

The hospital travel costs scheme (HTCS) - update January 2006

Contents

Introduction	2
Patients entitled to reimbursement of hospital travel costs	3
Patients not automatically entitled to a refund but on low income	5
Patients assessed as eligible for low income relief and holding a current entitlement certificate	6
Patients claiming but not yet assessed for low income relief	7
Travelling expenses of patients' escorts	8
Retrospective claims.	8
Other categories included under HTCS - special cases	9
War disablement pensioners - special arrangements	10
People not eligible for HTCS help.	11
Procedures for reimbursing claims	12
General	12
Calculation of travel costs	12
Concessionary fares schemes	13
Payment arrangements	13
Payments in advance	14
Fraudulent claims	14
Overnight stay costs	14
Information to patients	15
Contractual and financial arrangements	16
Contacts	16
Frequently Asked Questions	17

Introduction

1. For some patients, travel to hospital can present difficulties - for example, because of the cost, the length or complexity of the journey, or the lack of access to private or public transport. This chapter is primarily concerned with the financial help which is available under the Hospital Travel Costs Scheme (HTCS), to those patients who do not have a medical need for ambulance transport and who cannot meet the cost of travel to hospital. The scheme operates under the provisions of the Health and Personal Social Services Travelling Expenses and Remission of Charges Regulations (Northern Ireland) 2004.
2. Throughout this guidance the patients referred to are:
 - those who are HPSS hospital in or out-patients but who are not eligible for free Health Service transport through Patient Care Scheme (PCS); or
 - those who are receiving HS treatment at a non-HPSS hospital or other clinic whilst under the care of a HPSS hospital consultant.
3. Throughout this guidance the terms 'hospital' or 'provider unit' refer to:
 - units managed by a Health & Social Services Trust, or a private unit used by the HPSS, e.g. diagnostic and treatment centres that are being created unless the context specifically indicates otherwise.
4. Hospitals should hold copies of:
 - forms HC1 and HC5, and
 - leaflet HC11

that are referred to in this guidance. Further supplies of the forms and leaflets can be obtained from Social Security Office or Jobs and Benefit offices and the Benefit Shop, Castle Court, Royal Avenue, Belfast, telephone number: 028 9033 6958, Mon–Fri between the hours of 9am–5pm; or from the Pension Service if you are aged over 60, telephone number: 0808 100 6165 or text phone: 0808 100 1165.

Patients entitled to reimbursement of hospital travel costs

Patients in receipt of Income Support, Jobseeker's Allowance (Income-based), Pension Credit (Guarantee Credit), Working Tax Credit and/or Child Tax Credit.

5. Under the HTCS, the following patients (and, where considered medically necessary, their escort) are automatically entitled to full reimbursement of travel costs to hospital.

Income Support

Patients who get Income Support should be able to present either an award notice or form FF260 or FF260A covering the day they attend the hospital. Or they should ask their local Social Security Office or Jobs and Benefit office for a letter confirming receipt of Income Support for the purpose of refunds for travelling expenses and Health Service charges.

Jobseeker's Allowance (Income-based)

Patients who get Jobseeker's Allowance (Income-based) are not likely to have evidence and they should ask their local Social Security Office or Jobs and Benefit office for a letter confirming receipt of this benefit for the purpose of refunds for travelling expenses and Health Service charges.

Tax Credits

Patients who get Working Tax Credit (WTC) or Child Tax Credit (CTC).

Patients are entitled to a refund if they meet the following conditions:

- their income is £15,050 or less – this is the amount shown on the Tax Credit award; and
- they get WTC and CTC, or
- they get WTC with a disability element – shown on the award, or
- they get CTC and are not eligible for WTC.

They will be sent a NHS Tax Credit Exemption Certificate showing they are entitled to help with health costs.

Information about the new Tax Credit arrangements is in leaflet HC11, order from Belfast Benefits Shop on 028 9033 6958. This leaflet should be made available to patients.

Pension Credit

Pension Credit consists of two elements – Guarantee Credit and Savings Credit.

Guarantee Credit (paid on its own or with Savings Credit) entitles the recipient and their partner to a full reimbursement of Hospital Travel Costs.

Pension Credit Customers will have to produce an award notice. Please note that the award notice includes personal information and if the patient would prefer not to show this, they could fold up the letter just to show item 5.

