



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Medical Card/G.P. Visit Card National Assessment Guidelines

February 2015

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1 Preface

The HSE is committed to focusing on continuous quality improvement and ensuring a consistent approach to service delivery which includes facilitating and supporting access to services when a person needs them.

A key access point to our services is through the Medical Card and GP Visit Card Schemes ('the Schemes'). It is a statutory function of the HSE to decide on the entitlement to the Schemes and the HSE wants to ensure that every person who is entitled to the Schemes is given the opportunity to avail of their entitlement.

These assessment guidelines have been produced to provide a clear framework to assist in making reasonable, consistent and equitable decisions when assessing people who are applying for the Schemes. These guidelines will also facilitate with the application of discretion by decision makers in responding to the needs of the applicant when additional and/or exceptional circumstances exist.

2 Introduction

2.1 Medical Card Entitlement

Medical Card entitlement, as approved by the Health Service Executive, confirms that the person is entitled to a range of Health Services free of charge, which include:

- General Medical & Surgical Services, including all inpatient services and outpatient services in a public ward in a public hospital (including consultant services).
- Medical & Midwifery Care for Mothers and Infants
- A choice of General Medical Practitioner from those doctors who have a contract with the Health Service Executive
- Supply of prescribed approved medicines and appliances
- Dental, Ophthalmic, and Aural services
- A Maternity Cash Grant for each child born

2.2 GP Visit Card Entitlement

GP Visit Card entitlement can allow an individual and his/her dependants to visit their family doctor free of charge. Normal charges apply for all other services. A person qualifies in much the same way as for a Medical Card except that the Income Guidelines are currently 50% higher.

A person granted a GP Visit Card should also apply for a Drugs Payment Scheme Card if s/he does not already have one.

2.3 Who is entitled to a Medical Card?

Entitlement to a Medical Card is governed by legislation. In assessing eligibility for a Medical Card the HSE will have due regard for the legislation, regulations and relevant circulars from the Dept of Health.

Any person who is considered by the Health Service Executive to be "ordinarily resident" in the State is entitled to have their eligibility for Medical Card considered.

There are three main categories of people entitled to a Medical Card:

1. Applicants (and their dependants) whose assessable income comes within the relevant Income Guidelines set out in Appendix I.
2. Applicants (and their dependants) whose assessable income is in excess of the Income Guidelines but where the HSE considers that to refuse a Medical Card would cause undue hardship.
3. The following applicants are exempt from a means test : -

A person with EU entitlement.

Under EU Regulation people moving from one Member State to another Member State within the European Union “retain the rights and advantages acquired” through social insurance contribution made in their home country and this includes access to health services.

This is dealt with in detail in Section 5 of this document.

A person with retention entitlement under Government Schemes.

In certain circumstances people who have been in receipt of Social Welfare payments for specified times and who return to work or avail of Government approved schemes are allowed retain their Medical Card for specified periods. (this is dealt with in detail in Section 7).

A Person affected by the drug Thalidomide.

People who have been affected by the drug Thalidomide are eligible for a Medical Card regardless of their level of income/means.

A person affected by Symphysiotomy.

Survivors of Symphysiotomy are eligible for a Medical Card regardless of their level of income/means.

Note regarding entitlement for people aged 70 years and over:

From 1st January 2009 a separate scheme was put in place for the assessment of eligibility for people aged 70 years and over. In this regard legislation has been enacted and other guidelines (Medical Card National Assessment Guidelines for people aged 70 years and over) are available.

If an applicant does not qualify under the 'Over 70s Scheme' s/he may request that their eligibility be assessed for a Medical Card / GP Visit Card under the general Schemes.

People who contracted Hepatitis C/HIV from the use of Human Immunoglobulin-anti D blood products qualify for a Health Amendment Act Card that entitles them to the following services, free of charge:

- General practitioner services.
- Prescribed drugs and medicines and medical and surgical aids and appliances.
- Home nursing and home help services.
- Dental, ophthalmic and aural services and appliances.
- Physiotherapy services.
- Counselling services for both sufferer and family and
- Such other services as may be prescribed by the Minister for Health.

2.4 Who is entitled to a GP Visit Card?

Entitlement to a GP Visit Card is governed by legislation. In assessing eligibility for a GP Visit Card the HSE will have due regard for the legislation, regulations and relevant circulars from the Dept of Health.

A person will qualify for a GP Visit Card if his/her assessed means are within the GP Visit Card Income Guidelines set out in Appendix I and if s/he satisfies the criteria for being 'ordinarily resident' in the State.

Where the assessed means of the applicant are in excess of the GP Visit Card Income Guidelines, the HSE will issue a GP Visit Card where it is satisfied it would be unduly burdensome to arrange GP Services for the applicant and his/her dependents.

2.5 Who decides on an applicant's eligibility?

The Health Service Executive is responsible for determining an applicant's eligibility.

