



The States of Jersey Department for
Health & Social Services

Patient Travel Charges Policy

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DOCUMENT PROFILE

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INTRODUCTION

This policy supersedes the policy introduced in November 2011 and amended in December 2012 and all previous policies relating to patient travel.

This policy applies to all users of services provided by the Health and Social Services Department. This policy does not define or list charges applicable to service users.

The Department will not be responsible for the provision or funding of care and/or treatments and/or drugs or equipment which fall outside its policies.

This policy may be subject to change at any time. Eligibility to financial assistance for patient travel will be assessed under the policy in force at the time that treatment or care is provided.

PURPOSE OF THE POLICY

Health and Social Services Department (the Department) has made arrangements with the health services in the UK and Guernsey to provide certain specialised treatments that are not available in Jersey. To access these services patients will need to travel to the UK or Guernsey and this policy sets out who is eligible to receive financial assistance from the Department for travel costs.

The Health and Social Services Department is able to book air travel and provide advice to patients. Under the rules specified in this policy the costs of travel may be met by the Department and the expenses incurred by patients may be refunded by the Department depending on the patient's financial circumstances.

Patients who have been referred to a hospital in the UK or Guernsey should contact the Travel office as soon as they are advised of the dates and times of their appointments and admission dates. The normal opening hours of the service are from 9am to 5pm Monday to Friday. The Travel Office is situated in the Outpatients Department of the General Hospital. The contact details are as follows:

Telephone: 01534 442323 / 01534 442310
Fax: 01534 442898

THE POLICY

1. BASIS OF FINANCIAL ASSISTANCE

The Health and Social Services Department will meet travel costs and will make financial assistance available to patients referred to Guernsey and the UK patients on the basis of income assessments provided that the travel and other costs meet the criteria set out in this policy. The assistance available to patients is set out in the table below. The income limits below relate to the gross income, including the notional value of benefits in kind, of a patient and partner from all sources before income tax and other outgoings.

2. RESIDENTIAL STATUS

The Department will provide financial assistance to patients who are ordinarily resident in Jersey and who are eligible for care and treatment under the terms of the Department's 'Resident and Non-Resident Charging Policy'. This assistance will be subject to income threshold and other relevant financial assessment. (see Appendix 1). The Department is obliged to meet the costs of emergency travel for visitors to Jersey when this is an integral part of the standard service provision for patients entitled to emergency treatment under a reciprocal health agreement (RHA) (see Appendix 2). For visitors for whom an RHA applies, the costs covered are solely for emergency transfers for treatment in the UK or Guernsey in line with the normal arrangements which apply for ordinary residents. Any excess costs will be charged to patients.

3. INCOME LIMITS

The income limits applied by the Department are based on the household income (including assessed income from shareholdings and assets) of the patient and partner or spouse if applicable. The limits vary depending on whether the household is considered to consist of one or two adults and on the number of resident children. Children are considered to be part of the household if they are aged less than 18 years, or less than 21 years if they are in full time education.

Income thresholds for Patient Travel are reviewed annually, and adjusted, if and where this is considered appropriate, in the context of economic assessments.

Details of current income thresholds and financial assessment for the purposes of Patient Travel Charges are included at Appendix 2.

7. CERTIFICATION AND PROOF OF INCOME

The patient will be required to sign claim forms certifying both the expenses incurred and that the relevant income figure is below the appropriate threshold. Falsification of an application for financial assistance or of an expense claim will invalidate the claim and may give rise to legal proceedings.

The Health and Social Services Department reserves the right to request information considered necessary to provide evidence of income enjoyed by the patient and hence their entitlement to receive travel assistance. The Department may request copies of tax assessments and tax returns and require the claimant to obtain copies from the Income Tax department and/or proof of income from Income Support or Pensions received from Social Security for the previous calendar year. If

information or supporting evidence requested by the Department is not provided the reimbursement of expenses will be withheld and the patient charged for any flights booked.

8. CONFIRMATION OF ENTITLEMENT

The Department will seek to confirm residential status and entitlement to travel assistance with other States Departments, such as the Social Security Department, in accordance with the Department's relevant data sharing agreement. If the Department is unable to confirm entitlement to travel assistance the patient will be charged for any travel booked.