Those in receipt of Savings Credit on its own are not entitled under the Hospital Travel Cost Scheme. Although they may be entitled to full or partial help under the HS Low Income Scheme and as such should be advised to complete a HC1 form, available by calling 0808 100 6165.

Dependants

Patients, who are dependants in a family that gets Income Support, Jobseeker's Allowance (Income-based), Pension Credit guarantee Credit, Working Tax Credit or Child Tax Credit, should be able to present the evidence of entitlement outlined above.

Patients not automatically entitled to a refund but on low income

6. Other patients (and, where considered medically necessary, their escort) may be eligible for full or partial reimbursement under the HTCS on the basis of low income. The assessment of low income entitlement to refund of travel costs, and to exemption from a range of HS charges, is carried out by the local Social Security Office or Jobs and Benefits office which will issue a certificate, if appropriate after assessment.

Patients who may be entitled to help on low income grounds should be encouraged to read leaflet HC11 and to make a Low Income Scheme claim using form HC1 and a refund claim using form HC5. Leaflet HC11 and forms HC1 and HC5 are available from the Benefit Shop, Belfast, on 028 9033 6958 and from hospitals. HC11 is also available online at http://www.dhsspsni.gov.uk/publications/2003/hc11_booklet.pdf

7. Patients who might not consider that they are on a low income should be encouraged to make a claim if they have to travel frequently or over long distances. Unless they have savings in excess of the limit of £8,000 (£12,000 if aged 60 and over), they will be sent a certificate showing how much if anything they have to pay for their travel per week. They will be entitled to a refund of anything in excess of the amount shown on the certificate. A certificate is usually valid for 12 months.

Patients assessed as eligible for low income help and holding a current entitlement certificate

8. Those assessed as eligible for help on low-income grounds will receive a certificate from the Pension Service or their local Social Security Office or Jobs and Benefit office. Patients claiming low income entitlement should be able to produce either of these certificates.
9. Form HC2 will show:
 - the period of validity (both start and end dates);
 - the people it covers, i.e. one or two parents and the children;
 - that a full refund should be given.
10. Form HC3 will show:
 - the period of validity (both start and end dates);

- the people it covers, i.e. one or two parents and the children;
 - the amount of travel costs that each patient is expected to meet in any one week (7 days starting midnight Saturday).
11. Any costs incurred in any one week, over and above the amount shown should be refunded. Patients who have been assessed but who are unable to produce form HC2 or HC3 should be advised to complete HC5 to claim a refund.

Patients claiming but not yet assessed for low income help

12. Patients who claim low income entitlement but who have not applied for assessment should be given a claim form HC1 which they should be advised to complete and send to the Pension Service or their local Social Security Office or Jobs and Benefit office, with a completed form HC5.
13. Patients who have claimed but not received a certificate should be given refund claim form HC5 that they should send to the Pension Service or their local Social Security Office or Jobs and Benefit office. Patients are asked to include their hospital number, the department attended and the full name, address and phone number of the hospital, details of the dates on which they attended and fares paid. Patients should be advised that the claim for a refund has to be received by the Pension Service or their local Social Security Office or Jobs and Benefit office. or other office shown on the HC5, within 3 months of the date of travel that they paid.
14. The Pension Service or their local Social Security Office or Jobs and Benefit office. will carry out the assessment and if the patient is entitled to a refund for journeys already made, a completed form HC5, confirming entitlement, and information on who should pay the patient will be sent to the hospital. In such cases, the hospital should make the payment at the patient's next visit, or for

those who will not be visiting again within a reasonable period (say, within four weeks), direct to their home address. If the patient does not already hold an HC2 or HC3, the Pension Service or their local Social Security Office or Jobs and Benefit office will also if entitled send out one of these starting from the date the HC1 claim form was received. Entitlement to certificates is based on the date of claim; entitlement to refunds is based on the date of travel. If the patient's circumstances have changed between the date of travel and the date of claim, the amount of the refund could be different from what the certificate says they have to contribute.

Travelling expenses of patients' escorts

15. Under the HTCS, eligible patients are also entitled to claim for the travelling expenses of escorts where this is considered by their GP or consultant to be medically necessary. Payments for the travelling expenses of escorts under the scheme should be considered as part of the patient's travel costs and solely on the basis of the patient's entitlement and not on that of the escort. Under the provisions of the HTCS, references to an escort can be taken to mean two escorts where this is considered medically necessary.

