

The Government of Jersey Department for Health and Community Services

Residents and Non-Residents Charging Policy

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DOCUMENT PROFILE

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Author	Assistant Director, Policy & Ministerial Support	
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INTRODUCTION

This updated interim policy makes cosmetic changes to the policy last updated in March 2021 which superseded the policy introduced in January 2011 and all previous policies relating to the provision of treatment and care to Jersey residents, non-residents and overseas visitors.

This policy applies to all services provided by the Health and Community Services Department. It does not apply to treatment or care provided by General Practitioners, other private healthcare providers, nor by other States Departments (including Social Security/CLS).

This policy does not define or list chargeable services where the charge is applicable to all service users, including Jersey residents eligible for free health care.

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 for services will be assessed under the policy in force at the time that treatment and/or care is provided.

PURPOSE OF THE POLICY

The policy sets out who is eligible for access to free¹ services from the Health and Community Services Department.

Its primary purpose is to deter people travelling to Jersey with the intent of accessing free¹ health care and treatment and to ensure that free¹ access to the Department's services is an appropriate, fair and reasonable use of Government funds.

It takes account of external agreements – including Reciprocal Health Agreements in place between Jersey and other countries – and provides for appropriate exemptions to charges.

This policy has been developed with a view to ensuring the best interests of Jersey residents and taxpayers are taken into account, placing significant emphasis on the expectation that those receiving free¹ care and treatment are making an ongoing social and/or economic contribution to the Island.

It is the responsibility of an individual to check with the Health and Community Services Department to ensure they have the accurate information in assessing their eligibility as a resident or visitor for access to free health care and treatment.

¹All services provided by the Health and Community Services Department are free to persons who meet the conditions outlined within this policy <u>unless</u> the treatment or service is chargeable to all eligible Jersey residents.

THE POLICY

1. EMERGENCY HOSPITAL TREATMENT

The Health and Community Services Department (the Department) will provide **emergency** hospital treatment in the Emergency Department free¹ of charge to anyone who needs it.

For visitors not covered by an existing Reciprocal Health Agreement (RHA) and nonresidents² this free¹ treatment is limited to emergency acute care provided in the **Emergency Department.**

It does not include:

- any treatment or services provided elsewhere in the hospital or in the community
- any treatment or accommodation provided as part of an onward treatment and/or care package
- repatriation following emergency treatment, unless the transfer is considered part of the necessary emergency acute care response.

Further urgent care for visitors covered by a current RHA is restricted to the provisions made within the individual agreement.

2. NON-EMERGENCY HOSPITAL TREATMENT

The Department will provide hospital-based treatments and services free of charge to anyone who at the time of treatment:

- is listed in Appendix 1 AND
- is ordinarily resident¹ in Jersey and has been for the whole six-month consecutive period immediately prior to seeking treatment in Jersey AND
- is in possession of a valid health card² AND
- can provide evidence³ that they have been in paid regular employment in Jersey throughout this period **OR** in receipt of a pension or other income that is subject to
- assessment by the Jersey Tax Office, throughout this period

OR

- is listed in Appendix 1 AND
- is ordinarily resident in Jersey and has been for at least a whole six-month consecutive period within the previous three years **AND**
- can provide evidence that they were in paid regular employment in Jersey through out that six-month period and at the time of seeking treatment.

OR

- is ordinarily resident in Jersey AND
- currently holds an individually allocated "Licensed"⁴ status

¹ See Appendix 1 for description of ordinary residents potentially eligible for free treatment or care.

² Health cards are available from the Customer and Local Services Department. They entitle the holder to a discount on the fees charged by GPs.

³ See Appendix 5 for information relating to evidence of eligibility.

