NHS FUNDING FOR TREATMENT IN EUROPE
S2 AND EU DIRECTIVE FUNDING ROUTES

Application form – supporting guidance notes

PLEASE READ THESE NOTES WHEN COMPLETING YOUR APPLICATION

SECTION 1:
GENERAL SUPPORTING INFORMATION

SECTION 2:
FURTHER INFORMATION TO HELP COMPLETE SPECIFIC APPLICATION FORM SECTIONS
SECTION 1 – GENERAL SUPPORTING INFORMATION

1. INTRODUCTION

- The application form can be completed by a person other than the patient, if necessary (e.g. a family member or a clinician). However, all the information provided should be about the patient. Parts 11 and 12 of the form require the applicant to provide their details, if they are applying on behalf of the patient.
- We can only communicate with the patient / applicant about the application, unless we have the written consent from the patient regarding anyone else they wish us to communicate with.
- The patient / applicant is responsible for providing accurate and complete information within and supporting the application. This will form the basis of the decision making process.
- Incomplete / inaccurate applications cannot be processed and may delay funding decisions.
- Depending on the complexities of the individual case, it may be necessary to request further information for an application in order for it to be assessed fully and correctly.
- NHS England cannot accept responsibility for documents lost in transit.

Further accompanying information by EEA funding can be found on NHS Choices:
http://www.nhs.uk/NHSEngland/Healthcareabroad/plannedtreatment

2. GENERAL GUIDANCE ON THE S2 FUNDING ROUTE

S2 application route (PLANNED treatments) – key points:

- Provider must be in the EEA (which includes Switzerland, but does not include Northern Ireland, Scotland and Wales).
- The treatment must be provided in the STATE healthcare system of the treating country.
  
  Please note that the healthcare / treating providers (from this point referred to as “providers”) may be either private or state providers. However, some private providers offer treatment in the state system and some state providers offer treatment privately.

- Applications must be authorised by NHS England BEFORE treatment.
- The patient must be ordinarily resident in England and entitled to NHS care.
- The treatment must be available to the patient under the NHS.
- The NHS confirms that it cannot provide the treatments or equivalent, in a medically acceptable timeframe, for the patient’s condition / diagnosis (referred to as Undue Delay).
- There must be written support from an EEA clinician, which following their full medical assessment, supports the diagnosis, treatment and medical timeframe necessary for the treatment the patient wants funding for.
- There must be written support from an EEA clinician / provider of the planned treatment dates and estimated costs,
- The patient / applicant must check with the EEA provider that they will accept an S2 form to fund the treatment(s).
• S2s cannot be considered for the clinical trial or experimental part of any treatment package.
• The patient does not pay for eligible treatment costs. This is completed by a direct payment to the provider (apart from any required co-payment costs which the patient must pay).
• S2s cannot be issued/approved if any of the treatment costs have already been paid for (unless the payments relate to the co-payment charge).

S2 – Form issue
• S2 forms will normally only be issued for a treatment period of up to 3 months at a time. Extensions/continuation applications can be made and will be assessed on a case by case basis.
• S2s will not normally be approved more than 3 months in advance of the treatment date, to ensure that the eligibility evidence is current.
• The supporting EEA clinician’s evidence/letter must be on official letterhead and should not be more than 6 months older than the treatment start date.
• An S2 form can only cover one treatment provider. If you need treatment at more than one treatment provider then you will need separate S2 forms to be approved for each provider.

Applications for Maternity S2 funding must be made directly to the Department for Work and Pensions (DWP), and not to NHS ENGLAND (see NHS Choices for further information).

If the patient is asked to pay a co-payment charge, this will be in accordance with local residents of the member state and is normal practice. The Department for Work and Pensions (Overseas Healthcare team) will be able to advise if the patient is eligible for a refund from them (this is not the responsibility of NHS England).

All other eligible treatment costs should be covered by the S2 form.

