

## GP practices

### Overseas visitors and primary care

There is confusion about overseas visitors' entitlement to NHS primary medical services, largely due to the absence of guidance from the Health Departments. GPs, practice managers and LMC staff will gain more clarity on this issue by reading our guidance on overseas visitors and the NHS.

### Key points for overseas visitors accessing primary medical services in the UK

#### **You have a duty of care**

Practices have a contractual duty to provide emergency treatment and immediate necessary treatment free of charge for up to 14 days to any person within their practice area.

#### **Pre-existing conditions are included**

There is no definition of immediate necessary treatment in primary medical services contract regulations but it should be viewed as including treatment not only of new conditions but also pre-existing conditions that have become exacerbated during the period of a person's stay in the UK.

#### **Procedures for overseas visitors should be in place**

Practices should have appropriate procedures in place to ensure that patients in need of this treatment can be identified and assessed by a health care professional.

#### **Registration should be discretionary**

When a person does not require emergency or immediately necessary treatment, practices have some degree of discretion under the contract regulations about whether to register the person.

#### **Temporary resident is an option for registration**

Practices, if their list of patients is open, may accept overseas visitors as temporary residents, if they will be in the area for 24 hours to three months, or may accept an overseas visitor's application for inclusion in their patient list.

#### **Discrimination rules apply**

Persons applying for registration cannot be turned down for reasons relating to the applicant's race, gender, social class, age, religion, sexual orientation, appearance, disability or medical condition.

#### **Requesting formal identification**

Overseas visitors have no formal obligation to prove their identity or immigration status to register with a practice. However, asylum seekers may be able to show an Immigration Service issued 'Application Registration Card' (ARC) or official documents that confirm their status. Where practices have a policy of asking applicants for identification then it should be for all patients and not just overseas visitors

**Please note:** We advise practices to use their discretion and consider the individual circumstances

of an overseas visitor who cannot provide documents that they would normally require for patient registration.

### **Care on a private basis**

Any person who does not require emergency or immediately necessary treatment and has not been accepted onto a patient list or accepted as a temporary resident can still be treated by a GP on a private basis, for which they may be charged. Alternatively those persons can be directed to contact the appropriate local body, who can advise on what services are available locally.

The following additional guidance is contained within the Department of Health's publication: [Guidance on implementing the overseas visitor hospital charging regulations 2015](#)

GPs have discretion to accept any person, including overseas visitors, to be either fully registered as a measure of an NHS patient, or as a temporary resident if they are to be in an area for between 24 hours and three months. No registration application can be refused on the grounds of race, gender, class, age, religion, sexual orientation, appearance, diversity or medical condition. In reality, this means that the practice's discretion to refuse a patient is limited. There is no minimum period that a person needs to have been in the UK before a GP can register them. Furthermore, GPs have a duty to provide free of charge treatment which they consider to be immediately necessary or emergency, regardless of whether that person is an overseas visitor or registered with that practice.

Being registered with a GP, or having an NHS number, does not give a person automatic entitlement to access free NHS hospital treatment. Overseas Visitor Managers (OVMs) should ensure that local GPs understand this, so that they do not unintentionally misinform their patients regarding hospital charges and so that where possible they identify in the referral letter any patient that may be an overseas visitor.

OVMs should consider establishing formal contacts with local GPs to aid this process, which can be used by them as a useful tool in identifying potential chargeable overseas visitors who have to pay for treatment. GP surgeries could also be encouraged to display posters regarding entitlement to NHS hospital treatment.

GPs should not be discouraged from referring their patients to the relevant NHS body. It is the relevant NHS body's duty, not the GP's, to establish entitlement for free NHS hospital treatment. Furthermore, neither relevant NHS bodies nor anyone acting on their behalf should imply that a particular patient should not be registered with a GP practice as that is exclusively a matter for that GP.

Charges only apply under the Charging Regulations for services provided in an NHS hospital or, when provided outside an NHS hospital, by staff employed by, or under the direction of, an NHS hospital. However, GPs are encouraged to help inform this process by indicating on referral letters when they understand a patient is not ordinarily resident or is an EHIC holder, and inform patients that they may be chargeable for some hospital services. Therefore NHS services in the community cannot be charged for unless provided by hospital employed/directed staff.

### **Further resources**

Public Health England provides information about explaining the NHS to patients who are new to the UK system. They also provide specific information relating to both the type of care required and entitlements for different migrant groups.

› [Public Health England](#)

For further advice on asylum seeker and refused asylum seeker access to primary medical services, please consult the BMA Ethics Department guidance.

› [Access to health care for asylum seekers and refused asylum seekers - guidance for doctors](#)