⁴ "Licensed" category status is only granted in the case of employees who are deemed to be essential to the Island; The Population Office administers the Laws that relate to Licensed" employment and is the first point of contact in relation to queries about "Licensed"" status. This eligibility status does not cover a person employed as a result of a company being granted a license to employ non-qualified staff. GOVERNMENT OF JERSEY DEPARTMENT FOR HEALTH & COMMUNITY SERVICES Page 4 of 21

OR

- is ordinarily resident in Jersey AND
- has Permanently Entitled⁵ status **AND**
- is employed in Jersey

OR

- is ordinarily resident in Jersey AND
- has Permanently Entitled status AND
- has paid tax and social security contributions (or has been liable for Jersey Tax and Social Security contributions assessment), for a minimum of 30 years **AND**
- is currently in receipt of a pension or other income that is liable for Jersey tax assessment.

OR

- is listed in Appendix 1 AND
- is ordinarily resident in Jersey and has been for the whole <u>12-month consecutive</u> period immediately prior to seeking treatment in Jersey **AND**
- is in possession of a valid health card

If a person is qualified for eligibility for free treatment, their eligibility is extended to their **ordinarily resident** spouse/registered civil partner providing the spouse/registered civil partner:

- ordinarily lives with the person who is eligible for free health care **AND**
- is to remain living in Jersey (evidence of intent to remain resident in Jersey is required)
 AND
- does not ordinarily live elsewhere.

If a person is qualified for eligibility for free treatment, their eligibility is extended to their **ordinarily resident** dependent child/children providing the dependent child/children:

- is/are under the age of 18, or under 21 but still in full-time education ordinarily live with the person who is eligible for free health care AND
- are to remain living in Jersey (evidence of intent to remain resident in Jersey is required) **AND**
- do not ordinarily live elsewhere

Eligibility does not extend – under any classification or category – to other family members, for example parents, siblings, cousins etc. or friends, <u>even</u> where the family member is considered a 'dependent'.

All members of extended family and/or friends must qualify as ordinarily resident in their own right to qualify for access to free health services.

Evidence of residency in all cases is required with the exception of the exemptions listed in Appendix 3.

⁵ Permanently Entitled status refers to a person who is Entitled **and** who meets further conditions under the Control of Housing and Work (Jersey) Law 2012 and regulations. Proof of status can be obtained from the Customer and Local Services Department

3. RECIPROCAL HEALTH AGREEMENTS

Emergency and urgent medical care and treatment is provided to any visitor to Jersey who qualifies under the terms of an existing Reciprocal Health Agreement.

Free health care for visitors under this category is restricted to the limitations included in the agreement and does not qualify a visitor to access all free health services beyond this care. A Reciprocal Health Agreement covers visitors for a period not exceeding three calendar months after arrival in Jersey. Anyone who remains in the island beyond that time will be classified as a non-qualified resident, and costs for any health care and treatment incurred until such time as they qualify under current ordinarily resident rules.

Responsibility for ensuring an appropriate Reciprocal Health Agreement is in place before travelling to Jersey as a visitor rests with the individual.

It is important to note that Jersey is not a member of the European Union and, as such, the <u>EHIC is not valid, and does not provide health cover or access to free treatment in</u> <u>Jersey. The same is true of the UK Global Health Insurance Card.</u>

Where no RHA exists, or an individual remains in Jersey beyond the three calendar month statutory limitation on any RHA, it is the responsibility of that person to ensure they have sufficient and appropriate medical insurance, or other arrangements, to cover the costs of any health treatment that may be needed.

Jersey residents visiting countries with which the island has an existing RHA are subject to the same rules and regulations and it is important to check health arrangements in any country to be visited – including where there is currently an RHA in place – before travelling.

A list of countries with which an existing Reciprocal Health Agreement is in place is shown at Appendix 3.

4. NON-RESIDENTS & NON-RHA ELIGIBLE VISITORS

A visitor is classified as someone who has been visiting Jersey as a non-resident for a period not exceeding <u>three calendar months</u>. If you have been visiting Jersey for longer than three months at the time you require treatment or you normally live in a country where no Reciprocal Health Agreement exists, eligibility for access to free health care in Jersey is **limited to emergency treatment**, through the Accident and Emergency Department.

