the patient to complete a [GMS1 form](#) as part of their application to register with a practice, and those who are not ordinarily resident in the UK will be requested to complete supplementary questions to indicate details of their valid non-UK EHIC/S1 form (if applicable) or if, where known, they consider themselves to be exempt from charge or chargeable for NHS secondary care services (should these be needed).

GP practices are not required to request any proof of identity or of immigration status from patients wishing to register. Some GP practices will, however, ask to see proof of identity with the patient's name and date of birth, such as:

- passport
- driving licence
- application registration card (ARC)
- IS96 or a Home Office letter

and proof of address, such as:

- a recent utility bill (gas, electricity, water or landline phone bill)
- council tax bill

[NHS guidance](#) clearly outlines that a practice cannot refuse a patient because they do not have identification or proof of address.

Where a patient applies to register with a general practice and is subsequently turned down, the GP must nevertheless provide, free of charge, any immediately necessary treatment that is requested by the applicant for a period of up to 14 days (this can vary according to circumstances).

If a GP practice refuses to register a patient the practice must notify the applicant, in writing, of the refusal and the reason for it, within 14 days of its decision.

The [Standard General Medical Services Contract](#) and the [National Health Service \(General Medical Services Contracts\) regulations 2004](#) explain this requirement.

Where a person has difficulty in registering for National Health Services with a primary medical services contractor, they can contact:

- their [local NHS England area team](#) directly
- the local [Patient Advice and Liaison Services](#)

These services can discuss what help is available locally.

If a person goes to a GP for treatment whilst visiting the UK and is treated as a private patient then any prescription would also be private and would have to be paid for privately.

If a GP accepts a person as an NHS patient (either full or temporary) and gives the patient an NHS prescription (FP10) then [normal charging rules apply](#).

Immigration health surcharge for non-European Economic Area nationals

From 6 April 2015, non-EEA nationals [need to pay a health surcharge](#) when applying for a visa to stay in the UK for over 6 months, unless [they are exempt](#).

Those who have paid the surcharge (or who are exempt from having to pay it or have had the requirement waived) can use the NHS on a similar same basis as an ordinarily resident person while their visa remains valid, although they still need to pay for [certain services](#), including prescriptions, dental treatment, and assisted conception services.

The surcharge is £150 per year for students and those on Youth Mobility visas and £200 per year for all other visa and immigration applications. Dependents have to pay the same amount.

Some [exemptions exist for people who do not need to pay the surcharge](#), including those:

- seeking asylum or applying for humanitarian protection (or their dependents)
- identified as a victim of human trafficking (or their dependents)
- applying for indefinite leave to remain

- who the Home Office's domestic violence concession applies to (or their dependents)
- where being made to leave the UK would be against their rights under Article 3 of the European Convention of Human Rights (or their dependents)

Individuals who have a [visitor visa and those with a visa for under 6 months](#) need to pay for any healthcare at the point of use unless an exemption from charge category applies.

See the [Pay for UK healthcare as part of your immigration application](#) page for a full list of exemptions and further information.

Hospital treatment

Hospital treatment is free to people classed as ordinarily resident in the UK. This is not dependent on nationality, payment of UK taxes, National Insurance contributions, being registered with a GP, having an NHS Number, or owning property in the UK. To be considered ordinarily resident, you must be living in the UK on a lawful and properly settled basis for the time being.

Since 6 April 2015, non-EEA nationals who are subject to immigration control must have the immigration status of indefinite leave to remain (ILR) at the time of treatment and be properly settled, to be considered 'ordinarily resident'.

However, if you are a family member of an EEA national who is resident in the UK, you may not be subject to immigration control, even though you yourself are from outside the EEA. For more information about applying to join family living permanently in the UK, visit [GOV.UK](#).

Some people who are not considered ordinarily resident in the UK ('overseas visitors') may be [exempt from charges](#) for NHS hospital treatment under the current regulations. All other patients are charged for treatment, except that treatment that is [free to all](#). Payment is required in full and in advance of treatment where clinicians consider the need for treatment to be non-urgent (i.e. it can wait until the patient can reasonably be expected to return to their country of residence). Where clinicians consider the patient's need to be immediately necessary or urgent, treatment will be provided even if the patient has not paid in advance, in which case payment will be sought from the patient afterwards.

Prescription charges can apply for out-patient or day patient treatment.

The legal duty to assess patients on their eligibility for hospital treatment lies with the NHS body providing treatment. Most hospitals have Overseas Visitors Managers or their equivalents to do this assessment. They make their assessments in line with the Charging Regulations and based on evidence provided by the patient.

Patients should expect to be asked to prove that they are entitled to free NHS Hospital Treatment. As of 23 October 2017, all NHS trusts and NHS foundation trusts are required to record when a person is an overseas visitor (i.e., not ordinarily resident in the UK) against their NHS number. From 6 April 2015, individuals living outside the EEA [will be charged 150% of the cost of NHS treatment](#) for any care they receive, unless [they are exempt](#).

For more information see:

- [Guidance on overseas visitors hospital charging regulations 2017](#)

- [National Health Service \(Charges to Overseas Visitors\) \(Amendment\) Regulations 2017](#)

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Dental treatment

As with primary medical care, dentists providing NHS care are self-employed contractors with NHS England.

