
EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations implement in Northern Ireland provisions of Directive 2011/24/EU of the European Parliament and of the Council of 9th March 2011 on the application of patients' rights in cross-border healthcare ("the Directive").

Regulation 3 requires the Department to designate a suitable person or body as the National Contact Point.

Regulation 4 requires the national contact point to make specified information available or accessible to patients from other member States seeking to access health care in Northern Ireland ("visiting patients").

Regulation 5 requires the national contact point to make specified information about rights and entitlements to obtain a health care service in another member State available or accessible to patients in Northern Ireland ("resident patients").

Regulation 6 requires the national contact point to cooperate with other national contact points and the Commission of the European Union. Regulation 7 requires the national contact points to consult organisations representing patients, health providers and insurers.

Regulation 8 amends the Health and Personal Social Services (Northern Ireland) Order 1972, ("the Order of 1972") by inserting new Articles 14D and 14E.

The new Article 14D sets out the conditions for reimbursement for qualifying EEA expenditure (defined in paragraph (4)) incurred on or after 27th December 2013, the services subject to the condition of prior authorisation, the limitations that may be imposed on the reimbursement and the health care charges that may be deducted if the same service had been made available by the Department. Paragraph (14) provides that Article 14D does not apply where expenditure is incurred on the provision of a service provided by an authorised provider in Iceland, Liechtenstein or Norway before the Directive 2011/24 EU applies to those States in accordance with the EEA Agreement. The new Article 14E provides for an application for prior authorisation and sets out when authorisation must be granted and when it may be refused.

Regulation 9 amends the regulation making power in Article 45(1)(a) of the Order of 1972 in respect of travelling expenses for patients.

Regulation 10 requires the Board to ensure that information about their rights and entitlements is available to resident patients.

Regulation 11 makes provision that the amount of the charge for certain health care services provided to a visiting patient must not exceed the amount of the cost of providing the service to a resident patient.

Regulations 12 implements Article 7(2)(b) of the Directive by providing an exemption from charges for health care provided to a person who is an insured person or a family member of an insured person, for whom the UK is the competent member State under Regulation (EC) No 883/2004 of the European Parliament and of the Council of 29 April 2004 on the coordination of social security systems, and who is resident in another member State. The exemption does not apply to a health care service that falls within Article 14D (6) of the Order of 1972 as a service that is subject to the condition of prior authorisation.

A Transposition Note has been prepared for these Regulations and is published with the Explanatory Memorandum alongside the Statutory Rule on the Departmental website.