3. GENERAL GUIDANCE ON THE EU DIRECTIVE FUNDING ROUTE

EU Directive application route (PLANNED and EMERGENCY treatments) – key points:
• Provider must be in the EEA (NOT including Switzerland, Northern Ireland, Scotland and Wales).
• The treatment received can be in either the state or private healthcare system.
• Applications can be BEFORE or AFTER treatment (apart from specialised treatments which must be authorised by NHS England BEFORE treatment. It is the applicant’s responsibility to check whether the treatment they require is considered a ‘specialist treatment’ under the NHS.
• A list of specialised treatments, which require prior authorisation, can be found on NHS Choices. http://www.nhs.uk/NHSEngland/Healthcareabroad/plannedtreatment/Pages/Article56.aspx
• The patient must be ordinarily resident in England and entitled to NHS care.
• The treatment must be available to the patient under the NHS.
• There must be written support from an EEA clinician, which following their full medical assessment, supports the diagnosis and treatments for which the patient is requesting funding.
• For specialised treatments the EEA clinician must also provide written support for the medical timeframe that they consider necessary for the treatment to be provided.
• For specialised treatments, “Undue delay” is a discretionary criteria and NHS England may need to check whether the NHS can provide the treatments, or equivalent, in a medically acceptable timeframe, for the patient’s condition / diagnosis.

• Acceptable proof of payment documentation will need to be provided post treatment.

• The patient normally pays the provider for the treatment costs themselves and is reimbursed by the NHS for eligible treatment costs, after treatment (refunds up to NHS costs only).

4. UNDUE DELAY

“Undue Delay” is where the NHS cannot provide the treatment / equivalent requested, in a medically justified timeframe, for the patient’s diagnosis / condition.

It is a routine criteria for S2 and discretionary for EU Directive Specialised treatment applications.

It requires written support from an EEA clinician which states how soon the patient needs treatment and why (based on the EEA clinician’s full clinical assessment of the patient’s condition / diagnosis).

Please note that the European team will, where necessary, contact the relevant NHS Commissioner to confirm treatment timeframes under the NHS and whether Undue Delay applies.

5. TREATMENTS AVAILABLE ON THE NHS (NHS ENTITLEMENT)

If a patient is unsure whether a treatment would be available to them under the NHS, they can contact their NHS Commissioner directly (local Clinical Commissioning Group (CCG) or NHS England) for further advice before receiving treatment or applying for funding.

Please however be aware that the European team usually requires a fully completed application form to be submitted, before a fully considered and accurate decision can be provided.

6. FUNDING / REIMBURSEMENTS / REFUNDS

Only treatment costs can be assessed for funding / reimbursement / refunds.

Travel and accommodation costs will not be reimbursed, including those for people / carers who may be accompanying the patient.

Translation costs are also not covered.

7. TRANSLATIONS

All medical and financial documentation, which is not in English, will need to be translated in order for it to be understood to progress an application. This is the patient’s / applicant’s responsibility.

Translations do not have to be completed by an official translator. Whoever completes the translation must record who they are (their role / relationship to the patient) and sign / date the translated documents.

Translation costs are not refunded. This is the responsibility of the patient / applicant.
8. CONTACTS / APPLICATION FORM SUBMISSION

Completed application forms and accompanying eligibility documents should be sent to the following address:

European Cross Border Healthcare Team  
NHS England  
Fosse House, 6 Smith Way  
Grove Park, Enderby  
Leicester, LE19 1SX  

Or email: england.europeanhealthcare@nhs.net  
Or telephone: 0113 8249653.

Please note: It can take up to 20 working days for a fully completed application to be processed and a decision to be made. You will be informed of the outcome of your application once a decision has been reached. If approved, the reimbursement can take up to a further 30 working days to be processed.
**SECTION 2 – FURTHER INFORMATION TO HELP COMPLETE SPECIFIC APPLICATION FORM SECTIONS**

