Health Benefit - Leaflet HB2

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What is Health Benefit?

Health Benefit is the name given to grants paid towards the cost of medical consultations. The grants apply to consultations with an approved doctor in the surgery, at home, in the Primary Care Centre and A & E at the Princess Elizabeth Hospital. Grants are also available for consultations with an approved nurse in the surgery.

Leaflet 50 (Social Insurance: Benefit Payment and Contribution Rates) shows the current level of the grants.

Who is entitled to Health Benefit?

Everyone who normally lives in Guernsey, Alderney, Herm or Jethou and has been registered for the payment of Contributions at Guernsey Social Security is covered. Children, including babies are covered if they normally live in Guernsey, Alderney, Herm or Jethou and at least one parent or other adult with whom the child normally lives is registered for the payment of Contributions.

To be able to claim Health Benefit, every member of your household <u>must have his</u> or her own Health Benefit Card.

Note: Sark residents are not entitled to Health Benefit.

How do I get a Health Benefit Card?

You get your card by registering for the payment of Contributions at the Social Security Department or the States Office, Alderney. You can obtain a card for a child or baby by completing form FAM12 which is available from both offices. This form also includes the application for Family Allowance.

Your card will be plastic and similar in size to a credit card. It will show your name, social security number, sex and date of birth.

Applications for Health Benefit Cards for children under the age of 16 can be made by a parent or other adult with whom the child lives.

How do I claim Health Benefit?

There are two ways of claiming Health Benefit.

The easiest way to claim is by signing a form at the surgery, Primary Care Centre or A & E when you have your consultation. By doing this, you claim benefit and request the Social Security Department to pay your benefit direct to the practice.

This means that you pay the surgery the amount of the doctor's consultation fee LESS the amount of the grant.

Similarly, when the doctor visits you at home you can sign a form to claim the grant. If you are too ill to sign the form, or the patient is a child, another member of the household should sign the claim form.

You will only be able to claim your grant in the way described above if the doctor knows that you are entitled to benefit. You should therefore make sure that you have your Health Benefit Card with you when you see the doctor.

If you cannot show that you are entitled to Health Benefit, you will have to pay the full cost of your consultation and then reclaim the grant if you are entitled to one.

If you have paid the full cost of your consultation you can claim the grant from the Social Security Department as follows:

- 1. Obtain a receipted account from your doctor showing:
 - a. The name of your medical practice
 - b. The date(s) of your consultations(s)
 - c. Where each consultation took place home, surgery, Primary Care Centre or A & E
 - d. Which doctor(s) or nurse(s) you saw.

AND

2. Complete form HB10 which can be obtained from the Social Security Department.

AND

3. Send the original receipted account (photocopies will not be accepted) and the completed claim form to the Social Security Department.

Do not delay in making your claim. If you do not claim within six months of the consultation benefit cannot be paid unless good cause for the delay is shown.

How will the benefit be paid?

If you make your claim by signing the form in the surgery, Primary Care Centre, A & E or when the doctor visits you the grant will be paid directly to the practice. The amount of the grant will be deducted from the account you receive from the surgery.

If you pay the full cost of the consultation and then claim the grant from the Social Security Department the money will be paid directly into your bank account. You will be informed in writing of the amount of any benefit due to you.

Are claims ever disallowed?

Yes. If your claim is not paid, it may be for one of the following reasons:

- Your consultation took place in hospital (but not in the Primary Care Centre or A & E) or at the Medical Specialist Group premises, where the grants do not apply.
- You do not normally live in Guernsey, Alderney, Herm or Jethou.
- You have not registered for the payment of Contributions.
- Your consultation was not for a medical purpose.

- Your consultation was with a doctor or nurse who has not been approved by the Health and Social Services Department.
- Your consultation with a nurse did not take place in a surgery.
- Your claim was submitted more than six months after the consultation took place and good cause for the delay has not been shown.

If you do not understand why your claim has not been accepted, you can ask for further information by telephoning the Social Security Department on 732500 and asking for the Health Benefit Section.