3 Income guidelines and additional allowances.

3.1 Income Guidelines

The Health Service Executive issues Income Guidelines to assist in determining entitlement to Medical Cards/GP Visit Cards. In revising the Income Guidelines, the Health Service Executive has regard to government policy as outlined by the Minister for Health, increases in the Consumer Price Index and to other issues which may be relevant. Current Income Guidelines are set out in Appendix I.

The assessment of eligibility for Medical Cards and GP Visit Cards is based on the combined income of the applicant and spouse or partner (if any) after tax, PRSI and USC have been deducted.

Where a person's assessable income is within the relevant Income Guidelines a Medical Card/GP Visit Card will be granted.

Where applicants incomes are in excess of the Income Guidelines, all social and medical issues will be taken into account in determining whether or not 'undue hardship' exists or whether it would be "unduly burdensome" for the applicants to provide general practitioner medical and surgical services for themselves and their dependants.

3.2 Additional Allowances

The Income Guidelines include basic weekly allowances having regard to the applicant's age, status and number of dependants. Additional allowances are available for necessary expenses incurred in respect of the following:

- Rent or Mortgage payments.
- Childcare costs.
- Travel to work costs.

3.2.1 Rent or Mortgage Repayments

Rent Costs

Outgoings in respect of rent costs are allowable provided that the rent paid is consistent with the market rent appropriate to the area and generally the accommodation is appropriate to the needs of applicant/ families.

Contributions towards household expenses by a family member living in the family home are not considered to be rent and are not allowable.

Mortgage Costs

Outgoings in respect of Mortgage Costs are allowable.

The assessment should allow the full weekly/monthly mortgage payment secured against the principal family home and the following outgoings:

- Mortgage protection premia.
- Life Assurance premia in relation to mortgage protection.
- Fire and contents insurance premia.

Evidence of payment of all of the above outgoings must be provided by the applicant to have them taken into the means assessment. Documentary evidence from the mortgage

provider as to the purpose of the mortgage/loan may be requested from the applicant from time to time.

If a Mortgage/Loan is in respect of 2nd house, holiday home abroad etc., then this should be allowed as set out above but the value of the property must be assessed.

3.2.2 Childcare Costs

Outgoings in respect of Childcare costs are allowable provided that the costs are necessarily incurred in taking up/continuing employment, education or training and in providing family supports.

A decision to allow childcare costs as an outgoing should only be taken after sufficient and reasoned assessment of all the circumstances of the case. The assessment should ensure that the costs claimed are reasonable, are being incurred and appropriate documentary evidence should be provided.

In deciding reasonable costs cognisance should be taken of local prevailing rates as set out in the local area. Due consideration should be given to the family size, age of the child and the type of care required e.g. full day care, seasonal care etc.

Please Note: The Early Childcare Supplement is to be disregarded in the Medical Card assessment process.

3.2.3 Travel to work costs

Outgoings in respect of travel costs to and from work are allowable. The full cost of public transport is allowed for travel to and from work. Where public transport is not available or suitable and a car is required, reasonable travel costs will be allowed as set out hereunder:

- 18c per km/30c per mile to cover running costs
- It should be noted that car pooling arrangements and any contribution towards costs should be taken into account
- In the case of a couple where they require two cars to travel to work and meet the

above requirements both sets of trips will be taken into account

- The rate per km/mile does not contain any element towards parking costs and where they are an issue they should be included on an actual cost basis.

When considering the above due regard should be taken of the following:

- The distance between the person's residence and work address.
- The contribution towards shared travel arrangements [contributions towards shared travel shall be allowed in full].
- Number of days worked per week.
- Is the car owned by applicant or a company car

4 Eligibility Assessment

4.1 Assessable Income- General

Income from all sources, with the exception of those set out in Section 4.2 (non Assessable Income) arising within the state or otherwise is assessable, including, but not limited to the following:

1. Income from an employment/self employment, trade, profession or vocation.
2. Income from savings and similar investments above specified limits.
3. Payments in respect of Maintenance received.
4. Rental income whether arising in the State or otherwise.
5. Income from holding of an office or directorship e.g. member of a Board for which he/she receives a payment other than expenses.
6. Income from fees, commissions.
7. Payments under a settlement, covenant or from an estate.
8. Income from royalties and annuities.

The assessment is based on the Gross Income, less Income Tax, PRSI Contributions and USC, of the applicant and spouse. The resulting income is then compared to the

appropriate Medical Card/ GP Visit Card Income Guidelines for the particular family size.

When carrying out a means assessment the decision maker will assess the persons current average weekly earnings, usually evidenced by way of current payslip or a current income statement. However, if the persons current income does not reflect his/her general financial position going forward, the HSE will work out an appropriate average income which will reflect the persons circumstances.