9. RECEIPTS AND INFORMATION TO SUPPORT CLAIMS

All expense claims must be accompanied by all relevant receipts and the Travel Office staff may request further information to support claims. If the receipts and information requested are not provided the payment of expenses will be withheld and the patient may be charged for any travel or other bookings made on his behalf.

10. DISCRETIONARY NATURE OF FINANCIAL ASSISTANCE

Nothing in this policy is intended to create a legally binding obligation on the Health and Social Services Department to book travel, to pay travel or other costs, or to reimburse expenses incurred by patients and other persons. The financial assistance provided to patients remains entirely discretionary on the part of the Health and Social Services Department. The onus is on patients to demonstrate that they are entitled to receive the benefit of financial assistance for their travel and costs, not for the Department to have to prove that a patient is not entitled.

11. REFERRAL

Patients must have been referred by a hospital consultant employed by the Health and Social Services Department for treatment that cannot be provided in Jersey. Travel and other costs will not be met by the Department for patients seeking cosmetic treatment, nor for patients pursuing legal claims. Travel costs relating to participation in medical trials will not routinely be met but may be funded on a discretionary basis if requested by the patient's consultant. Travel and other expenses will not be met by the department for patients referred directly to a facility in the UK or Guernsey by a general practitioner. If a patient requires onward referral to a second mainland centre for treatment or further investigation this must be authorised by the consultant in Jersey who originally referred the patient to the UK or Guernsey.

12. PRIVATE PATIENTS

Expenditure incurred by private patients will be reimbursed by the Department provided:

- the referral complies with 11 above
- travel to a UK private treatment centre is essential because equivalent treatment cannot be privately provided in Jersey.

Reimbursement will be in accordance with this policy and the thresholds outlined in the income limits described in 3 above.

13. INSURANCE

Where the costs of travel are claimable under a private health insurance policy the patient will be expected to claim under this policy and not seek reimbursement of any claimable costs from the Department.

In regards to insurance arrangements in general:

- The Health and Social Services Department does not provide insurance (nor can the Department recommend insurers) for patients referred by a hospital consultant to the UK or to Guernsey for treatment.

The Department therefore recommends that all referred patients and escorts obtain travel insurance to provide cover for personal possessions, money, personal liability, any insurable incidents or potential charges as outlined in (b) below.

- While Jersey does have reciprocal health agreements with the UK and Guernsey which entitle patients to free urgent health care in those jurisdictions, those agreements do not cover costs associated with:
- Repatriation
- Any prescription or medical supplies charges levied against residents of those jurisdictions

If a patient or escort requires medical treatment for a different condition/medical emergency from that of the original referral, they will be personally liable for the costs of any prescriptions or medical supplies.

If, in the event that repatriation should be required the Department will, in most circumstances, meet the repatriation costs providing:

- the medical emergency occurs during the period of the referral (the Department will not pay for repatriation if the patient or escort chooses to stay longer in the UK for personal reasons and the emergency occurs during the period of extended stay)
- the medical emergency was not the result of the patient/escort engaging in activities considered inappropriate to their presence in that jurisdiction (e.g.: extreme sporting activities)

The Department will not:

- pay for any personal injury claims or personal liabilities
- be held liable for any loss or damage to personal possessions or money suffered by a patient and/or escort
- be responsible for insurance of, and/or damage or repairs to personal motor vehicles taken to the UK

14. COST EFFECTIVE ARRANGEMENTS

Travel arrangements booked by the Travel Office will be made at the most economical rate possible. Patients will be expected to make other travel arrangements as cheaply as possible. The Department will not reimburse the costs of taxi fares when rail or bus travel is a viable alternative. The Department reserves the right not to reimburse claims if it is considered that the costs are excessive.

15. PATIENT ESCORTS

- (a) The Department will meet the travel costs of a friend or relative escorting a patient in the following circumstances:
 - i) When the patient is a child aged under the age of 18 at the date of travel; or
 - ii) When the patient is 75 years or over at the date of travel; or
 - iii) When the patient is unable to travel unescorted due to his/her clinical and/or psychiatric condition, as assessed by the referring consultant.
- (b) For children under the age of 18 at the date of travel, who are referred suffering from a serious medical condition or requiring major surgery, the Department will consider a request for both parents to accompany the patient. Any siblings or other relatives/friends may accompany the patient and his/her parents, however, all additional costs incurred as a consequence will be charged to the parents.
- (c) The cost of an escort will not routinely be met by the department for follow up appointments following previous inpatient treatment or for planning visits prior to radiotherapy unless the patient is covered under 15.a) (i) to (iii) above.
- (d) The advice of directorate managers and clinicians will be sought as appropriate in assessing a patient's clinical and/or psychiatric condition, in relation to paragraphs 15 (a)(iii) above, and in the definition of a serious medical condition and/or major surgery, in relation to paragraph 15(b) above.

