

# **Guidance on the Reimbursement of Expenses for Patients Travelling outside Northern Ireland for Treatment/Care**

## **1.0 Introduction**

- 1.1 This guidance has been developed for use by the Health and Social Care Board in Northern Ireland when considering applications for financial assistance or reimbursement for travel, accommodation, subsistence or (in exceptional circumstances) other expenses incurred by patients and their families/carers in accessing planned treatment outside Northern Ireland.
- 1.2 This document does not address “live donor” expenses other than travel, accommodation and subsistence.

## **2.0 Overview of Entitlements**

- 2.1 A table summarizing the information provided in this Section is given in Appendix 1. There are four main routes by which patients will access planned treatment outside Northern Ireland:

- Extra Contractual Referrals
- Service level agreements with external providers
- S2 (E112) mandated treatment
- Directive 2011/24/EU on Cross Border Health Care (Article 56)

Patient entitlement to financial reimbursement will depend on the route used. Please note that the summary details given in this overview are not exhaustive of all qualifying criteria for treatment approval and are only intended to be used in assessing the most appropriate process to be adopted for the reimbursement or payment of treatment and associated costs.

The HSCB and PHA have agreed protocols and procedures in place with HSC Trusts in respect of the submission and approval process relating to ECR / IFR requests. (Correspondence issued 30 March 2012 to Trusts).

### **Extra Contractual Referrals (ECR)**

- 2.2 These occur when the Board approves a consultant's request to transfer a patient to a provider outside Northern Ireland for assessment or treatment which the consultant considers necessary but which is not available through HSC facilities locally.

2.3 In these circumstances the Board will pay approved treatment costs and will provide assistance for patients and approved escorts as follows:

- Book flights/ferries
- Reimburse other travelling expenses up to a maximum allowance
- Reimburse accommodation expenses up to a maximum allowance. In exceptional circumstances accommodation will be booked in advance by the HSCB or other delegated HSC Trusts
- Provide a subsistence allowance for meals

Other than in exceptional circumstances, no other costs will be reimbursed.

2.4 Travel expense reimbursement for ECR referrals is not means tested. Expenses in relation to this policy will be payable by the HSC Board regardless of the patients/escorts financial circumstances.

2.5 The HSC Board will not provide cash in advance of travel. In some cases assistance may be able to be provided by the Trust's gateway team.

### **Transfers under Service Level Agreements or other standing arrangements with providers outside Northern Ireland**

2.6 There are a small number of on-going arrangements with providers outside Northern Ireland which give rise to the regular transfer of patients for assessment or treatment.

2.7 Where patients are being transferred under these circumstances the Board will pay approved treatment costs and will provide assistance for patients and approved escorts as follows:

- Book flights/ferries
- Reimburse other travelling expenses up to a maximum allowance
- Reimburse accommodation expenses up to a maximum allowance. In exceptional circumstances accommodation will be booked in advance by the HSCB or other delegated HSC Trusts
- Provide a subsistence allowance for meals

Other than in exceptional circumstances, no other costs will be reimbursed

- 2.8 Travel expense reimbursement for these referrals is not means tested. Expenses in relation to this policy will be payable by the HSC Board regardless of the patients/escorts financial circumstances.
- 2.9 The HSC Board will not provide cash in advance of travel. In some cases assistance may be able to be provided by the Trust's gateway team.

### **Treatment under S2 arrangements (E112)**

- 2.10 The S2 (or E112) route is one where an individual seeks access to state-funded treatment in another European Economic Area (EEA) country or Switzerland. The route is used where it is considered that treatment is not available locally, or is not available within a reasonable period of time.
- 2.11 Where S2 approval has been given, the Board will:
- Book flights/ferries
  - Reimburse other reasonable travelling expenses up to a maximum allowance
  - Reimburse accommodation expenses up to a maximum allowance. In exceptional circumstances accommodation will be booked in advance by the HSCB or other delegated HSC Trusts
  - Provide a subsistence allowance for meals

The cost of treatment is paid at national level (i.e. not the Board) via the Overseas Healthcare Team in Newcastle. Prior approval for state funded treatment is necessary.

Other than in exceptional circumstances, no other costs will be reimbursed.

- 2.12 Travel expense reimbursement for S2 (E112) treatment is not means tested. Expenses in relation to this policy will be payable by the HSC Board regardless of the patients/escorts financial circumstances.
- 2.13 The HSC Board will not provide cash in advance of travel. In some cases assistance may be able to be provided by the Trust's gateway team.