4.1.1 Savings/Investments

Savings or similar investments up to €36,000 for a single person and €72,000 for a couple are disregarded.

- The first €36,000 of savings will be disregarded for a single person and the first €72,000 will be disregarded for a couple
- The next €10,000 @ one (€1) Euro per week per €1,000.
- The next €10,000 @ two (€2) Euro per week per €1,000.
- Savings in excess of the above @ four (€4) Euro per week per €1,000

Please note the following savings/investments are not assessable and shall be disregarded:

- Compensation awards to people who have contracted Hepatitis C or HIV from contaminated blood products, together with subsequent income from the investment of that money.
- Compensation awards by way of the Residential Institutions Redress Board established under section 3 of the Residential Institutions Redress Act, 2002 (No. 13 of 2002).
- Prescribed repayments made under Section 8 of the Health (Repayment Scheme) Act 2006 made:
 - o to a living person.
 - o to the spouse or former spouse of a living or deceased relevant person.
 - o directly to a living child of a relevant person by virtue of Section 9 (8).

- Ex- gratia payments approved by the Lourdes Hospital Redress Board under the terms of the Lourdes Hospital Redress Scheme 2007.

4.1.2 Property (other than family home)

Where land/buildings are leased to another person, the income to be assessed will be the gross income, less any cost necessarily incurred associated with the property and such cost may include insurance premiums, loan/mortgage repayments, maintenance etc.

Where land/buildings, which are not being used but are capable of being leased or sold then the following assessment options can be used, with the more beneficial option applying to the applicant:

- Notional assessment of the rental/lease “going rate” for the area.
- Assessment of capital value as set out below.

4.1.3 Assessment of Capital Value

The verified capital value of the property less any outstanding mortgage is assessed using the following formula:

- The first €36,000 of the property valuation will be disregarded for a single person and €72,000 for a couple will be disregarded.
- The next €10,000 @ one (€1) Euro per week per €1,000.
- The next €10,000 @ two (€2) Euro per week per €1,000.
- Property in excess of the above @ four (€4) Euro per week per €1,000.

Please Note: the disregard figure should only apply once where both Savings and Property are both being assessed.

4.2 Non Assessable Income- General

There are a number of incomes sources which are disregarded in assessing income:

- Foster Care Allowance
- Mobility Allowance
- Blind Welfare Allowance
- Supplementary Welfare Allowance - Supplements
- Family Income Supplement
- Child Benefit
- Carers Allowance
- Third Level Educational Maintenance Grants
- Rehabilitation Maintenance Allowance
- Earnings from employment of a Rehabilitative Nature. (up to €120.00 p/w)
- Free Fuel Allowance from DSFA
- Domiciliary Care Allowance.
- Island Allowance
- Living Alone Allowance payable by DSFA
- Over 80 Allowance payable by DSFA
- Early Childcare Supplement.
- Guardian Payments e.g. orphans pensions

Employed People

The assessable income of an employed person is taken as the average weekly gross earnings less PRSI Contributions, Income Tax payable and USC.

The documentation necessary to support the application and provide evidence of income is a current pay slip, and a P60 if considered necessary. In arriving at an assessable income the HSE may average income over a number of weeks by using a combination of pay slip and P60.

4.3 Self Employed

Assessable Income:

The assessable income of a self-employed person is determined as the average weekly Gross Income less Trade Capital Allowances. From this figure PRSI Contributions, Income Tax payable and the Income Levy are deducted .

Documentation:

The documentation necessary to support the application and provide evidence of income is the Notice of Assessment and the Revenue Commissioners Form 11. Self-employed people are obliged to have Revenue Form 11 completed and submitted to Revenue before the Inspector of Taxes will issue a Notice of Assessment.

Form 11:

Form 11 must be completed in respect of self-employed people when making their statutory return of income to the Revenue Commissioners. It provides details of income which a self employed person may have including income from sources that are exempt for tax purposes and which will not be shown on the Notice of Assessment e.g. profits from woodlands, profits from stallion fees etc. (Refer to page 8 of Form 11). Such exempted incomes will need to be added back to the total figure in panel 1 of the Notice of Assessment. Page 4 of Form 11 will also provide a breakdown of the capital allowances claimed in Panel 2 of the Notice of Assessment.

In certain cases where a person is deemed to have a very low income, the Revenue Commissioners may determine that it is not necessary for that person to make a return of income for a set period of years. In such cases, the Revenue Commissioners issue a “Non Liable Notification Letter” advising the applicant of this. For Medical Card / GP Visit Card assessment purposes applicants should provide a copy of this letter on request.

Assessment Using “Notice of Assessment”:

Assessable income for Medical Card / GP Visit Card purposes, when extracted from a “Notice of Assessment of Income”, will be construed as the excess of the total of Panel 1

over the sum of Trade Capital Allowances (identified from panel 2), Income Tax Payable and Panel 6 and 7.