<table>
<thead>
<tr>
<th>Part 1: Application Route</th>
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<tbody>
<tr>
<td><strong>Treatment</strong></td>
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<tr>
<td>Check with the treatment provider:</td>
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<tr>
<td>1. Whether they are a state sector or private sector provider and</td>
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<tr>
<td>2. The basis under which the treatment they are providing to you is under (i.e. either the state or private system).</td>
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<tr>
<td>Tick either “private” or “state” on the application form with the answer to (2).</td>
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<tr>
<td>For S2 funding applications, check with the provider that they will accept an S2 as a guarantee for funding for the treatments you are wanting to have, and that they understand the funding process. If they don’t, this can cause the patient unexpected problems and may make the S2 invalid.</td>
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<tr>
<td><strong>Application route</strong></td>
</tr>
<tr>
<td>Tick which application route you are applying for funding under.</td>
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<tr>
<td>The list of specialised treatments can be found on NHS Choices.</td>
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<tr>
<td><a href="http://www.nhs.uk/NHSEngland/Healthcareabroad/plannedtreatment/Pages/Article56.aspx">http://www.nhs.uk/NHSEngland/Healthcareabroad/plannedtreatment/Pages/Article56.aspx</a></td>
</tr>
<tr>
<td>Complete a separate application form for each separate medical condition you have and want treatment funding for and for separate categories of funding / application routes, you are applying under.</td>
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<tr>
<th>Part 2: Patient Details</th>
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<tbody>
<tr>
<td><strong>Permanent / settled address in England</strong></td>
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<tr>
<td>This should be your “settled” residence in England where your post is sent to.</td>
</tr>
<tr>
<td>Only provide an alternative address if for some reason you are not currently living at your settled residence, the reason for which should be recorded in Part 3 of the application form.</td>
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<tr>
<td><strong>NHS Patient charge exemptions</strong></td>
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<tr>
<td>We only need to know about any NHS patient charge exemptions that are relevant to your application and the treatments you are applying for (e.g. prescription / dental / ophthalmic charges). Please therefore only provide evidence for patient charges relevant to your application.</td>
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<tr>
<th>Part 3: Residence</th>
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<tbody>
<tr>
<td><strong>Ordinarily Resident – NHS concept:</strong></td>
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<tr>
<td>NHS England can only process EEA applications for patients who are ordinarily resident in England and entitled to free NHS care (the UK healthcare entitlement system is a residence based one).</td>
</tr>
<tr>
<td>All patients applying to NHS England for EEA funding must therefore be assessed against the test for “Ordinarily Residence” in England.</td>
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<tr>
<td>A person will be “Ordinarily Resident” in England when that residence is lawful, adopted, voluntary, and for settled purposes as part of the regular order of their life for the time being, whether of short or long duration.</td>
</tr>
</tbody>
</table>

EEA application form – supporting guidance notes (04 /16)
A person is not ordinarily resident just because they have a British nationality, hold a British passport, are registered with a GP, have an NHS number, own a property in the UK or have paid / are paying NI contributions and taxes in the UK.

The onus is on the patient to prove their Ordinarily Residence status to NHS England and NHS England can request further information until they are happy that the requirement has been satisfied.

**Proof of Residency - eligibility documents:**

Supporting Proof of Residence documents will need to be provided which are official, dated and with the patient’s name and settled address clearly recorded on them. They will need to cover the treatment period, before and after.

Applicants must send in at least 2 appropriate forms of official evidence to show that they are resident at the permanent / settled address recorded on their application form. They must cover the treatment period, before and after, and one of them MUST have been issued within 3 months of the treatment period.

**The first** should be a bank statement (from the person receiving treatment or the parent if the application is for a child), showing activity / transactions in England, covering transactions before and after the treatment period.

**The second** should be an official document, such as:

- A local authority council tax bill.
- Utility bill (e.g. gas, electric, water).
- HM Revenue & Customs (Inland Revenue) tax document e.g. tax assessment, statement of account, notice of coding. P45s and P60s are NOT acceptable.
- Official statement / letter from a relevant benefits agency confirming the right to benefits or state pension.

If the first piece of evidence is not available, then **3 pieces of evidence** should be submitted including at least one from the secondary list and two others from the secondary list or from the list below:

- Driving licence.
- Fixed line telephone bill.
- Mobile phone bill.
- Rent book.
- Rental agreement (local authority / private) – if don’t pay utility bills.
- Solicitor’s letter confirming recent house purchase or land registry confirmation (in this case, proof of previous address will also be needed).
- Payslip (if current address recorded).
- NHS letter / appointment card.
- Letter from employer.