Where general clinical guidance on a condition assessment or definition is not available, assessment and authorisation will be sought on an individual patient basis. In exceptional cases, the policy may be varied in accordance with paragraph 26. Variations to the Policy.

16. INTERPRETERS

If an interpreter is necessary, this would normally be arranged at the hospital to which the patient is travelling. When an escort is accompanying a patient, that escort will be expected to act as an interpreter, except where the escort is a doctor/nurse (see Point 17). If any further interpreter services are required then these will be charged to the patient.

17. NURSE AND DOCTOR ESCORTS

When a patient's clinical condition, as assessed by the referring consultant requires that a medical or nursing escort is provided by the Department the full costs of this will be met by the Department.

18. SEA AND AIR TRAVEL

The Travel Office is able to book air travel to the UK and Guernsey and this is the expected arrangement. If a patient chooses to make their own arrangements reimbursement will only be made up to the cost that would have been incurred by the Department had the booking been made by the Travel Office.

If a patient chooses to travel by sea the Department will only reimburse a sum equivalent to the air fares that would have been incurred by the Department had the booking been made by the Travel Office. When sea travel is necessary for clinical reasons the full cost will be refunded subject to the other clauses of this policy.

19. TAXI AND HIRE CARS

Reimbursement of expenses incurred for taxi and hire car while in the UK will only be considered when public transport does not provide a suitable alternative. Taxi and hire car costs incurred While in Jersey will not be reimbursed except in exceptional circumstances. Any patient wishing to claim for the cost of taxis and hire cars in Jersey must seek confirmation with the travel office prior to making any bookings.

When treatment in the UK is sought by private patients the reimbursement will be limited to the cost that would have been incurred had the patient been referred by HSSD to an NHS hospital.

20. ACCOMMODATION

- (a) Patients receiving inpatient treatment at a UK hospital will normally be accommodated free of charge within the hospital. Patients receiving outpatient treatment or attending an outpatient appointment will be expected to travel on a day return basis and hence accommodation will not be necessary. When it is not practical to re-arrange day return travel the accommodation costs will be an allowable expense, for the patient and their escort (See section 15). Patients' will be expected to make use of accommodation within the UK hospital where possible and when this is not possible patients will be expected to accept accommodation of a standard provided by a reasonable guest house. It will be expected for a patient and their escort to share a room unless there are exceptional circumstances. If a patient chooses to stay in higher quality accommodation the Department will only refund an amount equivalent to guest house accommodation.
- (b) Accommodation will not be provided for an escort (see Section 15) accompanying a patient, unless the patient is in receipt of income support at the time of travel, when a maximum of two days accommodation may be authorised by the Department.
- (c) Accommodation may be reimbursed based on the decision made by the referring consultant – exceptions may be made in some circumstances.
- (d) Accounts will be reimbursed to a maximum of £50 a night, on production of validated receipts.

21. EMERGENCY CHARTER FLIGHTS

- a) Where, for clinical reasons, a patient requires transfer to a UK hospital by a charter flight the costs of that charter flight and other associated costs will be met by the Department providing the patient is entitled to free care as specified in Overseas Patients Policy. The Department will also meet the costs of emergency charter flights for visitors, who are entitled to emergency treatment under a reciprocal health agreement, when the transfer is an integral part of the standard service provision for patients.
- b) The costs of any charter flights provided for visitors and not covered under a reciprocal health agreement, including repatriation flights, will remain the responsibility of the patients or their insurers. The Department will invoice patients for any such costs incurred by the Department.
- c) When space and clinical conditions permit one relative or friend may accompany the patient on a charter flight if there are not additional costs of doing so. When the Department has met the costs of a transfer by charter flight for a Jersey patient, the Department will also meet the costs of the return travel for the patient and the escort who travelled with the patient. If return travel to Jersey requires for clinical reasons the use of a charter flight then the costs will be met by the Department.

