



**Briefing paper: Dialysis patients
and access to free health care:
A special case**

Access to health care within the European Economic Area (EEA) that is provided free at the point of use, or at a reduced cost, is clearly important to all people travelling within the EEA. The European Health Insurance Card (EHIC) System, which applies to UK citizens whilst we remain a Member State of the EU, is a highly successful means of achieving this.

29,000 people being treated for kidney failure

Access to health care as described above is particularly important for the 29,000 people in the UK who are being treated for kidney failure. These people require dialysis three times per week. Since dialysis replaces the kidney function they do not have themselves, the condition of dialysis patients deteriorates very rapidly if they miss one or more sessions and within a matter of just a few days, they are likely to die.

Dialysis sessions must be available in EEA

There is therefore no possibility of dialysis patients taking a break from treatment in order to travel; their dialysis sessions must be available, arranged in advance to ensure vital continuity of their care. The EHIC system has been essential in facilitating this, as it means that dialysis units throughout the EEA can be confident that they will be reimbursed for dialysis sessions provided to non-resident UK nationals.

Private travel insurance does not provide a viable alternative

Private travel insurance does not provide a viable alternative to the EHIC system for dialysis patients. Many travel insurance policies do not cover existing conditions at all. Those that do charge understandably high premiums because of the higher risk that the insured person will need to claim. For dialysis patients, the risk they will need to claim is 100%. Therefore policies covering existing conditions generally will not cover dialysis. If they did so, their premiums would be at least as high as the cost of paying privately for dialysis sessions.

Self-funding is beyond the reach of most people on dialysis

Self-funding is beyond the reach of most people on dialysis. If dialysis patients had to pay privately for dialysis sessions provided in other EEA countries, the cost would be prohibitive for most. The National Tariff 2016/17 in the UK reimburses hospital-based dialysis sessions at rates between £117.00 and £178.00 per session depending on circumstances and the procedures used. Costs may vary in other countries within the EEA and private costs may be higher.

Since dialysis must be provided three times per week, based on the present UK National Tariff prices, the cost of a week's treatment if patients had to pay whilst they were travelling would be unaffordable for most.

Brexit negotiators must understand importance of access to dialysis

Since the European Referendum, Kidney Care UK has been receiving calls and messages from dialysis patients expressing strong concern. For this reason, we are working to bring this matter to the attention of the Secretary of State for Exiting the European Union and the negotiators who will be responsible for securing the terms of the UK's exit.

We believe that it is important that negotiators understand the particularly vital significance of the EHIC system to people on dialysis. If this system were to be lost and was not replaced by a similar system, the vast majority of people on dialysis would not be able to travel in Europe.

Retain EHIC system in current form

Kidney Care UK would like to see the present EHIC System retained in its current form. We were encouraged by the statement made to the House of Commons by the Prime Minister on Monday 26th June 2017. In this statement and the accompanying position paper, she stated:

"...the UK will also seek to protect the ability of individuals who are eligible for a UK European Health Insurance Card (EHIC) before the specified date to continue to benefit from free, or reduced cost, needs-arising healthcare while on a temporary stay in the EU. The UK will seek an ongoing arrangement akin to the EHIC scheme as part of negotiations on our future arrangements with the EU."

No compromise on UK Government position

The statement above is a positive opening stance at the beginning of negotiations. However, for the reasons we have set out, we believe that it is essential that during the process of Brexit negotiations, this stance is not subject to compromise unless it is to provide a similar system by which people on dialysis would continue to receive the same benefits as they do currently under the EHIC system. Such a system must be operational at the point at which the UK leaves the EU.

Active support needed for point 49 in Government position paper

For patients whose kidneys have failed, dialysis is a form of long-term life support treatment. It is essential that we maintain the continuity of their treatment, including access to it that allows them to travel within the EU if they choose. We are calling on patients and carers, professional bodies and elected representatives in Westminster and in the devolved nations actively to support point 49 in the Government position paper issued on 26th June 2017, quoted below, and to ensure that there is no compromise in its delivery.

'49) During negotiations, the UK will seek to protect the healthcare arrangements currently set out in EU Regulations and domestic UK law for UK nationals and EU citizens who benefit from these arrangements before the specified date. We will also seek to protect the right of UK nationals and EU citizens to obtain and benefit from the European Health Insurance Card scheme. This will ensure that EU citizens are still eligible for NHS funded healthcare in the UK and vice versa for UK nationals in the EU.'

[Access the full paper here.](#)

For more details, please contact Fiona Loud, Policy Director

Kidney Care UK, 3 The Windmills, St Mary's Close, Turk Street, Alton GU34 1EF

Tel. 01420 541424 (9am – 5pm, Mon-Fri) or 07961 375611

Email fiona.loud@kidneycareuk.org