Example:

Total Panel 1	€31,264.00 (a)
Less	
1) Trade Capital Allowances (Panel 2)	€3,732.00 (b)
2) Income Tax Payable	€1,504.20 (c)
3) PRSI and Health Contributions (Panel 6 and 7)	€1,376.60 (d)
4) Income Levy (@ 2%)	€ 625.20
Total Deductions	<u>€7,238.00</u>
Assessable Income	€24,026.00
Weekly Assessable Income	€ 462.04

Notes re: Notice of Assessment:

Emoluments Spouse

Where a self-employed person's spouse is in PAYE employment the figure in respect of such income, as shown in Panel 1 of the Notice of Assessment i.e. "Emoluments Spouse" may need to be adjusted using a current pay slip where there is a major change in spouse's income. In this situation, the spouse's income as shown on the Notice of Assessment will need to be substituted by the new income as shown on the up to date pay slip. Income Tax, PRSI, USC (if relevant) adjustment will also need to be made.

Savings/Investments:

Where Panel 1 of the Notice of Assessment includes an income figure from savings, these savings should be assessed according to the standard formula for assessment (See Section 4.1.2) and the income from savings as shown on Panel 1 of the Notice of Assessment should not be taken into account.

Trade Capital Allowance:

Trade capital allowances take account of the 'wear and tear' on plant machinery, motor vehicles, tractors etc associated with the trade or profession. Page 4 & 5 of Form 11 will give a breakdown of the capital allowances claimed.

Assessment using a set of Accounts:

In the event of the Notice of Assessment not having issued income details may need to be extracted from the most recent set of trading accounts and agreed with the HSE. Income, when taken from a set of trading accounts, will be construed as the adjusted net profit. The applicant's accountant will be able to supply the adjusted profit computation, and details of the person's Tax and PRSI and USC liability .

Drawings should not be used when determining a person's income from self-employment as using the drawings figure would either understate (if less than the net profit) or overstate (if greater than net profit), the actual income.

In exceptional cases, where the Notice of Assessment, Form 11 or a set of trading accounts are not available or where a "Non Liable Notification Letter" has issued a reasoned estimate of income, based upon the facts and explanations presented to it, must be agreed with the HSE.

4.4 Social Welfare Incomes

Social welfare payments (other than disregarded payments) are assessable when means testing a person's eligibility for these schemes. These payments can be verified using the Department of Social and Family Affairs computer systems (INFOSYS/ISTS).

The following points in relation to Social Welfare Payments should be noted:

- Applicants whose weekly incomes are derived solely from Social Welfare allowances/ benefits or Health Service Executive allowances, which are in excess of the Income Guidelines (either at first application or on renewal), should be granted a Medical Card.
- In the interest of equity it may be appropriate to average the value of Social Welfare Payments that are paid seasonally or those which vary in value on a weekly basis.
- Social Welfare Payments being paid at a rate less than the maximum weekly rate may be indicative of other incomes/means.

- Recipients of social welfare contributory benefits or pensions may have other incomes.

4.5 Assessment of Applicants - 16 to 25 Years

People aged 16 – 25 years, including students, who are eligible for Medical Cards/GP Visit Cards are:

- People who are dependant on Medical Card/GP Visit Card holders.
- Financially Independent people with means who are within the Medical Card/GP Visit Card guidelines.
- Cases of undue hardship or where it would be unduly burdensome to provide General Practitioner or medical and surgical services.

People aged 16 – 25 years, including students, who are ineligible for Medical Cards/GP Visit Cards are:

- Independent people whose income does not fall within the Medical Card/GP Visit Card guidelines.

4.5.1 Financially Independent

Applicants aged 16 – 25 years, including students, who are deemed to be financially independent are:

- People who are in receipt of income equivalent to or greater than the current Medical Card Income Guideline for a single person, living with family.

Financial independence may be achieved through student loans, education grants, employment, self-employment, part-time employment, savings, or social welfare payments. Rent Supplement payments are not included in establishing financial independence.

Please note:

- Student Loans and Education Grant will be included in determining financial independence but will not be assessed in the means test. In determining the

weekly value of both the Grant and Loan it is calculated by dividing the yearly sum by the equivalent number of weeks in the academic year. i.e. 36 weeks.

Education Grant currently €3,420 per year ÷ 36 weeks.

Student Loan: Amount of loan ÷ duration ÷ 36 weeks.

Eligible people who are students, will have the choice of holding their Medical Card/ GP Visit Card in the area in which they attend College or in their home area.

The normal rules for attending the ‘choice of doctor’ and of access to other ‘doctors with contracts’ will apply.

