Your patient faces charging for secondary care

Exemptions related to condition being treated
- Exempt infectious diseases**
- In England: condition caused by torture, FGM or sexual/domestic violence

Do they qualify for an exemption to charging?

No

Patients in Scotland and Northern Ireland
Care should not be delayed to charging, but patients may be billed retrospectively

Yes

Patients in England and Wales
Is treatment:
- Immediately necessary?
- Urgent due to pain, disability or risks of delay?***

In all cases of charged patients:
- Ensure families are registered with a GP
- Ensure family aware of entitlement to GP and A&E care
- Signpost to support organisations, including for immigration legal advice
- Consider involving safeguarding lead and/or ethics committee
- Report risks or harm caused by charging
- Support families to negotiate affordable payment plan

No

Family will be required to pay before treatment received
- Safety net in case condition changes
- Liaise with primary care
- Consider 2nd opinion on urgent/immediately necessary decision

Exemptions related to immigration status and specific vulnerabilities
- Parent or child is victim of modern slavery/trafficked
- Refugees and asylum seekers
- Certain failed asylum seekers*

Engage with Overseas Visitors Manager (OVM) to support patient to prove exemption

*In England and Northern Ireland: families receiving s4 support. In Scotland and Wales all failed asylum seekers are exempt.

**HIV, TB, hepatitis, notifiable disease, sexually transmitted infection.

***Care is deemed 'urgent' if due to pain, disability or risks of delay, treatment cannot wait until patient is expected to leave the UK. If the child is not expected to leave the UK or has no specific leave date, Home Office guidance is to use a minimum cut off of 6 months. Longer may be used for settled migrants.