



NHS FULLY FUNDED CONTINUING HEALTHCARE & YOUR BENEFITS

WHAT IS 'NHS CONTINUING HEALTHCARE'?

Traditionally the NHS pays for the care of people in hospital.

However, increasingly the NHS meet the costs of personal nursing care in other settings, through funding which is referred to as NHS *continuing healthcare*.

This is the name given to a package of services which is arranged and funded by the NHS for people with ongoing health needs, but living outside hospital.

This form of NHS funding is used to pay for the personal nursing care of people living in either their own homes, or in a Residential Care or Nursing Home.

1. LIVING IN YOUR OWN HOME

EFFECT ON BENEFITS

Receiving *continuing healthcare* whilst still living in your own home does not affect any social security benefits that you may be able to claim. In particular those care/mobility benefits that are normally lost when in an NHS hospital can specifically be claimed if at home but receiving NHS *continuing healthcare*.

Therefore, you will be entitled to claim Disability Living Allowance (Care and Mobility Components) Personal Independence Payment (PIP) Daily Living and Mobility or Attendance Allowance.

[Also, as a consequence, any carer's benefits that may have flowed from entitlement to those benefits can also be claimed]

You/your carer can claim these benefits for the first time, or continue to claim them if already in receipt.

You should also check whether you are now entitled to any of the other benefits listed in the box below.

This is because DLA, PIP Daily Living and Attendance Allowance often trigger entitlement to these benefits, or additional amounts of these benefits if already in receipt.

WILL I BE CHARGED BY THE NHS?

There is no charge from the NHS.

CAN SOMEONE TOP-UP THE NHS FUNDING?

At present, a 'third party' (such as a relative) is not legally allowed to top-up NHS funding. However, s/he could pay for anything that is NOT deemed to be nursing-type 'care'.

Get advice if you are thinking of a third-party top-up.

2. LIVING IN A RESIDENTIAL CARE OR NURSING HOME

EFFECT ON BENEFITS

If receiving *continuing healthcare* whilst a permanent resident of a Nursing Home, your entitlement to social security benefits will be affected as follows:

2.1. NOT PAYABLE:

Disability Living Allowance Care Component

Personal Independence Payment: Daily Living

Personal Independence Payment: Mobility

Attendance Allowance

For those living in a Residential Care Home, only DLA Care/PIP Daily Living and Attendance Allowance are affected, not Mobility.

If affected these benefits are deemed to 'overlap' with NHS funding for care, so they cease to be payable after 28 days (84 days for a child under 16). If you get one of these benefits, you must notify the paying office, telling them that you are now receiving NHS *continuing healthcare* funding.

When assessing the 28 day limit, time spent in different forms of publicly-funded care are linked. For example, if you move from hospital to a Nursing Home without a clear break of at least 29 days in between, these periods of publicly-funded care are linked, and all count towards the 28 day cut off point.

For more details about the '28 day rule' see our leaflet Pb15 'Users of Respite Care', available to view/download from our website www.wwwwras.org.uk .

In addition, it is important to also note that some benefits might have been boosted by your entitlement to Disability Living Allowance, PIP or Attendance Allowance. Thus, if you lose Disability Living Allowance, PIP or Attendance Allowance, you may see a consequent reduction in your other benefits.

The main 'other' benefits affected are:

'OTHER' BENEFITS

Pension Credit

Income Support

Housing Benefit

Employment & Support Allowance [income-related]

Council Tax Benefit

Jobseekers Allowance (income-based)

If you are receiving any of these benefits, and you lose your Disability Living Allowance, PIP or Attendance Allowance, you must notify the paying office, for them to re-assess your claim.

2.2. **PAYABLE:** All other benefits are payable.

WILL I BE CHARGED BY THE NHS?

There is no charge from the NHS for their funding of your personal nursing care. They pay the full cost if you are accepted as having *continuing healthcare* needs.

CAN SOMEONE TOP-UP THE NHS FUNDING?

At present, a third party is not legally allowed to top-up NHS funding when in a Residential Care or Nursing Home.

ADVICE AND ASSISTANCE

Citizens Advice Bureaux

1st Floor, Chestnut House
North Street
Rugby, CV21 2AQ

25 Congreve Walk
Bedworth, CV12 8LX
(To book an appointment in
Nuneaton call 024 7635 1049)

The Parish Rooms
Welcome Street
Atherstone, CV9 1DU

10 Hamilton Terrace
Leamington Spa, CV32 4LY

25 Meer Street
Stratford-upon-Avon, CV37 6QB

Switchboard number for ALL CABx: 0844 855 2322

For Carers Advice, Information and Support

Guideposts Carers Support Service

(for Warwickshire)

44-45 Church Street
Nuneaton, CV11 4AD

Tel: 024 7638 5888

e-mail: carerssupport@guidepoststrust.org.uk

www.guidepoststrust.org.uk

The information in this factsheet is correct as of January 2014

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