4.6 Incomes in Excess of Medical Card / GP Visit Card Guidelines

4.6.1 Undue Hardship/ Unduly Burdensome

In assessing if a person qualifies under these schemes the HSE must have regard to a persons overall financial situation and not just their income. If a person, applying for a Medical Card, has an income in excess of the relevant guidelines, the HSE must consider if refusing eligibility would result in *undue hardship* to that person and his/her dependents. Similarly, if a person applying for a GP Visit Card has an income in excess of the relevant guidelines, the HSE must consider if refusing eligibility would result in it being *unduly burdensome* to that person to provide GP services for him/herself and his/her dependents. The HSE has discretion when deciding to grant a Medical Card or a GP Visit Card to a person whose income is in excess of the relevant guidelines.

4.6.2 Assessment Process and Discretion

Where the HSE invokes this discretion they must do so in a consistent manner and are cognisant of the potential range of circumstances that might prevail in individual cases. The following guidelines have been developed to ensure that fairness and equity is applied to all applicants under these schemes

If a person's means are in excess of the relevant income guidelines then a decision must be taken to grant or refuse either a Medical Card or GP Visit Card. In this context the issues taken into account are additional and exceptional circumstances as outlined below. The process involved in deciding eligibility is as follows:

1. If the applicant's means is in excess of the Medical Card income guidelines the deciding officer will consider whether to refuse would cause undue hardship.
2. If after such consideration the applicant fails to qualify for a Medical Card the deciding officer will consider the applicant for a GP Visit Card.
3. If the applicant's means is in excess of the GP Visit Card guidelines the deciding officer will consider whether it would be unduly burdensome for the applicant to provide for GP Services for him/her self from his/her own resources.

4.6.3 Relevant Factors in Assessing Hardship

The exercise of discretion by the HSE, in favour of the applicant, should be considered where meeting the costs of services covered by a Medical Card or a GP Visit Card compromises the applicant's or his/her family's ability to meet the essential costs associated with:

- **maintenance of employment**
- **provision of reasonable housing**
- **provision of appropriate nurturing and care for children or dependants**
- **provision of adequate heating, nutrition and clothing, or**
- **coping with exceptional personal and financial burdens arising from medical or social circumstances.**

The decision makers will act in a reasonable fashion, and take into account only bona fide and relevant considerations.

A decision should only be taken after a sufficient and reasoned assessment of all the circumstances of an individual case to include the nature and extent of personal, medical or social circumstances of the applicant and/or his/her family. A Medical Card/GP Visit Card should be issued, if, having had due regard to all the relevant circumstances, it is

considered that “**undue hardship**” would occur or that it would be “**unduly burdensome**” for that person to provide GP, medical or surgical services for him/herself and/or family. Where a Medical Card/GPVC has been granted to an applicant to prevent undue hardship/burden a decision will need to be taken as to whether hardship/burden is confined to an individual or child or whether, eligibility should be extended to all dependents of that person. If in the assessment it is obvious that the predominant costs factor for the applicant is the cost associated with GP visits, the case may be dealt with by granting a GP Visit Card.

A number of issues, such as the following, shall be taken into account in making a decision:

- Illness or medical circumstances which results in financial hardship.
- The cost of providing general medical and surgical services.
- The cost associated with the provision of medical, nursing and dental treatment.
- The cost of physiotherapy and speech and language therapy.
- Transport cost to hospitals and clinics.
- Addictions such as drink, drugs and gambling.
- Poor money management.
- Social deprivation – including poor home management.
- The cost of medical aids and appliances.

The decision makers may seek advice from other sources which may include:

- The Applicant’s Doctor(s).
- The HSE’s Medical Officers.
- The Public Health Nurse.
- The Community Welfare Officer.
- Social Worker.
- The Therapy Services.
- Money Advice and Budgeting Service (MABS).

Please Note: The decision maker will get the prior expressed approval of the applicant before any of the above people are contacted.

When all of the factors pertinent to a case are taken into account, a decision to grant or refuse a Medical Card or a GP Visit Card is made.

By following the approach provided for in these guidelines, the HSE will ensure that the system is adequate enough to respond to the variety of circumstances and complexities faced by individuals.

4.6.4 Review Dates for Discretionary Cards

In setting review dates for cards issued in accordance with the above guidelines the decision maker should reflect sensitivity to the needs and condition(s) of the individual. To avoid anxiety for the individual consideration should be given to extending review frequencies to the maximum allowed.

5 Retention of Medical Cards on taking up Employment or participating on Government Incentive Schemes

In support of Government policy in promoting employment/training, the retention of medical cards (without a means test) is approved for people as indicated below:-

Applicants returning to work or involved in Government approved/sponsored incentive schemes will continue to retain entitlement to Medical Cards provided that they are:

- People moving to full or part time employment.
- People participating in Government approved/sponsored schemes.