Retrospective claims

16. Patients may claim help with travel costs up to 3 months after the date of travel. All the conditions applying to patients who claim at the time of travel apply equally in such cases and only Income Support, Jobseeker's Allowance (Income-based), Pension Credit Guarantee Credit, Working Tax Credit and/or Child Tax Credit or Low Income Scheme eligibility that cover the date of travel can be taken into account.
17. Where patients wish to make retrospective claims for travel expenses or are unable to produce evidence of entitlement at the time of travel, they should be

given a form HC5 so that they may claim a refund. The completed HC5 must be received by the relevant office within 3 months of the date of travel for which reimbursement is being claimed. The relevant office is shown on the HC5 and is:

- the patient's Social Security Office or Jobs and Benefit office, in the case of Income Support and Jobseeker's Allowance (Income-based) recipients;
- the Pension Service, in the case of Pension Credit recipients;
- the Prescription Pricing Authority for Working Tax Credit and Child Tax Credit recipients. The Prescription Pricing Authority will issue NHS Tax Credit Exemption Certificates when they receive information from the Inland Revenue. This will be sent monthly so there could be a delay in confirming entitlement. The Inland Revenue will not confirm entitlement. The Prescription Pricing Authority's address is –

Prescription Pricing Authority
PO Box 1011
Newcastle Upon Tyne
NE99 2ZP

If no response is received from the Prescription Pricing Authority after 10 days, the patient should contact them, on 0845 609 9299; or

- the Pension Service or their local Social Security Office or Jobs and Benefit office - in the case of those who are entitled to help under the Low Income Scheme.

Other categories included under HTCS - special cases

18. The following categories of Health Service patients are included under the HTCS arrangements (in some cases for reasons other than their ability to pay):
- Children - assistance is available to children if they are dependants in a family which is entitled to assistance under the HTCS scheme (see eligibility criteria above);
 - Health Service patients attending a hospital or centre for the provision or maintenance of appliances (e.g. artificial limbs, wheelchairs etc) - should be assessed for HTCS help on the same terms as any other HPSS hospital patients;
 - Patients attending for Health Service treatment at non-HPSS establishments (e.g. those with contractual arrangements with a HPSS Trust or HPSS Board to provide treatment for Health Service patients) - help is on exactly the same basis as if the patient had attended an HPSS establishment, but HPSS Trusts or referring units will need to make arrangements to pay these patients direct.

War disablement pensioners - special arrangements

19. There are special arrangements that apply to War Disablement Pensioners attending hospital for medical treatment for their pensionable disability. These arrangements include payment of travelling expenses, subsistence and loss of earnings allowances. The HTCS does not apply in such cases.
20. Any war pensioner enquiring about expenses for attending for medical treatment should be advised to contact the Veterans Agency Norcross, Blackpool FY5 3TA, stating that he/she is a war pensioner and giving his/her full name and address and, if possible, his/her war pension number.

21. War Pensioners attending hospital for reasons other than their accepted war disability should be treated under the HTCS arrangements on the same terms as for other patients.

People not eligible for HTCS help

22. The HTCS arrangements do not apply to patients for whom HPSS ambulance service transport is arranged, patients being transferred between treatment centres, visitors to patients in hospital, or private patients. The arrangements or other help available in these cases are outlined below.
23. **Patients with medical need for ambulance transport.** Trusts are responsible for providing ambulance transport for those patients considered by a doctor, dentist or midwife to have a medical need for such transport.
24. **Patients being transferred between treatment centres.** The cost of transferring patients from one hospital to another, or to a clinic or nursing home, whilst their treatment remains the responsibility of an HPSS hospital consultant should be regarded as part of treatment costs. The travel costs of patients who are sent home either as part of their treatment or to meet a hospital's convenience should also be regarded as part of treatment costs. Patients who take leave from hospital at their own request cannot be helped with their travel costs.
25. **Visitors to patients in hospital.** Help for visitors to patients in hospital is not available under the HTCS. Recipients of qualifying benefits visiting someone in hospital may be able to obtain some help in the form of a Community Care Grant from the Social Fund. They should be advised to enquire at their local Social Security Office or Jobs and Benefit office, and to ask for an application form SF 300.