5. LONG-TERM CARE

Long-Term Care in Jersey is governed by the Long-Term Care (Health and Community Services Charges) (Jersey) Law 2012- which regulates:

Any person <u>aged 18 and over</u>, assessed as requiring long-term care and in receipt of longterm care services provided or procured by the Department, will be charged under the Long-Term Care (Health and Community Services Charges) (Jersey) Law 2012-.

Under the Law, all adults are able to request assistance with long-term care costs through the Long-Term Care Scheme, which is administered by the Customer and Local Services Department.

A person receiving long-term care under specific areas of the Mental Health Law will not be charged by the Department.

GOVERNMENT OF JERSEY DEPARTMENT FOR HEALTH & COMMUNITY SERVICES Page 6 of 21 The Health and Community Services Department may provide long-term care free of charge to anyone who is <u>under 18 providing the child</u>:

- has been ordinarily resident in Jersey for a minimum period of five years immediately prior to requiring treatment AND
- is in possession of a valid health card

OR

- is ordinarily resident in Jersey **AND**
- whose parent or legal guardian is currently in "Licensed Employment"

OR

- is entitled to free non-emergency hospital treatment (as outlined in section 2)
- **AND** has previously lived in Jersey for a consecutive period of at least ten years

OR

- is ordinarily resident in Jersey **AND**
- whose parent or legal guardian currently has Permanently Entitled status AND
- whose parent or legal guardian is employed in Jersey.

Full details of the Long Term Care Scheme, including benefits available, can be found at <u>www.gov.je/Benefits/LongTermCare</u> or by emailing <u>longtermcare@gov.je</u> or telephone (01534) 445505.

Evidence of residency is required. Exemptions are listed in Appendix 3.

The five-year eligibility rule does not apply to costs associated with medication/treatment of long-term acute conditions such as Diabetes and Rheumatoid Arthritis, which will fall under the six month/12-month eligibility criteria (see Sections 1-2 of the policy).

6. CARE DURING PREGNANCY AND BIRTH

Pregnant women will only be eligible for free maternity, birth and postnatal care and treatment if they are eligible for free¹ non-emergency hospital treatment (as outlined in Section 2).

Once the baby is born in Jersey, it will be eligible for free care and treatment, regardless of whether the parents are, or are not, eligible for free care and treatment, providing:

- (a) that the mother can provide evidence to demonstrate that neither she, nor her unborn baby, had any previously diagnosed condition that may result in the baby requiring specialist care **AND**
- (b) that baby and parent(s) are to remain living and working in Jersey. Evidence of the intent to remain in Jersey is required.

If the child should leave the island for any period that extends to three consecutive months, within the first ten years of its life, normal qualification requirements for access to free health care (as outlined in Sections 1-2 above) will apply.

Parents who are not eligible for free non-emergency hospital treatment (as outlined in Section 2), and who cannot provide evidence of their intention to remain living and working in Jersey, will be liable for all costs incurred for maternity and care for their baby under the 6/12 month rules.

7. GOING TO THE GP OR DENTIST

General Practitioners (local Doctors) and Dentists in Jersey are all privately run practices and are not part of the Health and Community Services Department. Fees for GP/Dentist appointments, treatments and/or tests are not covered by this Policy, nor under the regulations of any existing Reciprocal Health Agreements.

8. PAYMENT FOR TREATMENT

Anyone who is not eligible for free services, as outlined in Section 1 to 4 above, may be treated, but will be required to pay for all treatment and related health services expenses, up until the point at which they qualify as ordinarily resident.

This includes:

- anyone who is unable, due to the circumstances of their condition, to consent at the appropriate time to the treatment and the associated charges AND/OR
- where a family member consents to treatment, and the associated charges on a patient's behalf, in the event that the patient is unable to consent

The Health and Community Services Department has a reciprocal Data Sharing Agreement with the Customer and Local Services Department and will, in some circumstances, seek to check and share information about a patient to establish their right – or otherwise – to free¹ health care as outlined in Section 2 to 4 above.