5.1 Full or Part time Employment

Applicants in receipt of the following allowances/benefits, for a period of 12 months or more are entitled to retain their Medical Card for 3 years on taking up employment:

- Job Seekers Allowance
- Job Seekers Benefit
- One Parent Family Payment.
- Illness Benefits
- Invalidity Pension
- Disability Allowance.
- Blind Pension.
- Employment Incentive Schemes or Educational Opportunity Schemes.

When a person who has been unemployed for a minimum of 12 months or more takes up full time employment, s/he will retain their Medical Card for a period of three years from the date on which the employment commenced.

When a person is unemployed for a period of 12 months or more takes up part-time employment, s/he will retain their Medical Card for a period of three years from the date his/her income exceeds the relevant Medical Card Guideline.

A person, who did not hold a Medical Card prior to commencing employment, but would have qualified if they had applied, should on application be granted a Medical Card, for the remainder of the three year period.

Adult and Child dependants of a person covered by the retention will also be granted a Medical Card.

If the spouse/ partner of a person who has been granted retention takes up employment during the retention period, this will not affect the three year retention period i.e. all family members continue to retain entitlement for this period.

Where a person who has been granted retention for the three years and that person continues in employment then eligibility will be assessed using the normal criterion.

In the event of the spouse/ partner subsequently taking up employment, having been in receipt of a qualifying payment, s/he and child dependants will retain eligibility for a 3 year period from commencement of employment. The original qualifying spouse/partner entitlement will be assessed in the normal way if still in employment.

5.2 Government Schemes

People participating on the following Government Schemes will retain their entitlement to a Medical Card for the duration of the scheme:

- Back to Work Allowance.
- Back to Work Enterprise Allowance.
- Back to Education Allowance.
- Revenue Job Assist.
- Community Employment.
- VTOS.
- Job Initiative.
- Rural Social Scheme.
- Education, Training and Development Option.
- Community Services Programme.
- Part-time Job Incentive.
- Part-time Education Option.
- FAS – (Non apprenticeship courses).
- Youthreach.
- Local Employment Services Courses.
- Failte and Teagasc Courses.
- Wage Subsidy Scheme.

A person, who did not hold a Medical Card prior to commencing scheme but would have qualified if they had applied, should on application be granted a Medical Card, for the remainder of the scheme.

Adult and Child dependants of person covered by the retention will also be granted a Medical Card.

If the spouse/ partner of a person who has been granted retention takes up employment during the retention period, this will not affect the retention period i.e. all family members continue to retain entitlement for duration of scheme.

In the event of the spouse subsequently taking up employment/commencing scheme, having been in receipt of a qualifying payment s/he and child dependants will retain eligibility for either a further three year period or duration of scheme. The original qualifying spouse/partners entitlement will be assessed in the normal way following the completion of their scheme.

A person may move from one scheme to another and will retain entitlement to a Medical Card as long as s/he remains on one of the schemes listed above.

6 European Union (EU) Provisions

6.1 Introduction

People who are entitled to healthcare in Ireland under Regulation (EC) 883/04 have full eligibility and therefore receive a Medical Card as evidence of this or else be the holder of a European Health Insurance Card (EHIC) from their own member state.

On production of any of the forms listed below and issued by another EU /EEA Member state or Switzerland (see section 5.2.4.), the holder is deemed to be entitled to healthcare under the Regulation and therefore to have full eligibility provided s/he is not subject to

Irish social security legislation¹. S/he therefore receives a Medical Card automatically.

The key EU forms in use are:

Form E106

Form E109

Form E121.

Form S1

6.2 General

6.2.1 EU Regulation 883/04

Each EU Member State is responsible for its own social security system and health service provision and decides which social security and healthcare benefits should be provided, the conditions of entitlement and the value of these benefits. EU Regulation 883/04 sets out the principles under which EU-insured² people are entitled to avail of social security entitlements, including healthcare, when they travel within the EU.

6.2.2 E- Form

EU-insured people avail of healthcare either through the provision of a Medical Card in Ireland, on production of the appropriate E-form, or by way of a European Health Insurance Card (“EHIC”) issued by another Member State. Further details in relation to the main categories of entitled people are set out below.

In order to obtain a Medical Card under EU legislation, the applicant must produce the appropriate E-form³ from the competent insitute of their State⁴. Certain parts of the E-form will also be required to be completed by the HSE, and when fully completed the relevant E-form will provide evidence of entitlement to a Medical Card. (It should be noted that Ireland has an

¹ A person is considered subject to Irish social security legislation if s/he is in receipt of a contributory Irish social welfare payment or engaged in work in Ireland and subject to PRSI (in respect of a self-employed person, s/he is only subject to PRSI for earnings over €3,174).

² An EU-insured person means, for the purposes of this document, a person who is insured with the social security legislation of another EU Member state.

³ An E-Form is confirmation from a Member State that the holder has healthcare entitlement for which that state is liable.