22. DEATH OF A PATIENT IN THE UK

If a patient referred by the Department for treatment dies while receiving inpatient or outpatient treatment in the UK or Guernsey, the Department will contribute to the costs of the repatriation of the patient's body to Jersey. Payment will only be made on receipt of an itemised account and will be limited to £800 per case, subject to any additional necessary costs specifically required for the transportation of the body to Jersey. For the avoidance of doubt, the Department will not pay for costs that would have been incurred regardless e.g. certification of death or cremation.

23. COSTS THAT WILL NOT BE REIMBURSED

The Health and Social Services Department will not pay or reimburse the following claims:

- i) Relatives' accommodation (other than as provided for in Section 20 Accommodation)
- ii) Food and meals
- iii) Private arrangements
- v) Care of animals
- vi) Maintenance of property and vehicles
- vii) Loss of earnings

This list is not exhaustive. Any costs claimed, which are not detailed within this policy, will not be reimbursed by the Department.

24. LONG TERM TREATMENT

When a patient is required to receive treatment in a UK hospital for more than 4 weeks then a return flight and associated travel costs will be provided every four weeks for the patient to visit

Jersey or for a friend or relative to visit the patient in the UK. In exceptional cases where very long term treatment is required in the UK or where the treatment requires frequent return visits over an extended period the policy may be varied in accordance with paragraph 26: Variations to the Policy.

25. OWN ARRANGEMENTS

When a patient chooses to make his or her own arrangements this is at the patient's risk. If the patient travels earlier than necessary to attend an appointment and the appointment is cancelled by the hospital which the patient is attending such that unnecessary travel costs are incurred, the Department will not reimburse these costs and will recharge to the patient any travel costs incurred by the Department.

26. VARIATIONS TO POLICY

This policy is approved by the Minister of Health and Social Services and only in exceptional circumstances, which are not adequately covered in the above, may the policy be varied. Any requests to vary the policy or appeal a decision must be made in writing to the Minister for Health and Social Services (Charges Appeals Panel) in accordance with the appeal procedures described below.

27. DISPUTED CHARGES AND EXCEPTIONAL CIRCUMSTANCES

Every patient has a right to appeal; in the event they dispute the Department's decision regarding travel assistance. All appeals are considered by the Charges Appeals Panel, details of which can be found in the Charges Appeals Panel Terms of Reference¹. An individual's financial position alone will not be considered as sufficient grounds for appeal. If a person is having any difficulties with patient travel, they should speak, in the first instance, to the Travel Manager on 01534 442323.

Appeals must be submitted in writing¹ within 30 days of the date of travel, and the patient is responsible for providing all the necessary information, details and evidence to support their claim against charges. In considering an appeal, the Department may write to a patient requesting further information.

The Charges Appeals Panel (the Panel) will not, however, take responsibility for contacting third party agencies, insurance companies or employers to seek evidence or information to support an appellant's claim.

In the event the necessary evidence is not forthcoming, the Panel will make a decision based on the information it has received, and may be required to make assumptions about circumstances where evidence to prove otherwise is unavailable or unproven.

Charges can only be waived in exceptional circumstances and with the approval of the Charges Appeal Panel which includes:

¹ An appeals submission form and copy of the Charges Appeals Panel Terms of Reference are available from the Income Manager, Health and Social Services, Peter Crill House, Gloucester Street, St Helier JE1 3QS, telephone: 01534 444495, or can be downloaded at www.gov.je/health

- Assistant Minister for Health and Social Services (Chair)
- Director of Finance, or his/her nominated representative
- Medical Officer of Health, or his/her nominated representative
- Director of Commissioning (or nominated deputy/representative)

The Appeals Submission must be sent to:

Patient Liaison Officer
(Charges Appeals Panel)
Minister for Health and Social Services Office
4th Floor Peter Crill House
Gloucester Street
St Helier, Jersey, JE1 3QS

Email: a.aubert@health.gov.je

When writing the patient must:

