Written Ministerial Statement

Title: DHSC Update

Made by: Stephen Hammond MP, Minister of State for Health, Department of Health and Social Care

Today, I am updating the House on the Department for Health and Social Care’s plans for the continuity of reciprocal healthcare arrangements in the event we exit the EU without a deal.

Under current EU-based entitlements, the UK pays for the healthcare costs of 180,000 UK nationals, mostly pensioners, in health systems across the EU. There are around 50 million UK tourist visits to the EU annually; the European Healthcare Insurance Card (EHIC) is used in around 0.5% of these visits. Moreover, approximately 50,000 posted workers (employees who are sent by their employer to carry out a service in another EU member state on a temporary basis), are protected through the current arrangements.

The current EU healthcare arrangements operate on a reciprocal basis. The UK, EU member states and EFTA states (Iceland, Norway, Liechtenstein and Switzerland) reimburse each other for the healthcare of those who remain covered by their respective social security schemes when living in, working in or visiting each other’s country. These arrangements are a function of EU membership that also applies to the EFTA countries, and are an exception to the arrangements that apply to the rest of the world. As a result, extending these functions in the event of the UK leaving the EU without a deal is subject to agreement and cannot be done by the UK alone.

Separately, the UK and Irish Governments are committed to continuing to facilitate access to healthcare services within the Common Travel Area (CTA). Discussions to continue reciprocal healthcare arrangements are underway between the UK and Ireland and both Governments are taking legislative steps to enable us to implement these arrangements by exit day. Additional guidance for those living and working in the CTA has been published on the GOV.UK website.

While EU reciprocal healthcare is funded and administered on a UK-wide basis, the Devolved Administrations have responsibility for healthcare provision in Scotland, Wales and Northern Ireland. We are working closely with all parts of the UK on our approach.

My Department has published country specific guidance on GOV.UK and NHS.UK about healthcare arrangements if the UK leaves the EU without a deal and has been working closely with EU member states and EFTA states to protect existing healthcare arrangements for these and other groups.

The UK Government’s Proposal

Subject to Parliament ratifying the Withdrawal Agreement, in a deal scenario current reciprocal healthcare rights will continue during the implementation period until 31 December 2020. The Withdrawal Agreement and EFTA Agreements also give longer-term reciprocal healthcare rights to those who are living in or previously worked in the other country on exit day.

We have proposed to EU Member States and EFTA States that we should maintain the existing healthcare arrangements in a no deal scenario until 31 December 2020, with the aim of minimising disruption to UK nationals and EU and EFTA state citizens’ healthcare provision.
This would mean that we will continue to pay for healthcare costs for current or former UK residents for whom the UK has responsibility who are living or working in or visiting the EU and EFTA states, where individuals are not covered by the EFTA Citizens’ Rights Agreements. We are hopeful that we will reach such agreements.

We have brought forward legislation to enable us to implement new reciprocal healthcare arrangements. The Healthcare (International Arrangements) Bill was introduced in Parliament on 26 October and passed Report stage in the House of Lords on 12 March 2019. It will provide us with the power to fund and implement comprehensive reciprocal healthcare arrangements after we leave the EU. We have also laid three Statutory Instruments which will give us the specific legal basis to implement our offer.

Minimising disruption in the event of no deal

As outlined above, we want to work with EU partners to protect existing healthcare arrangements beyond exit day. If that is not possible, healthcare arrangements in many EU member states would revert to those which apply to the rest of the world. Whenever travelling abroad, individuals are always responsible for ensuring they have travel insurance. It is already the case that we advise people to obtain comprehensive travel insurance when working, studying or travelling to the EU and the rest of the world. This will remain our advice in all circumstances.

Many people rely on EHICs. In a no deal scenario, these may no longer be valid in EU member states (and in EFTA states for those visitors not in scope of the EFTA Citizens’ Rights Agreements and travelling after exit day). UK nationals living in or travelling to EU member states should check up to date information on GOV.UK and NHS.UK and ensure they have taken the necessary steps to prepare.

Although we are hopeful that we can agree reciprocal healthcare arrangements, as a responsible Government we have developed a multi-layered approach to minimise disruption to healthcare provision to UK nationals currently in or travelling to the EU member states and to those UK nationals not covered by the EFTA Citizens’ Rights Agreements:

1. **We welcome action from those EU member states who have prepared their own legislation for a no deal scenario.** EU member states such as Spain have made public commitments that they will enable resident UK nationals and visitors to access healthcare in the same way they do now.

2. **As noted above, the UK and Irish Governments are committed to continuing to facilitate access to healthcare services within the Common Travel Area (CTA).** Discussions to continue reciprocal healthcare arrangements are underway between the UK and Ireland and both Governments are taking legislative steps to enable us to implement these arrangements by exit day. Additional guidance for those living and working in the CTA has been published on the GOV.UK website.

3. **The UK Government has already agreed with Iceland, Norway, Liechtenstein, Switzerland (EFTA) to protect citizens’ rights.** This means that UK nationals already living in EFTA states and vice versa will be able to access healthcare as they do now. However, in line with the arrangements we are seeking with EU member states, we would like to protect the healthcare cover of visitors not in scope of the citizens’ rights agreements travelling between the EFTA states and the UK after exit day to enable them to continue to be covered for needs-arising healthcare (currently facilitated under the EHIC system).
4. The UK Government has committed to fund healthcare for UK nationals (and others for whom the UK is responsible) who have applied for, or are undergoing, treatments in the EU prior to and after exit day, for up to one year, to protect the most vulnerable. The Statutory Instruments introduced on 11 February would also enable some UK residents to recover costs if they are charged. For UK nationals who are visitors, we will refund costs directly. For UK nationals who are resident in another member state, this commitment requires us to reach an arrangement with individual EU member states. We are hopeful that they will remain willing to treat patients and accept reimbursement and are in discussions to seek such an agreement.