Procedures for reimbursing claims

General

26. Provider units should have adequate arrangements for:
- informing all HS patients of their entitlements;
 - checking the appropriate travel costs; and
 - refunding patients the travel costs to which they are entitled.
27. Inpatients or outpatients should be able to obtain travel cost refunds at any time of the day or night. This applies particularly to those discharged from hospital or sent home from an Accident and Emergency Unit during out-of-office hours. Provider units might wish to consider giving an identified postholder responsibility for ensuring that patients have access to funds whenever they are required. All clinic and ward staff should be made aware of and be familiar with local arrangements.

Calculation of travel costs

28. Appropriate travel costs should be calculated on the basis of the cheapest form of public transport available to the patient (including any promotional or concessionary fares). Patients travelling by private car may claim the lesser of:
- the estimated cost of fuel actually used, or
 - the equivalent public transport cost.

29. Car parking charges (including those at a hospital) must also be reimbursed where they are unavoidable, although not penalties incurred through illegal parking. In a few cases, where there is no alternative (for example, in cases where patients have restricted mobility, or public transport is not available for all or part of the journey), patients may have to use a taxi or volunteer car service for the whole or part of their journey. In such exceptional cases these costs must be reimbursed in full.

In cases where health service transport is made available at a charge to patients, the charge must be reimbursed to those eligible under the HTCS.

The rates and amounts at which a hospital sets their refund levels are left to their own discretion. Rates may vary from one hospital or HS clinic to another and any dispute as to exactly how much is to be refunded is between the patient and the hospital.

Concessionary fares schemes

30. Concessionary fares are available for many elderly people and for people with disabilities. Provider units may wish to encourage patients to use or apply for concessionary fares wherever possible; similarly, they should remind patients to use cheap day return and other promotions offered by public transport operators.

Payment arrangements

31. Patients who are able to provide the evidence described should be refunded the appropriate cost of travel immediately and in cash.

Payments in advance

32. The Pension Service or local Social Security Office or Jobs and Benefit offices are not responsible for assisting patients with payments in advance to meet travel costs. It is the legal responsibility of provider units to make such payments where necessary and they should have arrangements for dealing with such requests. In these cases, provider units will need to satisfy themselves that the patient is entitled to assistance under the HTCS.

Fraudulent claims

33. Hospital staff administering the HTCS, should ensure that controls for the payment of travel costs are strictly adhered to, thus reducing the risk of fraud occurring. Where staff suspect a fraudulent claim has been made they must follow the procedures set out in their organisation's Fraud Response Plan.

Overnight stay costs

34. For some patients an overnight stay away from home is unavoidable, either because of the time of day or the length of travel. Where it is not reasonable for a patient (or an escort who is considered medically necessary to accompany the patient) to return home, an overnight stay should be arranged unless the patient is able to make their own arrangements. The benefits of encouraging parents to stay overnight with their children in hospital are now generally accepted and most Children's Departments have facilities for them to sleep on the ward. No charge should be made for these facilities.
35. For patients who cannot meet the cost of an overnight stay, costs so incurred cannot be met under the HTCS, but should be regarded as a part of treatment costs or met from non-Exchequer funds. As a guide, it would seem appropriate for such costs to be met where the patient is otherwise entitled to reimbursement under the HTCS, and paid in proportion to that entitlement. Bed, or bed and breakfast costs, may be included, but not other meal costs.

Information for patients

36. Provider units should ensure that information about the HTCS is available to patients. In particular, notices about the HTCS should be displayed in all patient areas. Leaflet HC11 summarises the arrangements set out above and should be made freely available in appropriate hospital departments or clinics, as well as in the community. This is available free from 028 9033 6958 or at www.dhsspsni.gov.uk/publications/2003/hc11_booklet.pdf. Provider units should ensure that details of the local arrangements for payments under the HTCS are displayed prominently in patient areas.

37. For all patients, provider units should ensure that they provide details of the HTCS and of local transport and concessionary fare arrangements with appointment or admission letters. Ideally those who may be able to claim low income entitlement should receive the information early enough to be able to apply to the Pension Service or their local Social Security Office or Jobs and Benefit office for an assessment in advance. They should be advised to use the claim form HC1 which should be held by hospitals and can be obtained from the Pension Service or any local Social Security Office or Jobs and Benefit office.