## Treatment utilising Directive 2011/24/EU on Cross Border Health Care (Article 56)

- 2.14 The route is one where an individual (i.e. not the Board or the HSC Trust) seeks access to treatment in another European Economic Area (EEA) country or Switzerland in either the state or private sectors. Unlike other options, this arises where the Board considers treatment is available locally or within the rest of the UK within a reasonable time, but the patient has nonetheless opted to seek treatment elsewhere.
- 2.15 Applications for reimbursement of treatment costs are submitted by individuals using the HSCB Form A56. The patient will need prior authorisation providing proof that the treatment is appropriate if:
- a. The treatment is on the prior authorisation list; or
  - b. The patient has not been assessed as requiring treatment they are seeking by an NHS clinician and the treatment involves at least one night stay in hospital or requires the use of highly specialised and cost intensive medical equipment; or
  - c. The patient will require significant post-operative local clinical care.
- 2.16 In these circumstances:
- The Board will reimburse the actual cost of treatment or the equivalent cost of treatment delivered locally on the NHS, whichever is the lesser.
  - Travel, accommodation or other expenses associated with the patient's decision to seek treatment elsewhere will not be paid.
  - The Board will not pay the provider directly. The patient will pay for the cost of treatment and seek reimbursement from the Board.

### 3.0 Non Treatment Expenses

Expenses for travel, accommodation and subsistence are payable where:

- A patient has been referred by a local NHS medical Consultant to a hospital or specialist facility outside Northern Ireland for treatment or care as part of a Board approved extra contractual referral (ECR).
- A patient has sought and received approval under the S2 (E112) protocol for elective treatment outside the UK.

- A patient has been referred for treatment under a Service Level Agreement (SLAs) with a provider outside Northern Ireland.

Funding of travel for post-operative reviews or follow-up should be in line with the ECR review policy.

## 4.0 Travel

- 4.1 Other than in situations where individuals are seeking assessment or treatment under Directive 2011/24/EU on cross border healthcare, the HSC Board will normally make arrangements for air travel. However where it is deemed appropriate the HSC Board can make arrangements for a patient or escort to travel by other means.
- 4.2 Travel will be booked at economy rates. HSCB staff in cooperation with the travel agent must find the most cost effective way to travel at all times. Flexible tickets should only be used in exceptional circumstances; for example when there is no clear indication of length of stay.
- 4.3 **Travelling with a Disability:** The HSCB Patient Travel Officers will always check, in advance of travelling, whether a patient has any clinical need or disability that may have an impact on their travel arrangements. Travel will be booked in the most cost effective way. The HSC Board will arrange travel following advice from the referring consultant on clinical need. This may include:
- What seating is appropriate on planes, road/train/tube, sea travel.
  - Arrangements for travelling with oxygen cylinders/supplies. Each travel provider will have an individual policy relating to use of oxygen whilst travelling. The HSC Board will make arrangements for the use of oxygen whilst travelling in line with these policies.
  - Arrangements for wheelchair and any special equipment for disassembling, reassembly and travelling with batteries
  - Level of entry boarding ramps, lifts or other means of assisting an individual with a disability on and off an aircraft.
  - Travelling with medication
  - What baggage is appropriate

In all aspects of travel arrangements staff will be guided by the referring consultant.

- 4.4 Patients are advised in the patient travel information leaflet that all air/sea travel should be pre-arranged by the HSC Board Patient Travel Office.
- 4.5 In exceptional circumstances patients/escorts may make their own travel arrangements. Patients/escorts are advised in the patient information leaflet that this can only be done in agreement with the HSC Board Patient Travel Officer before booking. In circumstances where the HSC Board gives authorisation for reimbursement of flights booked by patients, the HSC Board Patient Travel Officer must first ensure the referral has been approved by the Board and (in the case of ECRs) the referring consultant has submitted the relevant documentation with advice on clinical needs and names of escorts.
- 4.6 The HSC Board will normally book one seat per passenger unless otherwise advised by the travel provider, for example, in the case of very small children or in the case of individuals whose clinical need or disability requires more than one seat. In such cases the HSC Board will seek clarification from the local referring consultant.
- 4.7 Patients/escorts are responsible for checking their travel documentation for accuracy. It will be the responsibility of the patient /patient's carer to check with airline or sea travel operators before travelling to check for delays or changes to travel arrangements.
- 4.8 The HSC Board will not pay for luggage for any patients/escorts travelling for a day appointment or one night stay unless there are clinical reasons or the patient has a disability which would mean hand luggage alone is not appropriate.
- 4.9 The Board will not reimburse patients/clients or their escorts for additional baggage items or overweight baggage except where prior authorisation has been given. Patients or their escorts making their own air travel arrangements will be encouraged to arrange the pre-booking of all baggage on-line, or at online rates as this will reduce costs.
- 4.10 The Board will only make arrangements and reimburse costs that are associated with approved travel for treatment outside NI. If patients wish to extend their stay or arrange travel for personal reasons this should be done at their own expense.
- 4.11 The HSC Board will not accept responsibility for co-ordinating travel arrangements where additional escorts without clinical endorsement

have chosen to accompany patients and are travelling at their own expense.

