**HOSPITAL TRAVEL COST SCHEME (HTCS) GUIDANCE NOTES**

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<td>Head of Financial Accounts</td>
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**POLICY SUMMARY**

Procedure outlines who is eligible to apply for assistance with travel costs to hospital and the evidence which clients are required to show to Trust staff prior to reimbursement being made.

Claims should be made on a HTCS form which is controlled stationery and available upon request from the finance department.

The Trust Monitors the implementation of and compliance with this policy in the following ways:

- **Internal Audit**

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The Director responsible for monitoring and reviewing this policy is Executive Chief Finance Officer.
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APPENDICES

APPENDIX A – TRAVEL CLAIM FORM (EXAMPLE)
1.0 INTRODUCTION

1.1 Most travel to hospital for care is either via ambulance or private/public transport at the client’s expense. However, there is a scheme – the Hospital Travel Cost Scheme, part of the NHS Low Income Scheme, that provides financial help for NHS in/out patients who are not eligible for free NHS transport through PTS or who are receiving NHS treatment at non-NHS hospitals or clinics under the care of an NHS consultant. This help is linked to eligibility to benefits. It should be noted that the Hospital Travel Cost Scheme is a solely NHS operated scheme.

For the avoidance of doubt, this procedure refers to a number of key staff within the Finance Department for the completion of a range of tasks. In the absence of these staff, the tasks will be undertaken by covering members of staff. In the event there are no suitable staff to cover the identified task, the decision will be referred to either the Deputy Chief Finance Officer or the Head of Financial Accounts / Financial Management.

2.0 APPLYING THE SCHEME

2.1 The scheme applies to those:

(i) patients in receipt of Universal Credit, Income Support, Income Based Employment and Support Allowance, Income Based Jobseeker’s Allowance, Employment and Support Allowance (ESA), Pension Credit, Guarantee Credit, Working Tax Credit (WTC), an NHS Tax Credit Exception Certificate and/or Child Tax Credit (CTC)
(ii) Persons living permanently in a care home or accommodation provided by a local authority
(iii) Asylum seekers for whom support is provided under Part VI of the Immigration and Asylum Act 1999
(iv) Children of 16 or 17 being supported by a local authority
(v) patients not automatically entitled to a refund but on low income;
(vi) patients receiving WTC with a disability element shown on the award or CTC and are not eligible for WTC;
(vii) patients claiming but not yet assessed for low income help;
(viii) travelling expenses of patients’ escorts.

2.2 Information should be made available to clients on the scheme by way of posters and leaflets. The Trust is also required to hold copies of forms HC1, HC2, HC3, HC5 and leaflet HC11.

2.3 HTCS Claim Forms are controlled stationery and are available from the Finance department. A model form is enclosed at Appendix A but this should not be reproduced for use.
3.0 ELIGIBILITY

3.1 The following cover those eligible for support under the scheme. The notes set out the check process required.

3.2 Patients in receipt of Universal Credit, Pension/Reinstate Credit, Income Support, Income Based Employment and Support Allowance (ESA), Income Based Jobseeker’s Allowance, Working Tax Credit and/or Child Tax Credit.

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

(i) Patients who get Pension/Guarantee Credit should present the award letter as proof of entitlement.

(ii) Patients who get Income Based Employment and Support Allowances (ESA) or Universal Credit should be able to present either the award letter from their Jobcentre Plus Office confirming their receipt of ESA(IB), or any official correspondence that indicates entitlement to the named benefit on the day of the appointment and dated within a 12 month period of the appointment.

(iii) Patients who get Income Based Jobseekers Allowance JSA(IB) Should be able to present either the award letter from their Jobcentre Plus Office confirming their receipt of JSA(IB), or any official correspondence that indicates entitlement to the named benefit on the day of the appointment and dated within a 12 month period of the appointment.

(iv) 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 below a nationally determined level – 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 Tax Credit Exemption Certificate showing they are entitled to help with health costs. If the patient does not possess an Exemption Certificate they should be handed leaflet HC11, a supply of which should be available. (Until they get their exemption certificate, they can use the tax credit award notice as evidence of entitlement as above.)

3.3 Patients living permanently in a care home or accommodation provided by a local authority

Patients should present an official letter from the local authority confirming their status as at the date the travel for healthcare was undertaken.
3.4 **Asylum seekers for whom support is provided under Part VI of the Immigration and Asylum Act 1999**

Patients should present an official letter from the Home Office confirming their status as an asylum seeker being supported under the 1999 Act as at the date the date for healthcare was undertaken; or a valid HC2 or HC3 certificate.

3.5 **Children of 16 or 17 being supported by a local authority**

Patients/guardians should present an official letter from the local authority confirming their status as at the date the travel for healthcare services was undertaken.

3.6 **Patients not automatically entitled to a refund but on low income.**

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 NHS charges, is carried out by Patient Services of the Prescription Pricing Authority – at Sandyford House, Newcastle Upon Tyne, NE2 1DB. 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. HC11, HC1 and HC5 may all be ordered on 08701 555 455 and hospitals should hold stocks to give to patients. HC11 is also at [https://www.nhs.uk/using-the-nhs/help-with-health-costs/](https://www.nhs.uk/using-the-nhs/help-with-health-costs/).