Contractual and financial arrangements

38. Provider units are responsible for administering the HTCS and for making payments to patients. HPSS Trusts are responsible for reimbursing provider units for the payments made under the Scheme to all patients who are resident in their districts.

Arrangements should be made for provider units to claim reimbursement from HPSS Trusts at periodic intervals (for example, at the end of each quarter). The

procedures for processing such claims (including any attendant documentation) should be agreed locally.

39. GP practices are not funded for the HTCS. Provider units should reclaim the cost of any payments for directly referred patients from the relevant HPSS Trust.
40. Where patients are referred to a non-HPSS hospital (private, voluntary or Ministry of Defence) by an HPSS consultant or HPSS Trust consultant:
 - the referring unit should pay any HTCS costs that are claimed by the patient and seek reimbursement from the relevant HPSS Trust, or
 - the HPSS Trust should arrange to make these payments direct.

Contacts

For further general scheme and entitlement advice please contact the Benefit Shop on 028 9033 6958.

Frequently asked Questions

- Q. *The NHS have given me the choice of receiving treatment in another country as the waiting list there is shorter, can I claim under the HTCS?*
- A. Yes, providing you are in receipt of one of the qualifying benefits or have been awarded either a HC2 or HC3 certificate. You can claim under the HTCS for travel costs incurred in getting from your home to the port. Your local HPSS Trust will be responsible for the other transport costs.
- Q. *I used to be able to claim under HTCS for my visits to the physiotherapist, but she has moved from the hospital to a community care and treatment centre. Can I still claim?*
- A. You can only claim under HTCS if you are in receipt of one of the qualifying benefits, HC2 or HC3 certificate and you are under the care of an HPSS consultant.
- Q. *Can I claim under the HTCS for a visit for to the dentist?*
- A. No, you must be either attending a hospital or HPSS organisation under the care of a HPSS consultant.
- Q. *Will I be able to claim under HTCS if in the future I choose to attend a Diagnostic and Treatment Centre?*
- A. Yes, providing you are in receipt of one of the qualifying benefits or have been awarded either a HC2 or HC3 certificate. Contact your local HPSS Trust for further details.
- Q. *I am a HPSS patient attending a non-HPSS hospital, can I still claim under the HTCS?*

- A. Yes, providing you are in receipt of one of the qualifying benefits or have been awarded either a HC2 or HC3 certificate. Contact your local HPSS for further details.
- Q. *My husband is in hospital, can I claim under the HTCS for my visits?*
- A. Unfortunately the HTCS does not apply to visitors.
- Q. *My premature baby is still in hospital, I need to visit every day to feed him. Can I claim under the HTCS?*
- A. Whilst the HTCS does not apply to visitors, the hospital should be asked if it has alternative arrangements in place for situations such as a mother visiting a child/baby.
- Q. *I live in a rural area, if I was to use public transport I would not get to the hospital in time for my appointment. Can I get a taxi and claim back the cost through the HTCS?*
- A. Yes, providing you are in receipt of one of the qualifying benefits or have been awarded either a HC2 or HC3 certificate and there is no other suitable means of transport.
- Q. *I have chosen to take an outpatient's appointment at a hospital in a neighbouring city, I intend to use the train to get there, my wife will be coming with me. Can I claim under the HTCS for her train fare as well as my own?*
- A. Yes, you can claim under the HTCS providing you are in receipt of one of the qualifying benefits or have been awarded either a HC2 or HC3 certificate. However you will only be able to claim the cost of your wife's fares if you have a medical need (approved by a medical practitioner) for an escort.
- Q. *I have recently claimed a reimbursement under HTCS, I travelled in my own car and I was only reimbursed at a rate of 15p per mile. Is this correct?*

- A. Just as fuel costs vary throughout the country, fuel reimbursement rates will vary and actual rates will be determined by the local trust.
- Q. *I have an outpatient's appointment at the hospital, my GP has arranged a hospital car to take me to the hospital and take me home. I have had a bad experience of using the hospital car in the past. So I have cancelled it for this time, I propose to use a taxi instead. Can I claim under the HTCS?*
- A. If hospital transport has been offered to you on the basis of your medical need, you are unable to claim under the HTCS, though previous dissatisfaction should be taken-up with the hospital concerned.