4.12 Patients and escorts are advised in the information leaflet that the HSC Board does not take responsibility for theft or loss of personal belongings whilst a patient travels for treatment.

4.13 Patients will be encouraged to ensure they leave enough time for their journey to avoid missing flights/ ferries. The Patient Travel Officer should keep a record of flights that are missed and reason why as the HSCB may be charged.

## **5.0 Patient Escorts**

5.1 Other than in situations where individuals are seeking assessment or treatment under Directive 2011/24/EU on cross border healthcare, the Board will consider the funding of patient escorts where this is justified on the basis of clinical need as demonstrated by the referring consultant.

5.2 The HSC Board will normally limit funding of expenses to those incurred by the patient/client and one escort (if an escort is recommended by the referring consultant). In exceptional circumstances the funding for additional escorts will be made by the HSC Board. Both parents can be approved for travel and reimbursement of expenses in respect of children travelling to access treatment outside NI. In all cases the Board will be guided by advice from the referring Consultant on the number and name of escorts necessary. This will be noted in the patient travel file as a record.

## **6.0 Car travel and transfers**

6.1 Travel by land can arise:

1. Where patients and their escorts are travelling to Providers in the Republic of Ireland.
2. To and from air and sea ports to hospital or care provider.

Patients and escorts are expected to use public transport where possible. Receipts should always be retained for reimbursement. In a few exceptional cases where there is no alternative or alternatives are considered unsuitable, or the option is the most cost effective one, private taxis may need to be used for the whole or part of the patient/client journey. Reimbursement for private taxis will be considered for children when travelling for treatment which requires a

local or general anaesthesia or where there is clinical justification demonstrated by the referring consultant. In such exceptional circumstances these costs may be reimbursed on production of a valid receipt.

- 6.2 Where travel is by car, reimbursement will be at the public transport rate for mileage. Mileage will be calculated from the patients home postcode. Car parking charges (including those at a hospital) can be considered for reimbursement where this is unavoidable and receipts are presented.
- 6.3 Where a private car is used for the journey to airports or seaports, car parking charges at the air or sea port will be considered for reimbursement. The Board will reimburse patients for car parking charges at airports at the pre-booked car parking rates only. Car parking should be arranged at the most cost effective option. The Board will consider reimbursing travel from a patient's home to air or sea ports. Mileage will be calculated from the patient's postcode. Schedule 1 outlines public transport rate for reimbursement.
- 6.4 Patients travelling to London should be encouraged to use Oyster cards where appropriate.
- 6.5 Individuals seeking assessment or treatment under Directive 2011/24/EU on cross border healthcare are not eligible to claim reimbursement for car travel/transport

## **7.0 Accommodation**

- 7.1 Other than in exceptional circumstances accommodation should be booked by the patient or escort and the HSC Board will provide reimbursement in line with the patient travel policy.
- 7.2 Overnight accommodation is not usually funded for those patients travelling for a day appointment/outpatient appointment. Accommodation will only be funded prior to an appointment or on the night following on appointment when it is deemed unreasonable to travel on the day of the appointment. When deciding whether or not it is reasonable to travel on the day of the appointment Travel Officers will consider:
- Time of appointment
  - Transfer times from the port to the hospital
  - Availability of flights/ sailings
  - Clinical need as detailed by referring consultant

- 7.3 It is expected that patient/escort will use hospital/care provider accommodation when available. Where it is necessary for the patient or their escort to stay in accommodation overnight, which is not hospital accommodation, the HSC Board will reimburse for accommodation costs at a basic grade hotel rate as per schedule 1. Accommodation costs above the cost outlined in schedule 1 will be the responsibility of the patient or escort. All receipts should be retained and submitted with claims for reimbursement.
- 7.5 The HSC Board will consider reimbursement beyond the basic grade hotel rate in exceptional circumstances. In such circumstances approval must be given by the HSC Patient Travel Officer in advance of stay. The Board will apply reasonable discretion to account for London/city centre tariffs.
- 7.6 In exceptional circumstances, where for example patients or their escorts will experience financial problems in paying for accommodation, the Board will consider requests to arrange for accommodation on behalf of the patient/escort. In the case of paediatric transfers arrangements are in place for accommodation for the first night which may include on-site or hotel accommodation near the treating hospital/centre.
- 7.7 The Board recognises that there are occasions where a patient may request that flights are scheduled to facilitate prolonged stay for personal reasons following a HSC Board funded referral. This must be discussed with the Patient Travel Officer and while the Board will seek to accommodate these arrangements the patient will be advised that any additional costs arising as a consequence are the patients' responsibility. The Patient Travel Officer will make a note of the flight that would have been booked under normal arrangements and the patient be reimbursed the cost of this flight or the actual cost whichever is lesser.
- 7.8 Individuals seeking assessment or treatment under Directive 2011/24/EU on cross border healthcare are not eligible to claim reimbursement for accommodation costs.