They cannot turn down an applicant for NHS treatment on the grounds of:

- race
- gender
- social class
- age
- religion
- sexual orientation
- appearance
- disability
- dental condition

In applying to become an NHS patient of a particular dental practice, there is no formal requirement to prove identity or immigration status.

Where a person has difficulty in finding a dentist willing to provide them with NHS dental care, they can contact:

- their [local NHS England area team](#)
- the local [Patient Advice and Liaison Services](#)

NHS dental charges are levied on all those who are taken on as NHS patients, unless:

- the treatment is free (certain NHS dental treatments are free)
- the patient is exempt or partially exempt from charges on the grounds of age, pregnancy, or income

Eligibility for dental secondary care is as per general eligibility for NHS medical treatment in hospitals (see [hospital treatment](#)).

[Further information about dental care](#) is available from NHS Choices.

Special groups

For further information about the entitlements of particular groups, see [Information for those visiting or moving to England](#).

Refused asylum seekers

Registration with primary care in England, Wales and Scotland applies to refused asylum seekers as for any other patient regardless of immigration status.

In Scotland and Wales, asylum seekers and refused asylum seekers are entitled to free secondary health care on the same terms as any other ordinary resident.

In England, only those refused asylum seekers who receive section 4(2) from the Home Office or section 21 support from a local authority or support under Part 1 (care and support) of the Care Act 2014 are entitled to free secondary health care.

However, all refused asylum seekers can continue, free of charge, with any course of treatment already underway before their application was refused. For new courses of treatment, treatment that clinicians consider is needed immediately or urgently (before able to leave the UK) will be provided even if payment is not made in advance of treatment and arrangements for payment can be discussed with the hospital. Maternity care will always be provided, even when charges apply.

Refused asylum seekers can be registered with a GP and receive free primary care services and, where NHS hospital treatment (secondary care) is needed, accident and emergency services are free as is the diagnosis of infectious diseases (even if there is a negative result) and treatment of those diseases, if positive. The treatment of certain types of violence (eg as a consequence of sexual violence) is also free of charge. For more information see:

- Refugee Council leaflet on [access to healthcare for asylum seekers](#) in several languages
- The Royal College of General Practitioners [position statement on access to primary care for failed asylum seekers and vulnerable migrants](#)

Visitors from reciprocal healthcare agreement countries and the European Economic Area (EEA)

People who are visiting the UK from a country which has a bilateral healthcare agreement with the UK are exempt from charges for some NHS hospital treatment in the UK.

To see what level of cover is provided [see NHS choices](#).

People from EEA member states and Switzerland are exempt from charge for all medically necessary treatment, including treatment for chronic conditions, including routine monitoring. They must show a valid European Health Insurance Card (EHIC) or a Provisional Replacement Certificate to receive free care.

Pre-planned treatment is not included free of charge without special, prior arrangement. Residents of EEA member states should speak to the authorities in their home country if they wish to come to the UK specifically to receive treatment.

See: [information for EEA visitors](#)

Data sharing: Section 55 Data Protection Act

Health professionals are under no obligation to share personal medical data on patients, even if requested by other government agencies. In some circumstances, doing so could be a violation of a health professional's obligations under the Data Protection Act and duty of confidentiality.

The NHS can, however, seek information from the Home Office about a person's immigration status to inform an assessment of eligibility for free NHS treatment. They

can also share information about overseas debtors with the Home Office following set criteria, including that the debt is £500 or more and has been unpaid for 2 months or more. Overseas visitors are informed, as a condition of receiving treatment:

- that information may be disclosed to the Home Office if the patient does not pay for any treatment received
- that this debt may affect a future immigration application

NHS Digital can also share non-clinical information with the Home Office, as per the Home Office's request, under the legal bases described in the [Memorandum of Understanding between Health and Social Care information Centre and the Home Office and the Department of Health]

(<https://www.gov.uk/government/publications/information-requests-from-the-home-office-to-nhs-digital>). According to the Memorandum, the Home Office may make requests to NHS Digital to establish if they hold certain non-clinical information in relation to immigration offenders, and, if so, for that information to be provided to the Home Office for the express purpose of supporting its strategic priorities.

Resources

Patients can apply to the NHS low income scheme for help with health costs.

See '[HC11: help with health costs](#)' information available in several languages. A full help HC2 certificate (which includes free NHS prescriptions) can be applied for using the HC1 form, which is [available to order online](#), from Jobcentre Plus offices or most NHS hospitals.

HC1 forms are available to order by phone: 0300 330 134.

Use this number for help or any questions about filling out the form. An interpretation service is available for patients who don't speak English.

See '[Get help with health costs](#)' on NHS Choices.

[Maternity Action](#) has information on maternity rights and benefits for parents who have claimed asylum.

[Equality and Human Rights Commission](#) provide information about equality and rights for healthcare.

[NHS Inform factsheets](#) include information about access to NHS services in Scotland for asylum seekers, refugees and those coming to Scotland to work and study. The factsheets are available in a number of languages.

The [Patient Advice and Liaison Service \(PALS\)](#) offers confidential advice, support and information on health-related matters, and provides a point of contact for patients, their families and their carers.

[NHS Choices](#) provides advice and information about health issues to members of the public.