5. We have published 31 country specific guidance on GOV.UK and NHS.UK and will update the guidance with further developments.

6. Should UK nationals face changes in how they can access healthcare, they may use NHS services if they return to live in the UK. As is currently the case, UK nationals living in the EU will have an entitlement to NHS services as soon as they take up ordinary residence in England. We will continue to work closely with NHS in England and across the Devolved Administrations in the UK to ensure returners can appropriately access NHS services. A British citizen who moves to the UK can be considered ordinarily resident upon arrival if it is clear that they are here to reside on a properly settled basis for the time being. British citizens who return to live in the UK partway through their treatment will be able to access NHS services.

7. Those who have their healthcare funded by the UK under current EU arrangements and are resident in EU member states on exit day can use NHS services in England without charge when on a temporary visit to England.

8. The Association of British insurers (ABI) has advised that travel insurance policies will cover emergency medical treatment costs as standard that could have been reclaimed through the EHIC, although some routine treatments would not be covered. People should be aware that there are a small number of policies in the market that state they will only provide cover if you have and use an EHIC. The ABI have advised that all individuals should check their current travel insurance thoroughly to ensure they have the correct amount of cover for their requirements. Additional guidance has been published on the ABI website here.

Advice for citizens of EU member states and EFTA states

We have confirmed that, in a no deal scenario, we will protect the healthcare rights of citizens from EU member states and EFTA states, who are living lawfully in the UK on exit day, and this includes their entitlements to NHS cover.

Advice for UK nationals

In the event that we cannot reach an agreement with EU member states and EFTA states for those nationals not in scope of the EFTA Citizens’ Rights Agreements, it is not possible for the UK Government to guarantee access unilaterally to healthcare abroad, beyond the situations set out above. We will be employing a small number of overseas healthcare advisers in UK Missions across Europe who will be able to provide advice where individuals have particular need for support. However, it is vital that all UK nationals who are currently or planning to reside in, travel to, work or study in the EU member states and EFTA states take the following actions now:

Residents: The UK Government has published advice setting out options to access healthcare under local laws in EU member states and EFTA states and what people can do to prepare. We have analysed 31 countries and strongly advise that all affected UK nationals check the latest country specific guidance on GOV.UK and NHS.UK.
Substantial numbers of UK nationals will already be eligible for or enrolled in the relevant health authorities locally, either because of their residency, benefits or employment status. There is no reason to think that a no deal scenario will affect these arrangements where EU countries offer equal access to healthcare.

For some people it may be advisable to register their healthcare entitlement with their relevant health authority locally. This may mean that they will need to join a social insurance scheme and contribute as other residents do. Others will need to buy private healthcare insurance.

**Visitors:** The Government always advises UK nationals to take out travel insurance when going overseas, both to EU and non-EU destinations. UK nationals, including those with pre-existing conditions, planning to visit a country in EU member states on exit day should continue to buy travel insurance.

As with any policy, UK nationals are advised to make sure they understand the terms and conditions of any travel insurance policy and that the policy is sufficient to cover healthcare needs. Most travel insurance policies will cover emergency treatment as standard but we advise all travelers to check their policies as some treatments may not be covered in the countries they are visiting.

Any questions regarding individual travel insurance policies should be directed to the relevant insurance companies or refer to guidance published on the ABI website here.

If we do not reach an agreement with EU member states and EFTA states for those nationals not in scope of the EFTA Citizens’ Rights Agreements, EHIC may no longer be valid after exit day. ABI advice is that, whilst almost all insurance policies will remain valid, some insurance policies may be affected. There is a small number of insurance policies which are dependent on having an EHIC, so if you have purchased one of these policies it is recommended you speak to your provider to ensure you are fully protected before you leave the UK.

**Workers:** We have published country specific guidance on GOV.UK and NHS.UK to help UK workers make the necessary preparations for a no deal scenario. We strongly advise that workers ensure they have comprehensive healthcare insurance for the full period of their stay.

**Students:** Currently, students residing in the UK who are going on a placement abroad are entitled to a UK-issued EHIC to cover healthcare costs for the duration of their placement. We cannot guarantee that this will continue for all EU member states in the event of a no deal scenario where the existing arrangements are not extended. We strongly advise that students check the country specific guidance that we have published on GOV.UK and NHS.UK and make the necessary preparations for a no deal scenario.

The EFTA Citizens’ Rights Agreements protect the rights of UK nationals who are studying in an EFTA state over exit day, and who are entitled to a UK EHIC, to continue to benefit from the EHIC scheme for the duration of their course.

**Returners:** As is currently the case, UK nationals who return to live in the UK and meet the ordinarily resident test will be able to access NHS care on the same basis as other UK residents. If these people return to live in the UK partway through their treatment, they will be treated by the NHS in a fair and equitable way.

UK nationals who have their healthcare funded by the UK under current EU arrangements and are resident in the EU on exit day can use NHS services in England without charge.
when on a temporary visit to England.

UK nationals who are resident in an EU country, who do not have their healthcare funded by the UK under current EU arrangements and do not wish to return to the UK, should seek to formalise their current residency status if they are eligible. Guidance has been made available on GOV.UK and NHS.UK.

The UK is taking steps to protect individuals whose healthcare it is responsible for under current EU arrangements, but who are not UK nationals. Where this paper refers to UK nationals, it includes non-nationals for whom the UK is responsible.