## **8.0 Subsistence**

- 8.1 Other than in situations where individuals are seeking assessment or treatment under Directive 2011/24/EU on cross border healthcare, patient/escorts can seek financial assistance retrospectively to cover

the reasonable costs of meals or other incidental expenses. Where reimbursement is sought, patient/escorts are asked to submit valid receipts to support their claim.

- 8.2 Patients who are inpatients in hospital receiving treatment will not qualify for subsistence as meals will be provided by the healthcare provider.

## **9.0 Visits by relatives to patients and home visits for longer term patients**

- 9.1 The HSC Board recognises that situations can arise during placements funded by the HSC Board where relatives will be required to travel to providers regularly, to visit patients and participate in family therapy sessions in line with the patients treatment programme. In such circumstances the HSC Board will seek clarification from the local referring consultant regarding frequency of visits and the names of relatives who may be required to travel.
- 9.2 The Board will reimburse the travel and daily allowance costs of approved relatives visiting patients in hospital/specialist social care placements on the same basis as escorts.
- 9.3 The Board recognises that there may be occasions when local NHS health professionals may need to travel to providers outside NI because they have local responsibility for a patient in a long-term placement, for example to attend Care Pathway Assessments. Expenses will be reimbursed and travel arranged in line with the patient travel policy.
- 9.4 As part of the treatment plan for patients may be required to return for home visits. In such circumstances the HSC Board will provide assistance with travel costs in line with this policy and after seeking advice from the referring consultant.

## **10.0 Prolonged treatment**

- 10.1 The HSC Board recognises that there may be occasions where long treatment episodes are required. In such circumstances the most cost effective and most practical means of accommodation should be used. This may involve renting or leasing accommodation rather than staying in a hotel. Escorts and/or patients must agree long term accommodation arrangements with the HSC Board in advance of booking.

- 10.2 In the case of leased accommodation patients/families will usually be required to sign an accommodation contract. Any damages or breakages associated with the accommodation will be the financial responsibility of the signatory to the contract not the HSCB.
- 10.3 Normal arrangements for subsistence and transfers apply in the case of patients with prolonged stays.
- 10.4 The Board, in cooperation with the referring consultant/Trust, will seek to tailor arrangements to suit the personal circumstances of patients or families experiencing long periods of stay outside Northern Ireland

## **11.0 Repatriation of deceased patients**

- 11.1 In the circumstances where it is necessary to repatriate a deceased patient who has accessed planned treatment outside Northern Ireland, organised by HSCB/NHS, the HSC Board will fund the following:
- A standard coffin for transportation purposes
  - Embalming
  - Removal of remains from funeral parlour or hospital mortuary to airport / seaport.
  - Return journey for the remains booked at economy rate
  - Professional fees incurred by the undertaker outside Northern Ireland.

## **12 Use of Air Ambulance**

- 12.1 Air Ambulance transport is considered appropriate where patients are:
- Critically ill with a life threatening condition requiring clinical support
  - Seriously ill but stable requiring clinical support
  - Stable and not in need of clinical support but transferring by air ambulance for time critical factors (e.g. Donor organ) or qualifying for other exceptional clinical reasons.
- 12.2 The third category is generally requested via the ECR or IFR process when the tertiary referral is made which confirms the need for air ambulance use and clearly demonstrates the basis of clinical exceptionality. In considering exceptionality the HSCB will only take account of the clinical circumstances that apply to the individual case.

## **13.0 Emergency Bookings**

13.1 There may be circumstances where patient travel bookings are required outside of HSC Board normal working hours. In such circumstances these bookings can be made by nominated individuals in the HSC Trusts who have been authorised by the HSC Board to book travel in an emergency situation. When making bookings under such circumstances the HSC Trust should provide the travel provider with the following information:

- Name and job title of person making the booking
- Nature of travel
- Name of referring consultant
- Name of provider referred to

13.2 Where an emergency out of hours booking is made, the HSC Trust will advise the HSC Board Patient Travel Officer of booking on the next working day.

