

Briefing for GPC Executive Team on migrants accessing NHS services

Immigration Act

The BMA briefed MPs and Peers during the passage of the Immigration Bill and made clear that we accept the need to protect the public purse by limiting access to healthcare in some circumstances, preventing the deliberate misuse of limited resources. However, any measures to do so must be practical, necessary, and appropriate.

The Bill introduced a change to the residency criteria so that eligibility for free NHS services is dependent on migrants having indefinite leave to remain (ILR). Many migrants who do not have ILR in the UK are working, paying tax, and making National Insurance contributions. The introduction of a health surcharge will mean that this group of migrants will have to make an additional payment for their healthcare, which is unfair.

We expressed concern about the equity of these changes as there are significant variations in the length of time it takes for individuals to become eligible for ILR. We also briefed that the introduction of a health surcharge could make the UK a less attractive destination for skilled workers from outside the EEA, including doctors and other healthcare professionals.

A system is already in place which allows the NHS to recover the cost of treating patients who are not eligible for NHS care, including EU citizens. Rather than changing the residency criteria and introducing a new health surcharge, the BMA believes improvements ought to be made within the current charging system in order to ensure charges are imposed when they should be, and costs are recouped.

The immigration health charge is covered by sections 38 and 39 in the Act, which came into force in May 2014.

In addition to the provisions in the Bill, on 30 December 2013, the Government published plans to extend NHS charging to visitors and migrants, including primary care and accident and emergency servicesⁱ in England. We expressed concern that the Government's proposals are likely to create a complex patchwork of charging and access entitlements where some services remain free, such as GP appointments, while others will be chargeable, including A&E visits.

Independent Implementation Group

GPC is represented on the independent Implementation Group of the Department of Health's Visitor and Migrant NHS Cost Recovery Programme team by Laurence Buckman and John Canning. Meetings take place every other month and its terms of reference include the following:

- Provide NHS leadership and advice to the Cost Recovery Programme team
- Support and champion the policy implementation stage increasing fairness in contribution to the use of NHS services
- Provide support to the Chair and Executive Director of the Cost Recovery Programme and focus on how to take forward pragmatic delivery of the implementation plan with the estimated financial target of £500m by 2017/18
- Support transition planning and implementation to other parts of DH, ALBs and the NHS

The group has recently considered changes to the charging regulations, but these apply only to NHS hospitals.

Charging for primary care

At the November 2014 meeting the Group was told that the Programme Team has taken the decision to deprioritise extending and amending charging in primary care in order to focus on delivering existing commitments in Phases 1-3 of the Programme. Two consultations will be launched in the Spring to look further at extensions to charging. There are plans to start an EHIC pilot in primary care, to encourage the collection of EHICs, increase identification of chargeable patients and increase the engagement of GPs with the cost-recovery programme generally. GPC will be involved with a view to starting the pilot as early as possible.

The Group has recently been contacted by the Department of Health's Visitor and Migrant NHS Cost Recovery Programme to ask them to comment on a letter and leaflet due to go out to NHS staff explaining how they can ensure that the UK is reimbursed for the cost of NHS treatment given to European Economic Area visitors here on holiday, studying or retiring from their home country.

ⁱ Department of health, 30 December 2013: Extended NHS charging for visitors and migrants
<https://www.gov.uk/government/news/extended-nhs-charging-for-visitors-and-migrants>