Contact the team regarding Students.

Parents can submit evidence of their residency for their children / dependents.
**Part 4: Treating Clinician / Provider Details**

Please provide details of the main hospitals / clinics / clinician’s etc in Europe where you were treated / are going to be treated. This is therefore in relation to the treatments for which you are applying for EEA funding.

PLEASE DO NOT RECORD THE DETAILS OF THE HOSPITALS OR CLINICIANS THAT HAVE BEEN TREATING YOU UNDER THE NHS IN ENGLAND.

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**Part 5: Treatment Details**

Provide the supporting eligibility evidence, for the medical treatments, as follows:

- **ALL application funding routes (Pre / Post Directive and Specialised and S2).**
  - An official EEA clinician’s letter / report, confirming the diagnosis and medical need for the treatment(s).
  - If pre-treatment, these should be dated no more than 6 months prior to the planned treatment date, to ensure that they are current.
  - For applications post treatment, as well as the diagnosis and planned treatments, they should also confirm that the treatment actually took place e.g. a discharge report.

- **Specialised and S2 applications only:**
  - For Undue Delay: Written support from an EEA clinician which states how soon you need your treatment and why (based on their full clinical assessment).

- **S2 only:**
  - Written confirmation from the provider that (1) they will accept an S2, (2) planned treatment dates, (3) estimated costs.

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**Part 8: Post Treatment Costs / Proof of Payment**

For EU Directive claims only – post treatment:

- Reimbursements will only be made for items / treatments clearly recorded in the application table and supported by adequate proof of payment documentation, as detailed below.
- All entries must be covered by a clinician’s letter / report (including medication) to confirm that they were medically necessary and assessed as such by a clinician.
- Medication purchased over the counter will not be reimbursed if clinician support is not provided.
- You must provide English translations, where these documents are not in English.

**Acceptable Proof of Payment documents - all must be official and issued by the provider:**

- Cash receipts (should have provider stamp / letterhead – dated / stamped / signed).
- Cash register / till receipts.
- Provider receipts – other e.g. hand written / with provider stamp / signed by provider.
- Credit card statements to confirm credit card payments. Must also clearly show name and settled address.
- Bank statements to confirm on-line transfers / bank card payments. Must also clearly show name and settled address.
- Invoices.
Proof of Payment documents required for different payment methods:

<table>
<thead>
<tr>
<th>Payment Method</th>
<th>Proof of Payment documents to be submitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash</td>
<td>Invoice – <em>Original</em></td>
</tr>
<tr>
<td>Credit Card</td>
<td>Invoice – <em>Original</em></td>
</tr>
<tr>
<td>On-line transfer / bank card</td>
<td>Invoice – <em>Original</em></td>
</tr>
<tr>
<td>Cheque</td>
<td>Invoice – <em>Original</em></td>
</tr>
</tbody>
</table>

- **Invoices:** An invoice is the bill for the treatment showing that an amount is due and on its own does not necessarily act as proof of payment. Please provide the original copy of the invoice along with any other official receipt showing that payment has been made (original).

- **Cash payments:** Please provide the original invoice (bill for payment due) and the original cash receipt from the provider clearly showing that the payment has been made. Or, provide the original invoice which has been stamped / initialled by the provider clearly showing that it has been paid in cash (if there is not a separate cash receipt).

- **On-line transfers / bank card payments:** Provide the original invoice (bill for payment) with a supporting bank statement (copy) clearly showing that the payment has been made to the provider (not just showing that the payment has been set up / is due).

- **Credit card payments:** Provide the original invoice (bill) with a supporting credit card statement (copy) clearly showing that the payment has been made to the provider (not just showing that the payment has been set up / is due).

- **Cheque Payments:** Provide both the original invoice (bill) and receipt, and also the bank statement (copy) showing that the cheque has been cashed / cleared, otherwise it is just an intent to pay.