If you are not satisfied with a decision on entitlement to Health Benefit then you can appeal. There is a time limit of 28 days for making an appeal. The form you need is available from this office upon request.

What is an "approved doctor" or "approved nurse"?

An approved doctor or approved nurse is one whose name is included in lists maintained by the Health and Social Services Department as specified in The Health Service (Benefit) (Guernsey) Law, 1990.

Most doctors and nurses working in Guernsey and Alderney surgeries will be approved, but if you are not sure, you can check with the Health and Social Services Department.

If you have a consultation with a doctor or nurse who is not approved, no Health Benefit can be paid. Furthermore, if that doctor prescribes drugs, medicines or medical appliances, you will have to pay the full retail price for them, since they will not be dispensed under the Pharmaceutical Scheme.

Will Health Benefit cover all my medical costs?

No, it won't. The benefit is intended to be a part-payment towards the charge for consultations in the surgery, Primary Care Centre, A & E or at home. The remainder of your doctor's account must be paid by you, by a private medical scheme, or by another States scheme - provided you are eligible.

I have private medical insurance - should I claim Health Benefit?

Yes, you are strongly advised to claim Health Benefit even though you have private insurance.

Your particular Friendly Society or Private Health Insurer will expect you to claim the grant, and takes this into account in deciding the extent of your cover.

My doctor's bills are covered by Supplementary Benefit - do I have to claim Health Benefit?

Yes, you **must** claim Health Benefit, even if your doctor's bills are covered by Supplementary Benefit.

Make sure you sign the form at the surgery, Primary Care Centre, A & E or at home at every consultation.

I am claiming Industrial Medical Benefit - should I claim Health Benefit as well?

Yes, you are strongly advised to claim Health Benefit whenever you are entitled to do so, even though you intend claiming Industrial Medical Benefit (IMB). (IMB applies to people who are insured under the Social Insurance (Guernsey) Law, 1978 and suffer personal injury as the result of an accident at work.)

In deciding how much to pay by way of Industrial Medical Benefit the Department will take into account the availability of Health Benefit.

Make sure you sign the form at the surgery, Primary Care Centre, A & E or at home at every consultation.

More details about Industrial Medical Benefit can be found in Leaflet 6. Rates of Benefit payable are found in Leaflet 50.

Suppose I have trouble paying the remainder of my doctor's bill?

If you have trouble paying your medical bills the Social Security Department may be able to assist you. The Medical Expenses Assistance Scheme (MEAS) is a means tested benefit where help is available at the discretion of the Department.

In addition, if you think that your income is not enough to live on you may be able to apply for Supplementary Benefit. If you are entitled to Supplementary Benefit help may also be available with your medical costs.

If you want to know more about MEAS or Supplementary Benefit, please call the Supplementary Benefit Section helpline on 732508.

Further information

If you are unsure of the meaning of any particular point in this leaflet, please telephone or call into the Guernsey office (and ask for the Health Benefit Section), or the States Office, Alderney. The staff will be pleased to help you.

How we collect and use information

The Social Security Department collects personal information for social security purposes in accordance with the six laws which it administers. The information collected will depend on your business with us but will be no more than is required for that purpose and will not be further disclosed except as permitted by law. The Department complies with its legal duty under the Data Protection (Bailiwick of Guernsey) Law and is the Data Controller for the purpose of that law. If you wish to know more about the information we have about you or about the way we use it you can ask at the Social Security office.

What to do if you have a complaint

If you are dissatisfied with any aspect of our services please let a member of staff know at the time so that we can try and resolve the issue immediately. If you wish to make a formal complaint to the Department please contact us and ask for a complaints leaflet or download a leaflet from the States website at www.gov.gg (follow the links to 'Social Security' 'Customer Complaints') and return the completed complaints form to the Chief Officer, Social Security Department, Edward T. Wheadon House, Le Truchot, St Peter Port, Guernsey, GY1 3WH. Alternatively you can scan and email the completed form to us at ssd-complaints@gov.gg. A senior officer will then investigate your complaint in accordance with the Department's Complaints Policy.