

1988 No. 472

**THE NATIONAL HEALTH SERVICE, ENGLAND  
AND WALES**

**The National Health Service (Charges to Overseas  
Visitors) Amendment (No. 2) Regulations 1988**

<i>Made</i> - - - -	<i>8th March 1988</i>
<i>Laid before Parliament</i>	<i>11th March 1988</i>
<i>Coming into force</i> -	<i>1st April 1988</i>

The Secretary of State for Social Services, in exercise of powers conferred on him by section 121 of the National Health Service Act 1977(a) and of all other powers enabling him in that behalf, hereby makes the following Regulations:—

**Citation, commencement and interpretation**

1.—(1) These Regulations may be cited as the National Health Service (Charges to Overseas Visitors) Amendment (No. 2) Regulations 1988 and shall come into force on 1st April 1988.

(2) In these Regulations “the principal Regulations” means the National Health Service (Charges to Overseas Visitors) (No. 2) Regulations 1982(b).

**Amendment of principal Regulations**

2.—(1) The principal Regulations shall be amended in accordance with the following paragraphs of this regulation.

(2) In regulation 2—

(a) for paragraph (3) there shall be substituted the following—

“(3) Where the services forming part of the health service are provided for an overseas visitor, otherwise than as an in-patient of a health service hospital, at, or by staff employed to work at or under the direction of a hospital of any class, there shall be made and recovered, in respect of each occasion on which such services are provided, a charge the amount of which shall be—

(a) except where it falls to be determined under sub-paragraph (b) below, the sum specified in the column of Schedule 3 covering the class of hospital in which that hospital is included opposite the entry in Column 1 of that Schedule which relates to the services provided;

(b) in the case of the procedures to which paragraph 5(i) of Schedule 3 relates, the sum determined by multiplying the number of unit values, specified in Schedule 4 for the group into which the relevant procedure falls, by the appropriate unit charge specified against paragraph 5(i) in

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(a) 1977 c.49; see section 128(1) for the definitions of “prescribed” and “regulations”.

(b) S.I. 1982/863; relevant amending instruments are S.I. 1983/302, 1984/300, 1987/371, and 1988/8.

the column of Schedule 3 covering the class of hospital in which that hospital is included.”

(b) After paragraph (4) there shall be added the following paragraph—

“(5) For the purposes of paragraph (2) and Schedule 2, a “single room” means a room used for the accommodation of one patient only, such room having a floor area of not less than 10 square metres (or 8 square metres where a room is for the accommodation of a child under the age of 10 years) and being completely enclosed by walls or partitions and doors and having been decorated within the previous 7 years.”

(3) For Schedule 2 (daily charges for services provided for overseas visitors as in-patients) there shall be substituted the Schedule set out as Schedule 1 to these Regulations.

(4) For Schedule 3 (charges for services provided for overseas visitors otherwise than as in-patients) there shall be substituted the Schedule set out as Schedule 2 to these Regulations.

(5) For Schedule 4 (units of cost value for purpose of determining charges for radiodiagnosis examination procedures) there shall be substituted the Schedule set out as Schedule 3 to these Regulations.

### **Revocations**

3. The following Regulations are hereby revoked:—

- (a) The National Health Service (Charges to Overseas Visitors) Amendment Regulations 1983(a), regulations 2 and 5;
- (b) The National Health Service (Charges to Overseas Visitors) Amendment Regulations 1987(b), regulation 2(3) and (4) and Schedules 1 and 2;
- (c) The National Health Service (Charges to Overseas Visitors) Amendment Regulations 1988(c), regulation 2(3).

Signed by authority of the Secretary of State for Social Services.

8th March 1988

*Tony Newton*  
Minister of State, Department of Health and Social Security

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(a) S.I. 1983/302.  
(b) S.I. 1987/371.  
(c) S.I. 1988/8.

**SCHEDULE 1**

Regulation 2(3)

**SCHEDULE 2 TO THE PRINCIPAL REGULATIONS AS SUBSTITUTED BY THESE REGULATIONS**

**“SCHEDULE 2**

Regulation 2(2)

**DAILY CHARGES FOR SERVICES PROVIDED FOR OVERSEAS VISITORS AS IN-PATIENTS**

(1)	(2)	(3)
<i>Class of hospital in which services are provided</i>	<i>Single Room</i>	<i>Other Accommodation</i>
	£	£
Class A (Long-Stay Hospitals)	93	84
Class B (Psychiatric Hospitals)	85	77
Class C1 (Mainly acute and other hospitals in non-teaching districts)	149	136
Class C2 (Acute and other hospitals in non-teaching districts)	170	154
Class D (Hospitals in London teaching districts (other than hospitals in Classes A and B))	231	210
Class E (Hospitals in provincial teaching districts (other than hospitals in Classes A and B))	185	168
Class F (London Postgraduate Teaching hospitals managed by Special Health Authorities except the Hospitals for Sick Children and the National Heart and Chest Hospitals)	253	230
Class G (The Hospitals for Sick Children and the National Heart and Chest Hospitals)”	392	357

