

Freedom of Information Act 2000 - Request Reference FoI/23/365

Charging policy

Information Requested:

The following requests relate to the expenditure and income generated from the 'charging policy', excluding any generated through private paying patients or monies claimed back from countries as part of any reciprocal healthcare arrangement.

1. As per the health board's application of the 'charging policy' for the financial year 2022-23 please provide (i) the total number of and (ii) the total value of:
 - a) Invoices generated;
 - i.) 43 invoices raised
 - ii.) £319,937.95
 - b) Payments received v outstanding;
 - i) 35 invoices paid
 - ii) £187,746.12 received
 - i) 3 invoices fully out-standing (excluding those on payment plans)
 - ii) £15,548.22 outstanding
 - c) Credit notes issued after a patient has been invoiced for care and later found to be eligible for free treatment;
 - i.) 1 invoice raised and later credited
 - ii) £66.30
 - d) Invoices written off for accounting purposes due to a patient being considered destitute;
 - i) 0 invoices written off as destitute
 - ii) £0
 - e) Debts passed onto debt collection agencies for recovery due to non-payment.
 - i) 2 invoices passed onto debt collectors
 - ii) £7,933.26

2. For financial years 2018-19, 2019-20, 2020-21, 2021-22 and 2022-23, please provide the number of patients invoiced:

- a) who were aged 0-16;
 - 2018-19 – 15
 - 2019-20 - 12
 - 2020-21 - 2
 - 2021-22 - 3
 - 2022-23 – 3
- b) who were charged for maternity or obstetric care (including antenatal care and child birth);
 - 2018-19 – 7
 - 2019-20 - 14
 - 2020-21 - 0
 - 2021-22 - 4

2022-23 – 2

c) for cancer treatment.

Information not available.

3. Please provide a breakdown by speciality, department, or similar categorisation of:

a) the number of patients currently on a repayment plan with the health board for debt incurred under the charging policy;

5 patients on a payment plan

Obstetrics, Trauma & Orthopaedics, Neurology and Nephrology

b) a breakdown by value of repayment (for example, the number of patients paying £1/month, £5/month, £10/month, etc.)

3 patients paying £100 a month

1 paying £150 a month

1 paying £300 a month

4. Please share any formal or informal criteria, policies, procedures, or similar the trust currently uses or has used since 2018 to determine how:

a) A patient's debt is managed;

Where the patient is willing to provide payment for services provided but cannot meet repayment in full, the UHB agrees with the patient, at the earliest opportunity, a reasonable repayment plan within a realistic timeframe

b) The trust agrees upon the value of a patient's monthly repayment plan

The financial circumstances of the individual are taken into account and agreement of the terms of the repayment plan reached between the debtor and the UHB. The UHB considers the individual's particular circumstances in deciding whether a repayment plan is reasonable.

5. For financial years 2018-19, 2019-20, 2020-21, 2021-22 and 2022-23, please provide the total number of patients whose information has been shared with the Home Office in relation to a debt:

a) Greater than £500 owed for more than 2 months; see below

b) Greater than £500 owed for less than 2 months; see below

c) Less than £500. See below

Cardiff and Vale UHB only refer debt over £500 and more than 60 days old

2018-19 - 8

2019-20 - 7

2020-21 - 6

2021-22 - 2

2022-23 - 7