However, it remains the responsibility of the patient, or their parent/guardian, to provide the necessary evidence to prove eligibility for free healthcare in the event of any dispute over eligibility.

9. TRAVEL COSTS

The Department will pay for flights and other travel costs off-island for those public patients eligible for free healthcare, in accordance with the Department's Patient Travel and Related Costs Policy⁶ and only for patients eligible for free hospital treatment.

The Department will not pay for any other patient transport (including repatriation) and will recharge the cost of any travel booked to the patient. Neither will the Department pay for any relative(s) and/or friend(s) seeking to accompany a patient when being transferred, except in certain exceptional circumstances as set out in the Patient Travel Policy.

⁶ Copies of the Travel Policy can be obtained from the Travel Office at the General Hospital (01534 442323), or downloaded at <u>www.gov.je/health</u>

10. DISPUTED CHARGES AND EXCEPTIONAL CIRCUMSTANCES

Every patient has a right to appeal in the event they dispute any charge(s) levied upon them. The Resident and Non-Resident Charging Policy (RNRCP) allows for hospital charges to be waived in exceptional circumstances and it is the role of the Charges Appeals Panel (The Panel) to decide whether or not an individual case warrants the granting of a special exemption to charges.

The Charges Appeal Panel is made up of senior HCS executives and chaired by the Assistant Minister for Health and Social Services. In some particularly complex cases, the Panel can call on other experts, including Consultants and other Clinicians, Corporate Directors, Departmental Officers and other Specialists to advise them.

The decision, however, rests solely with the Chair of the Panel and charges can only be waived in exceptional circumstances.

Appeal grounds that may be considered for exemption can include where a patient:

- disputes the charges levied upon them under the terms of the RNRCP
- falls outside the terms of the RNRCP but is seeking exemption on the basis of exceptional personal, medical or mitigating circumstances
- claims eligibility under the terms of the RNRCP, but this claim is potentially contestable can argue that strict application of the RNRCP would not meet a test of fairness and reasonableness.

The aim of the Panel is to make fair, transparent decisions which balance an individual patient's needs and circumstances against the need to ensure adherence to eligibility criteria, without which Jersey's taxpayers and other patients are potentially disadvantaged.

It sets out:

- to ensure the Resident and Non-Resident Policy (RNRCP) and Reciprocal Health Agreements Policy (RHA) are implemented appropriately
- to prevent Health Tourism in the context of access to Government-funded Health Services by non-qualified individuals
- to ensure fairness and reasonableness in the setting of charges for healthcare provision to non-qualified patients.

Appeals must be submitted in writing within 30 days of the date of the contested invoice(s) and the Patient must write in the first instance to:

Income Officer for Non-Eligibility Health and Community Services Government of Jersey Peter Crill House Gloucester Street St Helier| Jersey| JE1 3QS

Email: patientfinance@health.gov.je

When writing, the patient must:

provide full patient details including:
 residential/visitor status

Residents and Non-Residents Charging Policy

- $\circ~$ the date they took up residency in Jersey/arrived in Jersey (evidence of travel/residency if required)
- usual place of residency (if not Jersey)
- o date of birth
- Clearly set out the grounds on which they are appealing the charge and why they believe an exemption to charges should be made. Financial hardship alone will not be accepted by the Charges Appeals Panel as sufficient grounds for exemption to charges.
- set out <u>all pertinent facts for example: the date of admission and/or treatment received,</u> details of any related pre-existing conditions/treatment that may be relevant to the appeal claim
- detail any special circumstances
- provide evidential material, including copies of documentation (e.g. marriage certificate, travel documents etc) that may support the grounds for appeal.

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.

A representative may write on behalf of a patient. In this instance, the appeal submission <u>must also include</u>:

• a letter, signed and dated by the patient authorising their nominated representative to correspond on their behalf, discuss the details of their case with the appropriate Health and Social Services Department representatives and, where necessary, to disclose personal information about them

 a completed copy of the patient representative consent form which can be downloaded from <u>www.gov.je/health</u>

• Power of Attorney

11. ELIGIBILITY FOR STATES BENEFITS

It is important to note that different Government Departments will have individual criteria for assessing qualification for States benefits, e.g. Social Security, Housing, Education etc. Qualification for one Department <u>does not</u> necessarily ensure or define eligibility for benefits available through another Government Department.