⁴ The state in which the person is insured for the purposes of social security, including healthcare, is known as the competent state. (See Article 1(q) and Article 1(s) Regulation 883/04)

agreement with the United Kingdom whereby E-Forms are not required when processing applications under EU Regulation 883/04. UK-insured people are usually requested to produce some other document as evidence of their entitlement to avail of healthcare in Ireland, and this is described in the individual sections later). Furthermore, people who are entitled to healthcare in Ireland under EU legislation are entitled only to those healthcare benefits that are provided for in Ireland, which may differ from the entitlements received in their home Member State.

6.2.3 Subject to Irish Social Security Legislation

It will not be necessary for the HSE in Ireland to investigate whether a person from another Member State claiming entitlement to healthcare in Ireland under EU legislation is “insured” under the social security legislation of their Competent State. It is up to the Competent State to confirm if the person is insured and their appropriate E-form is sufficient evidence of their entitlement to healthcare. However it must still be established if the person is subject to Irish social security legislation A person is considered subject to Irish social security legislation if s/he is in receipt of a contributory Irish social welfare payment or engaged in work in Ireland and subject to PRSI (in respect of a self-employed person, s/he is only subject to PRSI for earnings over €3,174). . If so, the person will not qualify for a Medical Card under EU legislation, but may qualify for a means-tested Medical Card under national legislation.

6.2.4 Countries covered

People insured in any EU Member state, together with people insured in any EEA Member state (Iceland, Norway or Liechtenstein) or in Switzerland are entitled to healthcare under EU legislation. The full list of states affected by these provisions is:

Austria	Belgium	Bulgaria
Cyprus (Southern)	Czech Republic	Denmark
Estonia	Finland	France
Germany	Greece	Hungary
Iceland	Ireland	Italy
Latvia	Liechtenstein	Lithuania

Luxembourg	Malta	Netherlands
Norway	Poland	Portugal
Romania	Slovakia	Slovenia
Spain	Sweden	Switzerland
UK including Gibraltar		Crotia

6.3 Categories of Beneficiaries

6.3.1 Employed/self-employed people

People who are employed or self-employed in another EU Member state and thereby insured under that state's social security system and who are resident in Ireland and not subject to Irish social security legislation (see footnote, under 5.1) are entitled to a Medical Card.

The two main subcategories under this heading are

- Frontier workers.
- Posted workers.

6.3.1.1 Frontier workers and their dependants

EU Regulation 883/04 makes specific provision for those workers who pursue their employment/self-employment in one Member state and reside in the territory of another member state to which they return daily or at least once a week.

Workers residing in Ireland but employed elsewhere within the EU and returning to Ireland at least once a week, are entitled to a Medical Card on production of the form E106 from the competent institute from that State, unless they are subject to Irish social security legislation. It may also be necessary to provide evidence of residing in Ireland or proof that they are returning here at least once a week e.g. Airline tickets etc.

Their dependants residing with them are also entitled to a Medical Card on production of the form E106 provided that they are not themselves subject to the Irish social security

system, or in the case of children, that the spouse or person looking after the children is not also subject to Irish social security legislation.

6.3.1.2 Posted workers and their dependants

EU Regulation 883/04 makes provision for employees who are employed in one Member State but who are sent by their employer to another Member State for periods generally not exceeding one year and refers to them as “posted workers”. A posted worker continues to be subject to the legislation of the member state of his/her employer. When posted to Ireland, such employees are entitled to a Medical Card on production of the form E106 from the Competent State.

The dependants of the posted worker residing with him/her are also entitled to a Medical Card on production of the form E106 provided that they are not themselves subject to the Irish social security system, or in the case of children, that the spouse or person looking after the children is not also subject to Irish social security legislation.

E-forms for frontier and posted workers and their dependants

Frontier workers, posted workers and dependants of either category must produce a form E106 when applying for a Medical Card in Ireland. However, because of the bi-lateral agreement with the UK, no E-form is required and the applicant must provide proof of employment in the UK.

6.3.2 Pensioners and their dependants

EU pensioners resident in Ireland and who are in receipt of a qualifying pension as evidenced by form E121 are entitled to a Medical Card provided they are not subject to Irish social security legislation (see footnote, under 5.1).

Pensioners from the UK must provide proof that they are in receipt of a UK social security pension. (The UK social security pension is the only qualifying UK pension for entitlement under EU legislation).

Any additional income to the qualifying pension not subject to PRSI is not taken into account when determining entitlement to a Medical Card (e.g. Occupational Pension, Investment Income etc.)

Dependants resident in Ireland of pensioners with entitlement under EU legislation are entitled to a Medical Card on production of a form E121 provided they (the dependants) are not subject to Irish social security legislation.

E-forms for pensioners and their dependants

Pensioners and their dependants must produce a form E121 when applying for a Medical Card in Ireland. Pensioners from the UK must provide proof that they are in receipt of a UK social security pension (this is the only qualifying UK pension for entitlement under EU legislation).