**SCHEDULE 2**

Regulation 2(4)

**SCHEDULE 3 TO THE PRINCIPAL REGULATIONS AS SUBSTITUTED BY THESE REGULATIONS**

**“SCHEDULE 3**

Regulation 2(3)

**CHARGES FOR SERVICES PROVIDED FOR OVERSEAS VISITORS OTHERWISE THAN AS IN-PATIENTS**

(1)	(2)	(3)
<i>Services Provided</i>	<i>Hospital Class A-E</i>	<i>Hospital Class F and G</i>
	£	£
1. For a patient on each attendance at a hospital other than attendances directly associated with the procedures listed in paragraphs 4-12 below.	14.50	21.50

(1)	(2)	(3)
<i>Services Provided</i>	<i>Hospital Class A-E</i>	<i>Hospital Class F and G</i>
	£	£
<b>DAY CASES</b>		
2. Charges per day exclusive of charges for procedures listed in paragraphs 4-12 below. For the purpose of this item a day case is a patient who attends as a non-resident patient for investigation, treatment or operation and who occupies a bed without staying overnight.	28.50	29.50
<b>DAY PATIENTS</b>		
3. Charges per day exclusive of charges for procedures listed in paragraphs 4-12 below. For the purpose of this item a day patient is someone who attends regularly for a course of treatment without necessarily occupying a bed or staying overnight.	34.00	35.00
<b>PATHOLOGY</b>		
4. For each request.	7.50	15.00
<b>RADIODIAGNOSIS, NUCLEAR MEDICINE AND ULTRASOUND</b>		
5. i. For each procedure listed in Schedule 4 (charge per unit value).	6.50 per unit for the first 6 units, 1.00 per unit thereafter.	9.00 per unit for the first 6 units, 1.25 per unit thereafter.
ii. C.T. Scanning. For all scans.	96.00	115.00
<b>RADIOTHERAPY</b>		
6. For treatment in any one day:	18.00	44.50
<b>PHYSIOTHERAPY AND REMEDIAL GYMNASTICS</b>		
7. Per attendance	5.50	11.50
<b>OCCUPATIONAL THERAPY</b>		
8. For treatment in any one day	8.50	10.00
<b>OTHER DIAGNOSTIC PROCEDURES</b>		
9. i. Audiometry.	5.00	5.00
ii. Electrocardiography. For each testing session.	9.50	17.50
iii. Electroencephalography. For each testing session.	38.50	83.50
iv. Electromyography. For each testing session.	24.00	50.50
<b>USE OF OPERATING THEATRE FACILITIES</b>		
10. Operating theatre facilities booked as required:		
i. For less than 10 minutes.	22.50	28.00
ii. For 10 minutes to 30 minutes.	44.00	56.00
iii. For more than 30 minutes.	67.00	84.00

(1)	(2)	(3)
<i>Services Provided</i>	<i>Hospital Class A-E</i>	<i>Hospital Class F and G</i>
	£	£
<b>DIALYSIS</b>		
11. For haemodialysis or intermittent peritoneal dialysis:		
i. With training or routine at a hospital per session.	111.00	111.00
ii. Routine, at home – per session	70.50	70.50
iii. Minimal Care Unit – per session	90.50	90.50
For continuous ambulatory peritoneal dialysis (including continuous cycling peritoneal dialysis) – per day.	33.50	33.50
<b>SUPPLY OF DRUGS AND MEDICINES</b>		
12. For the supply of a drug or medicine which is designed to eliminate, prevent the replication of, or in any way inhibit the mode of action of any Human Immunodeficiency Virus—for each quantity sufficient for one day's treatment."	14.50	14.50

### SCHEDULE 3

Regulation 2(5)

### SCHEDULE 4 TO THE PRINCIPAL REGULATIONS AS SUBSTITUTED BY THESE REGULATIONS

### "SCHEDULE 4

Regulation 2(3)

### UNIT VALUES FOR PURPOSE OF DETERMINING CHARGES FOR RADIOLOGICAL PROCEDURES

*Group A:* 1 unit value for each procedure

Abdomen erect and/or supine  
 Acromio-clavicular joint(s)  
 Ankle  
 Chest PA and/or lateral and/or obliques and/or rib views  
 Clavicle  
 Elbow  
 Femur  
 Finger or fingers of one hand  
 Foot  
 Foreign body demonstration  
 Hand  
 Hip  
 Humerus  
 Knee  
 Larynx  
 Localisation of treatment field  
 Mandible  
 Nasal bones  
 Calcaneum  
 Patella  
 Pathological specimen  
 Pelvis  
 Hips and pelvis  
 Post-nasal space  
 Radius and ulna