It is the responsibility of an individual to check with the Health and Community Services Department to ensure they have the accurate information in assessing their eligibility either as a resident or visitor – for access to free health care and treatment.

Advice sought or given by other departments or individuals may not be up to date or accurate and such advice <u>will not</u> be accepted as grounds for hospital charges to be waived or as exceptional circumstances in support of an appeal.

Further information on eligibility and healthcare charges is available by contacting the Eligibility team on 01534 442227 or by emailing: <u>patientfinance@health.gov.je</u>

APPENDICES

APPENDIX 1: People Potentially Eligible for Free Health Care and Treatment

Access to free health services is limited to individuals who meet the definition of ordinarily resident **together with** the criteria outlined in Sections 2 to 4 of this Policy.

For the purposes of this policy, the Department will regard nationals listed below as being able to qualify as ordinarily resident once the qualification criteria have been met.

1	 A British citizen or a national of another member state of the European Economic Area (EEA) or 				
	A Swiss national who is legitimately employed in Jersey.				
	EEA members (as at November 2020)				
	Austria	Greece	Malta		
	Belgium	Guernsey (and Alderney)	Netherlands		
	Bulgaria	Hungary	Norway		
	Croatia	Iceland	Poland		
	Cyprus	Ireland	Portugal		
	Czech Republic	Isle of Man	Romania		
	Denmark	Italy	Slovakia		
	Estonia	Latvia	Slovenia		
	Finland	Liechtenstein	Spain		
	France	Lithuania	Sweden		
	Germany	Luxembourg	United Kingdom		
2	A Commonwealth citizen, currently in employment in Jersey, who has permission from the Customs and Immigration Service to remain in Jersey.			m	
3	A person currently in employment in Jersey under a work permit issued by the Customs and Immigration Service.				
4	A person who maintains their principal accommodation in Jersey, in which they reside, subject to the qualification criteria outlined in Sections 1-2 of this Policy.				

APPENDIX 2: Former Jersey Residents returning to live in Jersey

Former Jersey residents who are returning to live permanently in Jersey, having lived or worked elsewhere for **five years or more**, **will not be eligible for** free care or treatment unless they qualify under Sections 1 to 4 of this Policy, or fall within the exemptions listed in Appendix 3.

Permanently Entitled Jersey residents returning to live and work in Jersey, will be required to prove their eligibility to free health care by providing proof of employment or other Jersey tax-assessed income and residential status.

Former Jersey residents who are returning to Jersey to live after **less than five years away**, will only be eligible for free care or treatment – as outlined in Sections 1-4 – if they can provide evidence that they had previously lived in Jersey for a minimum of ten continuous years at some point prior to treatment.

All former Jersey residents requested by the Department to prove their eligibility to free health care in accordance with this policy, will need to provide evidence they intend to permanently reside in Jersey, as opposed to visiting Jersey, even if that visit is for an extended period of time, **AND** proof of their residential status in accordance with the Control of Housing and Work (Jersey) Law 2012 and regulations.

Proof of residential status can be obtained from the Community and Local Services Department.

Patients entitled to, or in receipt of, Income Support

It is important to note that entitlement to, or receipt of, Income Support from Social Security <u>does not</u> indicate an automatic eligibility for access to free treatment and/or care through the Health and Community Services Department.

While CLS will issue a Health Card to a person who has accumulated a total of six months' residency in Jersey over any period of time, eligibility for free health services requires that a person is ordinarily resident in Jersey for a minimum period of six consecutive months immediately prior to requiring treatment.

It is the **responsibility of an individual to check** with the Health and Community Services Department to ensure they have the **accurate information** in assessing their qualification – either as a resident or visitor – for access to free health care and treatment.