## **14.0 Staff Bullying and Fraud**

14.1 HSCB Patient Travel team will respond to abuse or violence in accordance with the HSC Board Zero Tolerance policy.

14.2 HSCB patient travel team will initiate action in response to suspected fraud in accordance with the HSCB Fraud Response Policy and Plan.

## **15.0 Claim Submission**

15.1 Claims must be submitted no later than 3 months from the date of return travel. The patient travel expense claim form should be completed, with receipts attached and a copy of the patient's appointment letter. Failure to attach receipts will result in non-payment of expenses. Claim forms from time to time do go astray and all patients/ escorts who submit travel expense reimbursement claims should be advised to obtain a proof of postage receipt from the post office and where possible to keep a copy of claim forms and receipts.

15.2 The patient expense claim form and the supporting documents mentioned above (3.0) should be forwarded to the HSC Board at the following address:

Patient Travel Office  
Commissioning Directorate  
Ground Floor Champion House  
12-22 Linenhall Street  
Belfast  
BT2 8BS

*Tel:* 0300 5550116

- 15.3 The HSC Board will process travel reimbursement claims within 15 days and issue instructions to BSO payment team to provide payment.
- 15.4 Any claims that relate to alternative currency will be paid at the current conversion rate.

#### **16.1 Equality and Human Rights Consideration**

- 16.1 In the development of this policy consideration has been given to the affected Section 75 groups in particular age, dependants and disabilities and the policy sets out specific action to address these. Each circumstance will be dealt with in accordance to the relevant legislation as it is identified.
- 16.2 The Board is committed to its obligations under Equality and Human Rights legislation in respect of patient travel and reimbursement. This policy has been screened for equality implications as required by Section 75 of the NI Act 1998. The outcome will be published in accordance with the requirements.

**Appendix 1**  
**OUTLINE OF REIMBURSEMENT ARRANGEMENT FOR PATIENTS**

	<b>Patient travelling outside NI for treatment</b>		
Extra Contractual Referral (ECR) approved by ECR approval panel(S)	E112 (S2) mandated treatment outside UK	Service Level Agreement (SLA) with external provider	Article 56 treatment request outside UK
Normally following submission from Consultant (can be retrospective)	Can be initiated by patient however requires evidence from NHS consultant to confirm clinical need	Can be either following submission by Consultant or can be annual patient quota managed by Trust	Initiated by patient. May require advance authorisation
Patient eligible for: Full Treatment costs Travel costs Accommodation costs Subsistence	Patient eligible for: Full Treatment costs Travel costs Accommodation costs Subsistence	Patient eligible for : Full Treatment costs Travel costs Accommodation costs Subsistence	Patient eligible for assistance with treatment costs equivalent to NI cost or actual cost whichever is lower.

<p><b>Treatment</b>            ECR treatment costs are paid direct to the provider by the Board.            E112 (S2) treatment costs are paid through a UK Wide arrangement (i.e. NOT the Board).            SLA treatment arrangements can be paid by the Trust or Board.            Article 56 treatment costs are paid by the patient and recovered from the Board by the patient in whole or in part.</p>
<p><b>Travel</b>            With exception of Article 56 patients, travel is normally arranged, booked and paid for by the Board. Patient requests to manage their own travel arrangements can however be accommodated, in which case payment will be made to the patient (up to a maximum amount) on receipt of proof of costs.</p>
<p><b>Accommodation</b>            Patients are expected to arrange their own accommodation and submit receipts for payment. Exceptions to this are:</p> <ul style="list-style-type: none"> <li>• Article 56 patients, who pay for their own accommodation.</li> <li>• The Board will consider arranging for accommodations where the patient can demonstrate financial hardship or other exceptional circumstance.</li> </ul>
<p><b>Subsistence</b>            Patients are expected to pay for their own meals and related expenses and submit valid receipts for payment. Exceptions to this are:</p> <ul style="list-style-type: none"> <li>• Article 56 patients, who pay their own subsistence costs.</li> <li>• The Board will consider financial assistance where the patient can demonstrate financial hardship.</li> </ul>

## Funding Levels

Description	Year
	2014
Accommodation	£85 per room based on single occupancy £95 per night based on two people sharing £125 per family room per night
Subsistence	Reasonable costs reimbursed upon valid receipts to support the claim.  (currently under review to remove the need for receipt based claim to a daily allowance)
Car travel (mileage)	HMRC Rate 35p per mile or receipts whichever is lesser
Bus, Rail or Taxi Travel	Public transport rate or whichever is lesser