6.3.3 Dependants residing in Ireland of people employed or self-employed in another EU Member state and residing elsewhere

Dependants residing in Ireland of a person employed / self-employed in another member state and resident elsewhere are entitled to a Medical Card in Ireland on production of the form E109, provided that the spouse or person looking after the children is not subject to Irish social security legislation (see footnote, under 5.1).

E-forms for such dependants

Such dependants should produce the form E109 issued by the state of employment of the worker as evidence of their entitlement. If entitlement for the dependants is by virtue of employment/ self-employment of a person in the UK, evidence of same will have to be provided.

6.3.4 Temporary Visitors

EU-insured people in Ireland on a temporary visit can obtain healthcare in Ireland by producing the European Health Insurance Card or the temporary replacement certificate,

issued by the competent institute in other member state, to the doctor or care provider. This includes students who would previously have been covered by form E128, now replaced by the EHIC. The EHIC covers only the person named and separate EHICs are issued for dependants. UK insured people on visits to Ireland are usually requested to produce some other documents as evidence of their entitlement to avail of health care in Ireland.

7 Long Stay/Residential Care

7.1 Nursing Homes

People who have full eligibility will be granted or retain their Medical Cards while they are patients in private nursing homes. The assessment process should take into consideration the full cost of Nursing Home care less any subvention paid.

7.2 Long Stay Hospital Patients

People who are receiving in-patient services may have their eligibility continued but fees/capitation payments to the chosen General Practitioner should be suspended, where medical and surgical services are being provided to patients within the hospital.

General Practitioners are not eligible to be paid fees or capitation allowances under **the choice of doctor scheme** in respect of those who are receiving inpatient services. A special code (904) is used to reclassify the Medical Card and to notify the **Primary Care Re-imburement Service** of the suspension of payments.

7.3 Residential Centres – Patients

The range of services available on site may vary from residential centre to residential centre. In this regard it is imperative that the Health Service Executive make arrangements to provide a comprehensive range of services to meet all patient needs. Particular attention may be needed for those resident on a five day week basis. Their needs at weekends may best be met through local arrangements.

7.4 Residential Centres – Children

Children in residential centres are provided with general practitioner medical and surgical services. The Health Service Executive may meet their responsibilities to provide services through the choice of doctor scheme but other local arrangements may be more practical.

7.5 Foster Care

All children in foster care are provided with general practitioner medical and surgical services. Children who are fostered in accordance with the Boarding-Out Regulations are provided with individual Medical Cards.

8 Appeals

Applicants for Medical Card/GP Visit Card should be advised in writing of the HSE's decision.

Where it is decided to grant a GP Visit Card a full explanation of the decision should be notified to the applicant.

In all cases a "Right of Appeal" notification should accompany each refusal decision.

Appendix I: Financial Guidelines for Medical Card/GP Visit Card Income Limits from January 2014

Medical Card and GP Visit Card Income limits for Applicants aged 70 years or older

	Medical Card Gross Weekly Rate	GP Visit Card Gross Weekly Rate
Single Person Aged 70 and Over	Below €500	Over €500 not exceeding €700
Married/Co-habiting Couple Aged 70 and Over	Below €900	Over €900 not exceeding €1,400

General Medical Card / GP Visit Card Guidelines

	Medical Card Weekly Rate	GP Visit Card Weekly Rate
Single Person Living Alone		
Aged up to 65 years	€184.00	€276.00
Aged 66 years and over	€201.50	€302.00
Single Person Living with Family		
Aged up to 65 years	€164.00	€246.00
Aged 66 and over	€173.50	€260.00
Married Couple / Single Parent Families with Dependent Children		

Aged up to 65 years	€266.50	€400.00
Aged 66 and over	€298.00	€447.00
Allowances		
Allowance for first 2 children under 16 financially dependant on applicant	€38.00	€57.00
For 3 rd and subsequent children under 16 financially dependant on applicant	€41.00	€61.50
Allowance for first 2 children over 16 years financially dependant on applicant	€39.00	€58.50
For 3 rd and subsequent children over 16 yrs financially dependant on applicant	€42.50	€64.00
For a dependant over 16 years who is in full time third level education and not grant aided	€78.00	€117.00

- Additional guideline allowances will be given for:
 - o Reasonable expenses incurred in respect of rent or mortgage payments
 - o Reasonable expenses incurred in respect of childcare costs
 - o Reasonable expenses incurred in travel to work

- The assessment of eligibility for Medical Cards and GP Visit Cards will be based on the combined income of the applicant and spouse (if any) after tax PRSI and USC have been deducted.

- Applicants, whose weekly incomes are derived solely from Social Welfare or Health Service Executive allowances/ payments, which are in excess of the Financial Guidelines (either at first application or on renewal), will be granted Medical Cards.