- provide full patient details including:
 - residential/visitor status
 - the date they took up residency in Jersey/arrived in Jersey
 - usual place of residency (if not Jersey)
 - date of birth
- clearly set out the grounds on which they are appealing and why they believe they should be entitled to financial assistance
- set out all pertinent facts, e.g. date of admission, travel and/or treatment received, details of any related pre-existing conditions/treatment that may be relevant to the appeal claim
- any special circumstances
- evidential material, including copies of documentation (e.g. marriage certificate, travel documents, proof of residency etc) that may support the grounds for appeal

A representative may write on behalf of a patient, however, the appeal submission must include:

- a letter signed by the patient stating that the Health and Social Services Department may correspond with their representative to discuss their case and may disclose personal information **OR**
- a completed copy of the patient representative consent form which is available from the Finance Department or can be downloaded from www.gov.je/health
- a Power of Attorney

Details of the Charges Appeals process are explained in the Health & Social Services Charges Appeals Policy (Terms of Reference).

APPENDIX 1: Income and Financial thresholds for Patient Travel Charges assessment

The Health and Social Services Department will meet the costs of:

- i) All travel and other costs in accordance with this policy when the patient's household income is below:

Single adult, no resident children:	£32,000
Single adult, one resident child:	£43,000
Single adult, two or more resident children:	£55,000
Two adults, no resident children:	£52,000
Two adults, one resident child:	£63,000
Two adults, two or more resident children:	£75,000

- ii) Air or sea travel costs only, in accordance with this policy, when the patient's household income is above the income limits described in 'i)' above but below the following limits:

Single adult, no resident children:	£39,000
Single adult, one resident child:	£53,000
Single adult, two or more resident children:	£68,000
Two adults, no resident children:	£63,000
Two adults, one resident child:	£77,000
Two adults, two or more resident children:	£92,000

CHILDREN

When children under the age of 18 years, or 21 years if they are in full time education, are referred to the UK or Guernsey, the parents' or guardians' household income will be assessed. Children over the age of 18 years, or 21 years if they are in full time education, whether living with a parent or guardian, will be assessed on their own income.

OTHER ADULTS

Other adults including parents, au pairs, and lodgers living with a single person or couple will be assessed on their own individual income.

CALCULATION OF RELEVANT INCOME

- a) For the purposes of the policy the income of a single person or the joint income of a couple will be calculated as the total gross income, including the notional value of benefits in kind, from all sources for the previous calendar year. Where a person's financial circumstances have changed significantly, and this can be demonstrated, the current annual equivalent income may be used as an alternative to the gross income for the previous calendar year.
- b) Where a patient or partner: has a significant shareholding in a company, is a business proprietor or partner in a business, has a beneficial ownership or holdings in a business, is the beneficiary of a trust; the profits retained within the entity will be considered as income for the purposes of this policy.
- c) If the patient, or the patient and partner own assets, excluding a principle residence, to a value exceeding £500,000 the Health and Social Services Department will assess a notional income on the total value of these assets to the extent that income has not been included in accordance with paragraph 6.(b).

APPENDIX 2: Countries with which Jersey has a Reciprocal Health Agreement (RHA) for Visitors to Jersey

1.	Australia
2.	Austria
3.	Barbados
4.	France
5.	Guernsey and Alderney
6.	Iceland
7.	Isle of Man
8.	New Zealand
9.	Norway
10.	Portugal
11.	Sweden
12.	UK (England, Wales, Scotland, Northern Island)

Definition of a Visitor for RHA Purposes

The definition of a Visitor, for the purposes of eligibility to receive free health care and/or treatment under a Reciprocal Health Agreement, may include a person who is visiting Jersey for leisure or business purposes.

1. It does **not include** any person who has registered with Social Security Department and has a Jersey Social Security number. It is deemed that registering with the Department shows ‘intent to reside in Jersey’ as opposed to just “visiting”, even if that intent to reside may be on a short term basis
2. It does **not include** any person who was employed in Jersey and paid by a Jersey employer (by definition, any such person should, in any event, be registered with the Social Security Department)

Any person who is employed in a country with which Jersey has a reciprocal health agreement, but is temporarily deployed in Jersey will be defined as a Visitor, providing their period of deployment has been less than 3 months. If their contract of services in Jersey is for more than 3 months, they will fall outside the RHA, regardless of whether they return to the UK or other RHA-designated country for weekend visits, holidays etc.