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 their savings are in excess of the limit £8,000 (£12,000 if aged 60 and over), otherwise, they will be sent a certificate showing how much they have to pay for their travel per week. They will be entitled to a refund of anything in excess of the amount shown. Certificates show how long they last for, usually 12 months.

3.7 **Patients assessed as eligible for low income and holding a current entitlement certificate.**

Those assessed as eligible for help on low income grounds will receive a certificate from Patient Services. Patients claiming low income entitlement should be able to produce either of these forms:

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.

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 patients is expected to meet in any one week (7 days starting midnight Saturday).

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 form HC5 to claim a refund.

3.8 Patients claiming but not yet assessed for low income help

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 Patient Services with a completed form HC5.

Patients who have claimed but not received a certificate should be given refund claim form HC5 that they should send to the Patient Services. Patients are asked to include their hospital number, the department attended and the full name, address and phone number of the hospital. They may need advice about this. Patients should be advised that the claim for a refund has to be received by Patient Services or other office shown on the HC5, within 3 months of the date of travel.

Patient Services will carry out the assessment and if the patient is entitled to a refund for journeys already made, Patient Services will send the completed form HC5, confirming entitlement, to the hospital who should pay the patient. 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 Patient Services will also 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 of 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 their certificate says they have to contribute.

3.9 Travelling expenses of patients’ escorts

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.
4.0 RETROSPECTIVE CLAIMS

4.1 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 all Income Support, Income Based Jobseeker’s Allowance, Employment and Support Allowance, Pension Guarantee Credit, Working Tax Credit, Universal Credit and/or Child Tax Credit or Low Income Scheme eligibility that cover the date of travel can be taken into account.

4.2 Where patients wish to make retrospective claims for travelling 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 Job Centre Plus office in the case of Income Support, Income Based Employment and Support Allowance and Income Based Jobseeker’s Allowance recipients;
- Patient Services for Working Tax Credit and Child Tax Credit recipients. Patient Services 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, or
- Patient Services – in the case of those who are entitled to help under the low income support scheme.

5.0 OTHER CATEGORIES INCLUDED UNDER HTCS – SPECIAL CASES

5.1 The following categories of NHS 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 dependents in a family which is entitled to assistance under the HTCS scheme;
- NHS 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 NHS hospital patients;
- Patients attending for NHS treatment at non-NHS establishments (e.g. those with contractual arrangements with a CCG or NHS Trust to provide treatment for NHS patients) – help is on exactly the same basis as if the patient had attended an NHS establishment, but CCG or referring units will need to make arrangements to pay these patients direct;
- Isles of Scilly residents – in addition to those entitled to full or partial reimbursement under the HTCS, others who travel to the mainland from the
Isles of Scilly for treatment are entitled to have their travel costs refunded beyond the first £5, or the actual amount shown on an HC3 if less.

### 6.0 WAR DISABLEMENT PENSIONERS – SPECIAL ARRANGEMENTS

6.1 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.

6.2 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.

6.3 There are also special arrangements for the payment of travelling expenses, subsistence and loss of earnings allowances to War Disablement Pensioners attending a hospital or centre for the provision or maintenance of appliances (e.g. artificial limbs, wheelchairs, etc.) – separate guidance will be issued on these arrangements.

6.4 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.

### 7.0 PEOPLE NOT ELIGIBLE FOR HTCS HELP

7.1 The HTCS arrangements do not apply to patients for whom NHS 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:

7.2 **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.

7.3 **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 NHS hospital consultant should be regarded as part of the 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 the treatment costs. Patients who take leave from hospital at their own request cannot be helped with their travel costs.
7.4 **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 the local Job Centre Plus office and to ask for an application form SF300.

7.5 **War Pensioners and approved escorts attending a hospital, limb fitting centre or Disability Service Centre for anything other than the supply or maintenance of a wheelchair or artificial limb, or attending a hospital, clinic or other place of treatment for approved NHS outpatient treatment for their accepted disablements.** In such cases the patient should contact the Service Personnel & Veterans Agency on 0800 169 2277.

War pensioners attending a Disability Service Centre or Artificial Limb and Appliance Centre for the provision of artificial limbs/wheelchairs are eligible to claim their travel costs under HTCS.

### 8.0 PROCEDURES FOR REIMBURSING CLAIMS

**8.1 General**

Provider units should have adequate arrangements for:

- informing all NHS patients of their entitlements;
- checking the appropriate travel costs; and
- refunding to patients the travel costs to which they are entitled.

In- or out-patients 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.

**8.2 Calculation of travel costs**

Appropriate travel costs should be calculated on the basis of the cheapest form of public transport (including any promotional or concessionary fares) available to the patient. Patients travelling by private car may claim the lesser of:

- the estimated cost of fuel actually used (see sample spreadsheet on website), or
- the equivalent public transport cost

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 for the whole or part of their journey. In such exceptional cases these costs must be reimbursed. 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.

8.3 Concessionary fares schemes

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.

8.4 Payment Arrangements

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

8.5 Payments in advance

Local Job Centre Plus 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 payment 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.

8.6 Fraudulent claims

Hospital staff administering the HTCS particularly those in Out-patient Departments, should be on their guard against the possibility of fraudulent claims.

9.0 OVERNIGHT STAY COSTS

9.1 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.

9.2 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.