

### **Overseas Healthcare Services**

## Giving birth abroad application form

This form is for UK funding to give birth in the EEA and Switzerland. Search 'Giving birth outside the UK' on NHS.uk to find out more.

#### Information for the applicant

#### **Eligibility**

If you are applying to give birth in the EU, you need to be ordinarily resident in the UK.

If you are applying to give birth in Norway, Iceland, Liechtenstein or Switzerland you must be in scope of the EU Withdrawal Agreement to be able to apply to give birth abroad. This is:

- an EU, Swiss, Norwegian, Icelandic or Liechtenstein citizen living in the UK by 31 December 2020
- a UK State Pensioner or receiving some other exportable benefits, and you have a registered S1 form or E121
- a frontier worker (someone who works in one state and lives in another) by 31
  December 2020, for as long as you continue to be a frontier worker in the host
  state, and you're eligible for an S1 form or E106
- a worker posted to work in another EU country, Norway, Iceland, Liechtenstein or Switzerland by your UK employer, where the country has agreed to let the posting continue
- an eligible family member or dependant of one of the above
- a UK student studying in the EU, Norway, Iceland, Liechtenstein or Switzerland by 31 December 2020

Before making your application to give birth in Norway, Iceland, Liechtenstein or Switzerland, you should apply for a UK EHIC. You can do this by visiting <a href="https://www.nhs.uk/ehic">www.nhs.uk/ehic</a>

If you are not in scope of the Withdrawal Agreement you can apply to give birth in an EU country only.

This form should only be completed when the date you are leaving the UK is confirmed, as this dictates when your health care is valid from.

You must send us a copy of your MAT B1, which you can get from your doctor or midwife, with your application. If you are unable to get a MAT B1, you can send a letter from a medical professional confirming your due date. Please include the reason why the MAT B1 cannot be obtained.

Send your complete application form by email to <a href="mailto:nhsbsa.ohsapplications@nhs.net">nhsbsa.ohsapplications@nhs.net</a> or by post to:

Overseas Healthcare Services, NHSBSA, 152 Pilgrim Street, Newcastle upon Tyne, NE1 6SN

If you need help or have any questions about filling in this form, please contact us on +44 (0)191 218 1999, Monday to Friday between 8am and 6pm. If English is not your first language, phone this number and we will provide an interpretation service over the phone.

#### Your data

We respect customer confidentiality at all times. The NHS Business Services Authority (NHSBSA) will use the information that you have given us to process and verify your applications to Overseas Healthcare Services and to plan and improve NHS services. This may include sharing your information with third parties to validate the information you provide. Further details on this, including your information rights, are available at <a href="https://www.nhsbsa.nhs.uk/yourinformation">www.nhsbsa.nhs.uk/yourinformation</a>

If you are filling in this form for someone else, they are responsible for making sure the information is correct. They should tell you what to write for them and they should sign or make their mark in the relevant box. If you are filling in this form for someone with learning difficulties or a condition that prevents them from managing their own affairs you are responsible for making sure the information is correct. You should sign the form yourself and indicate this in the signature box.



# Giving birth abroad application form

Re	ference number (for office use only)											
Please write in <b>BLOCK CAPITALS</b>												
Please include the OHS reference UK EHIC.	nce number you were given when you applied for your											
OHS application reference:												
Last name:												
First name:												
Date of birth:												
Nationality:												
Do you have pre-settled or sett scheme?	led status under the EU settlement Yes No											
under the EU settlement sch	ational and do not have pre-settled or settled status eme, please supply evidence of your right to reside in Indefinite Leave to Remain documentation.											
National Insurance or NHS nur	mber:											
Current UK address:												
Postcode:												
Alternative address for corresp (if applicable):	ondence											
Phone number (including dialling	ng code):											
Email address:												
Country in which you will give to	pirth:											

This must be a country within the EU, EEA or Switzerland

Are you leaving the UK perma	nently?	Y	'es			No								
If you are leaving the UK permanently please provide a letter from your employer confirming the date you are no longer employed from, or a letter from the Department for Work and Pensions confirming the date your Statutory Maternity Pay ends.														
Expected date of delivery:				/				/						
Date you will leave the UK:				/				/						
Warning: False information may lead to civil or criminal action. If you are signing on behalf of somebody else, you will be responsible for the information provided.														
I declare that the information given on this form and the supporting documents are correct and I understand that if I knowingly provide false information, I may be liable to prosecution and/or civil proceedings.														
I will inform Overseas Healthcare Services immediately if there are any changes which could impact my claim.														
I understand that my information the country providing my treatr verification.	-												rities	s in
I understand that my information Prevention Team, the NHS Co Social Care Anti-Fraud Unit for prosecution of fraud & any other	unter Fra	aud A	utho of the	rity a	and ever	the ntior	De <sub>l</sub>	part etec	men tion	ıt of	Hea	alth a	and	
Signed:														
Date:		/			/									