Further information on eligibility and healthcare charges is available by contacting the Eligibility team on 01534 442227 or by e-mailing : <u>patientfinance@health.gov.je</u>

APPENDIX 3: Countries with which Jersey has a Reciprocal Health Agreement (RHA) for Visitors to Jersey

Emergency and urgent medical care and treatment is provided to anyone who qualifies under the terms of a Reciprocal Health Agreement.

Free health care for visitors under this category is restricted to the limitations included in any individual agreement* and is valid for a maximum period not exceeding three calendar months from the date of arrival in Jersey.

A person visiting Jersey for a period which extends beyond three months, is classified as a non-resident and, as such, not covered by any existing RHA, at which point qualification criteria, as set out in Sections 1-4 of this policy will apply.

It is important to note that the limitations under individual RHAs are specific to the country.

*Details of current RHAs can be found by following this link:

https://www.gov.je/sitecollectiondocuments/health%20and%20wellbeing/id%20countries%20with%20reciprocal%20health%20care%20agreements%20table%2020190116%20mr.docx

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

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
- It does <u>not include</u> 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 who is temporarily deployed in Jersey will be defined as a Visitor, providing their period of deployment does not exceed three <u>calendar months</u>. If their contract of services in Jersey is for more than three calendar 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.

APPENDIX 4: Exemptions to Charges

The following individuals (their spouse/registered civil partner and/or dependent children who are ordinarily resident with them – as determined by the criteria in Section 2 of this Policy) are automatically exempt from restrictions outlined in Section 2.

- Members of the Consular Corps accredited to Jersey.
- A member of the UK armed forces who was, immediately prior to enlisting, ordinarily resident in Jersey.
- A member of the UK armed forces who sustained injury or ill health as a result of their active service, regardless of whether they had previously been resident in Jersey
- A member of another nation's Armed Forces or Emergency Service who is on official duty in Jersey at the time treatment is required (confirmation of their official capacity must be received from an appropriate Jersey Liaison Officer)
- A full-time student at an institution (not in Jersey) who was, immediately prior to starting at that institution, ordinarily resident in Jersey
- A prisoner detained in prison or by the Customs and Immigration Service in Jersey
- Any individual living and working abroad (not including in the UK) in the following capacities who was ordinarily resident in Jersey immediately prior to taking up their work:
- A member of diplomatic staff working in an embassy
- Staff working for the British Council or Commonwealth War Graves Commission
- A missionary (paid or unpaid) working for an organisation principally based in Jersey
- An aid worker (paid or unpaid) working for a recognised charitable organisation.

The following individuals will also be eligible for free health care and treatment:

- Those in need of immediate compulsory psychiatric treatment under the Mental Health (Jersey) Law 2016.
- Those requiring treatment for certain conditions and contagious diseases⁷.

⁷ The Health and Community Services Department applies NHS regulations on contagious diseases that would be eligible for free treatment and care. The list (as confirmed at the time of publication) is attached at Appendix 6

APPENDIX 5: Evidence of Eligibility

It is the responsibility of the patient to provide proof in order for the Department to establish a patient's eligibility for free health care. Failure to provide evidence will result in charges being applied.

While all patients will be required to present a valid health card this, in itself, is not sufficient evidence that a patient has been ordinarily resident in Jersey for the required period and meets the conditions for eligibility for free health care. For example, a valid health card demonstrates six cumulative months' residency in Jersey, but not necessarily the **6/12 consecutive months** immediately prior to seeking treatment that is required to meet the criteria for access to free health care.

Evidence of eligibility must include proof of identity, verification of residency and, in some circumstances, proof of birth/marriage. This may include, but is not limited to, a combination of:

- Registration Card (for work and housing)
- Passport or national identity card
- Birth, Marriage and Civil Partnership Registration certificates
- Wage slips
- Employment contract/work permits
- Tax returns and tax notices
- Pension income notices
- Social Security payments
- Housing rental contracts
- Utility bills and bank statements showing income
- School attendance record

APPENDIX 6: Medical Exemptions

Sexually Transmitted Infections

With the exception of HIV, treatments for all sexually transmitted infections are exempt from charges.