Sacro-iliac joints  
Sacrum and/or coccyx  
Scapula  
Shoulder  
Sinuses and antra  
Sterno-clavicular joint  
Sternum  
Teeth  
Thoracic inlet  
Thumb  
Tibia and fibula  
Toe or toes of one foot  
Wrist  
Perineum  
Soft tissues of neck

*Group B: 2.5 unit values for each procedure*

Cholangiography, post-operative  
Cholecystography  
Facial bones and/or cephalometry  
Fluoroscopy with mobile image intensifier  
Mammography  
Mastoids  
Orthopaedic measurement  
Pelvimetry  
Pneumothorax, diagnostic  
Skull and/or pituitary fossa and/or optic foramina and/or internal auditory meati  
Small bowel biopsy  
Spine  
Lumbar spine  
Lumbo-sacral spine  
Lumbo-sacral spine and sacro-iliac joints  
Lumbo-sacral spine with obliques  
Cervical spine  
Cervical spine with obliques  
Cervical spine with obliques and flexion and extension views  
Lumbar spine and cervical spine on one patient  
Teeth, panoramic tomography  
Temporo-mandibular joints  
Ultrasound, all types  
Salivary glands  
Skeletal survey

*Group C: 6 unit values for each procedure*

Cholangiography, operative  
Cystography  
Cystometrography  
Cysto-urethrography  
Dacrocystography  
Endoscopy  
Foreign body localisation  
Gastro-intestinal tract, upper (includes examination to the mouth of the upper small bowel or any part thereof)  
Orthopaedic pinning  
Hysterosalpingography  
Intra-uterine transfusion  
Kidney, exposed  
Laryngography  
Mammary ductography  
Retrograde pyelography and/or ascending ureterography  
Sialography  
Sinography  
Tomography, as a separate examination  
Urethrography  
Cholangiography, infusion  
Cholangiography, intravenous

Gastro-intestinal tract, lower  
Pharyngography  
Fluoroscopy, other  
Computed tomography of the Head without contrast enhancement  
Computed tomography of the Head with contrast enhancement  
Computed tomography of the Neck without contrast enhancement  
Computed tomography of the Neck with contrast enhancement  
Computed tomography of the Thorax without contrast enhancement  
Computed tomography of the Thorax with contrast enhancement  
Computed tomography of the Abdomen without contrast enhancement  
Computed tomography of the Abdomen with contrast enhancement  
Computed tomography of the Pelvis without contrast enhancement  
Computed tomography of the Pelvis with contrast enhancement  
Computed tomography of a Limb without contrast enhancement  
Computed tomography of a Limb with contrast enhancement  
Computed tomography of the Spine without contrast enhancement  
Computed tomography of the Spine with contrast enhancement

*Group D: 12 Unit vales for each procedure*

Aminigraphy  
Arthrography  
Biopsy and/or aspiration under imaging control (includes Amniocentesis including ultra-  
sound examination before and after the procedure)  
Bronchography  
Cholangiography, percutaneous  
Excretion urography  
Gastro-intestinal tract, upper including small bowel  
Gynaecography  
Stereotaxis  
Nerve injection under imaging control  
Ventriculography  
Nephrostogram, post operative  
Antegrade pyelography

*Group E: 30 Unit values for each procedure*

Aortography  
Bile duct, external drainage  
Cardiac catheterisation without angiocardiography  
Discography  
Insertion of pacemaker  
Lymphangiography  
Myelography  
Nephrostomy, percutaneous  
Phlebography  
Programmed stimulation study  
Retrograde cholangio-pancreatography  
Lumbar radiculography  
Meatography  
Shuntography

*Group F: 60 unit values for each procedure*

Angiocardiography  
Angioplasty, including angiography pre- and post-angioplasty  
Arteriography, all types  
Embolisation  
Encephalography  
Pituitary implant  
Magnetic resonance imaging  
Bile duct, internal drainage  
Bile duct, dilation of stricture  
Bile duct, stone extraction  
Kidney, stent insertion  
Kidney, stone extraction or destruction  
Dilatation of oesophageal stricture  
Dilatation of pyloric stenosis

Insertion of caval filters  
Management of varicocele  
Removal of intravascular foreign body  
Ablation of function of spleen  
Ablation of function of kidney  
Ablation of function of parathyroid  
Ablation of function of adrenal  
Cisternography"

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#### **EXPLANATORY NOTE**

*(This note is not part of the Regulations)*

These Regulations further amend the National Health Service (Charges to Overseas Visitors) (No. 2) Regulations 1982, their main effect being to increase the sums prescribed for charges to certain overseas visitors for services forming part of the health service.

Regulation 2 substitutes new Schedules of charges for overseas visitors, both as in-patients (the new Schedule 2) and otherwise (the new Schedule 3).

Regulation 2(5) substitutes a new Schedule 4 to the principal Regulations, by which radiological procedures are no longer allocated individual unit values. They are classified into six groups instead and unit values are specified for each group in ascending order. There is a higher charge per unit value for the first six units than for subsequent units.

Regulation 3 makes consequential revocations.

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