

Written Ministerial Statement

DEPARTMENT OF HEALTH

Consultation on migrant access and their financial contribution to NHS provision

Wednesday 3 July 2013

The Secretary of State for Health (Jeremy Hunt): The United Kingdom successfully attracts many millions of visitors and migrants each year. If our country is to remain competitive, we need to continue to welcome those who come here to work and to study. At the same time public services like the NHS are under increasing strain, coping with the demands of an ageing population and financial pressures. The NHS is and will remain free at the point of delivery for its residents, but it cannot continue as an international rather than a national health service. We urgently need to address this or the system is likely to become unsustainable.

Our health system is very generous to overseas visitors, perhaps one of the most generous in the world. We allow people who are living here temporarily to use the NHS and exempt many of them from charging, while any visitor, including tourists, can visit a general practitioner free of charge. These sorts of services are often not available for our citizens when they are abroad.

The NHS struggles to identify and recover the cost from those not entitled to free treatment. NHS resources, both financial and clinical, are used to treat and care for people who have no long term commitment to our country and should contribute towards it.

To address these issues, I am launching a consultation today inviting views on proposed changes to the way temporary migrants and visitors access the NHS in England. The purpose of this consultation is to examine critically who should be charged in the future; what services they should be charged for; and how we can ensure that the system is better able to identify chargeable patients and recover costs. As health is a devolved matter, this consultation is looking specifically at how to address the challenges for the NHS in England. The aim is to ensure they make a fair contribution to the cost of treatment, while not restricting access and maintaining the essential public health role of the NHS.

The Home Office will be running a linked consultation on UK-wide proposals to regulate migrant access to the NHS. This will explore proposals to ensure migrants contribute fairly to the cost of NHS care across the UK, including extending charging for primary care to visitors and illegal migrants, introducing a new qualifying test for non-EEA nationals accessing the NHS and a new mandatory health levy for temporary non-EEA migrants.

In the Department of Health consultation, the Government is proposing a new set of rules for accessing free NHS care, based on a principle of ‘everyone makes a fair contribution’; such that free treatment should only be provided to those people with settled residence here who have an established relationship with the UK.

This would mean that temporary migrants, including students and some workers, would in future have to contribute through a levy or a fee that would then allow them to register with the NHS and subsequently receive all necessary treatment without further payment. We propose to add a provision to waive the fee for some high value workers who choose to waive their right to free NHS care in favour of private healthcare provision.

In line with the principle of the established relationship we propose to extend the rights of ex-residents who have a long term record of national insurance payments to access free NHS treatment when returning to visit the UK – currently some are chargeable or have entitlement only to limited treatment. Short-term non-EEA visitors who are here for less than six months, and illegal migrants will continue to be directly chargeable.

The consultation considers the operational and clinical case for charging for NHS care in all settings including GP, community services and will also consider A&E and emergency GP consultations for chargeable patients. Not compromising patient access would be a fundamental requirement for any such future change.

Finally the consultation addresses the current major weaknesses in the administration of charging. The consultation provides, in outline only, a potential new system, including a revamped registration system with data that identifies a person’s chargeable status. We will seek extensive front line NHS input to develop a detailed, fit for purpose model that has their support. This engagement will continue beyond the end of the formal consultation process.

The consultation will run for eight weeks and will close on 28 August 2013.

The consultation document and supporting evidence has been placed in the Library. Copies are available to hon. Members from the Vote Office and to noble Lords from the Printed Paper office.

It is also available at: www.dh.gov.uk/consultations