HIV testing and counselling will be provided free of charge. However, all subsequent clinical treatment, including the provision of drugs, is chargeable up until the point that an individual has been continuously ordinarily resident in Jersey for six consecutive months immediately prior to requiring treatment and/or medication.

Note: immediately necessary or urgent treatment for HIV will not be delayed while eligibility or entitlement is confirmed.

Diseases to which Public Health Enactments Apply

Amoebic dysentery Dysentery Diphtheria Leptospirosis Meningitis

Ophthalmia neonatorum Paratyphoid fever Typhoid fever Viral hepatitis

Notifiable Diseases

Any diseases listed by Schedule of the Notifiable Diseases (Jersey) Order 1988

Food Poisoning and Food-Borne Infections

Salmonella infections Staphylococcal infections likely to cause food poisoning

Other Diseases

Pandemic influenza (influenza caused by a new virus subtype that has an increased and sustained transmission during a global outbreak of influenza)

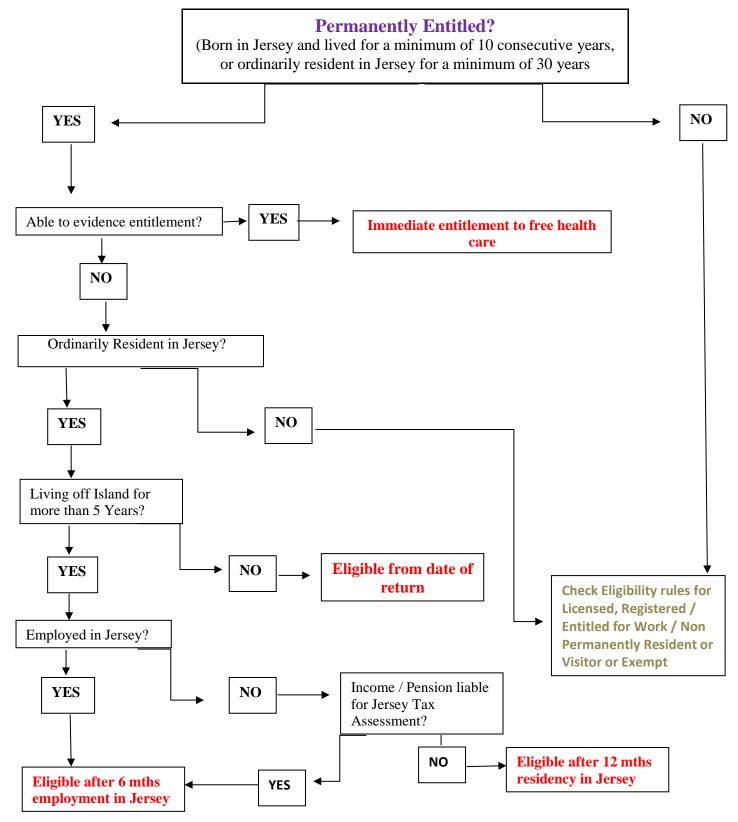
APPENDIX 7: Ukrainian Refugee Exemption

As per the decision made by the Council of Ministers on the 14th March 2022, the existing residents and non-residents charging policy that controls access to non-emergency will be waived for all persons granted immigration permission to remain in Jersey for three years on the grounds of Ukrainian refugee status. Therefore, Ukrainian refugees will be able to access both emergency and non-emergency healthcare for free from the time they have been granted Ukrainian refugee status by the Immigration Department and are present in Jersey.

APPENDIX 8: Eligibility Status Flowcharts

1. PATIENT CHARGES: ELIGIBILITY: **PERMANENTLY ENTITLED** STATUS

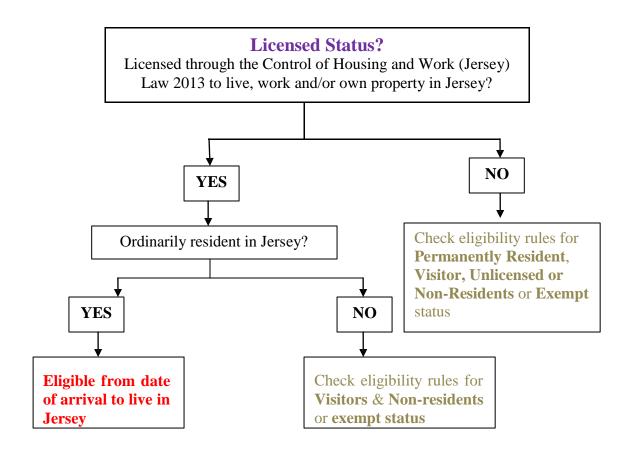
EVERYONE IS ELIGIBLE TO RECEIVE FREE TREATMENT FOR AN EMERGENCY IN THE ACCIDENT AND EMERGENCY DEPARTMENT AT JERSEY HOSPITAL



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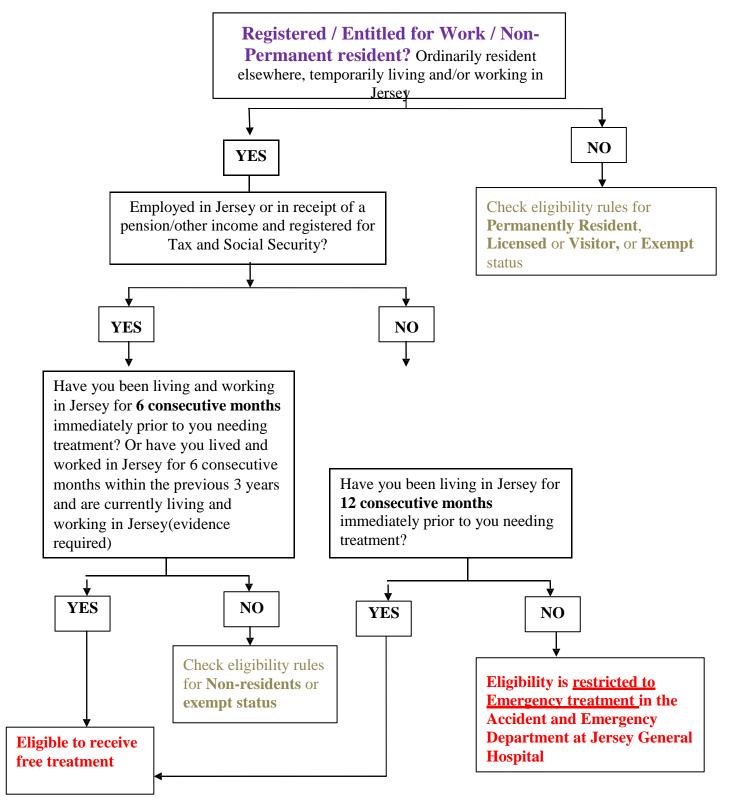
2. PATIENT CHARGES: ELIGIBILITY: LICENSED STATUS

EVERYONE IS ELIGIBLE TO RECEIVE FREE TREATMENT FOR AN EMERGENCY IN THE ACCIDENT AND EMERGENCY DEPARTMENT AT JERSEY HOSPITAL



3. PATIENT CHARGES: ELIGIBILITY: REGISTERED / ENTITLED FOR WORK OR NON PERMANENTLY RESIDENT STATUS

EVERYONE IS ELIGIBLE TO RECEIVE FREE TREATMENT FOR AN EMERGENCY IN THE ACCIDENT AND EMERGENCY DEPARTMENT AT JERSEY HOSPITAL



4. PATIENT CHARGES: ELIGIBILITY: VISITOR TO JERSEY

EVERYONE IS ELIGIBLE TO RECEIVE FREE TREATMENT FOR AN EMERGENCY IN THE ACCIDENT AND EMERGENCY DEPARTMENT AT JERSEY HOSPITAL

