STATUTORY INSTRUMENTS

1986 No. 966 (S. 83)

NATIONAL HEALTH SERVICE, SCOTLAND

The National Health Service (Payments for Optical Appliances) (Scotland) Regulations 1986

Made - - - -	*5th June* 1986
Laid before Parliament	*9th June* 1986
Coming into Operation	*1st July* 1986

The Secretary of State, in exercise of the powers conferred on him by sections 26, 70, 73 and 74 of, and paragraphs 2 and 2A of Schedule 11 to, the National Health Service (Scotland) Act 1978(**a**) and section 28 of the Health and Social Security Act 1984(**b**), 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 (Payments for Optical Appliances) (Scotland) Regulations 1986 and shall come into operation on 1st July 1986.

(2) In these regulations, unless the context otherwise requires -

"the Act" means the National Health Service (Scotland) Act 1978;

"child" means a person who is under the age of 16 years;

"complex appliance" means an optical appliance at least one lens of which -

(a) has a power in any one meridian of plus or minus 10 or more dioptres, or

(b) is a lenticular lens;

"contribution assessment" means a document issued by the Secretary of State for Social Services showing whether or not there is a patient's contribution and, if there is, its amount;

"eligible person" has the meaning assigned to it by regulation 3(2) to (4);

"face value" means in relation to a voucher on which is marked a letter code specified in column 2 of the Table set out in Schedule 1 the amount specified in relation to it in column 3 of that Table, plus the amount of any increase for a prism or a tint provided for by paragraph 1 of the Notes to that Schedule;

(**a**) 1978 c.29; paragraph 2 of Schedule 11 was amended by the Health and Social Security Act 1984 (c.48), Schedule 1, Part II, paragraph 5, and Schedule 8; and paragraph 2A of Schedule 11 was inserted by that Act of 1984, Schedule 1, Part II, paragraph 7.
(**b**) 1984 c.48.

"Joint Ophthalmic Committee" means a Committee of that name constituted under the National Health Service (Joint Ophthalmic Committees) (Scotland) Order 1974(**a**);

"minimum complex appliance payment" means in relation to an optical appliance the amount specified as such for the appliance in paragraph 2 of the Notes to Schedule 1;

"Ophthalmic Services Regulations" means the National Health Service (General Ophthalmic Services) (Scotland) Regulations 1986(**b**);

"optician" means an ophthalmic optician;

"patient" means a person whose sight has been tested under the Act;

"patient's contribution" means the amount of a contribution calculated in accordance with Schedule 2;

"redemption value" is to be construed in accordance with regulation 9;

"responsible Board" means -

(a) where a voucher is issued by an ophthalmic medical practitioner or optician providing general ophthalmic services, the Health Board for the area in which the supply of the optical appliance to which a voucher relates takes place, and

(b) where a voucher is issued by a Health Board as part of the provision, under Part III of the Act, of ophthalmic services (other than general ophthalmic services) at any hospital, the Health Board which issues it;

"voucher" means a voucher form supplied -

(a) where a sight test is carried out under the general ophthalmic services, by the Secretary of State to persons providing those services;

(b) where a sight test is carried out by a Health Board as part of the provision, under Part III of the Act, of ophthalmic services (other than general ophthalmic services) at any hospital, by the Health Board;

for the purpose of enabling a payment to be made under these regulations.

(3) For the purposes of the Table set out in Schedule 1 -

(a) where an optical appliance has lenses of different types, the face value of a voucher for the appliance shall be determined according to whichever lens would provide the greater face value;

(b) a monocle shall be treated as though it were glasses.

(4) In these regulations, unless the context otherwise requires, a reference -

(a) to a numbered regulation or Schedule is to the regulation in, or Schedule to, these regulations bearing that number;

(b) in a regulation to a numbered paragraph is to the paragraph in that regulation bearing that number;

(c) in the Table set out in Schedule 1 to a numbered paragraph is to the paragraph in that Table bearing that number.

(**a**) S.I. 1974/503.
(**b**) S.I. 1986/965.

Charges for glasses supplied by the hospital eye service

2.—(1) A charge of such sum as may be determined by or in accordance with directions given by the Secretary of State shall be made and recovered in accordance with paragraph (2) in respect of the supply of glasses as part of the provision, under Part III of the Act, of ophthalmic services (other than general ophthalmic services) at any hospital.

(2) Where a charge is payable by virtue of paragraph (1), the Health Board or other person on its behalf that supplies or is to supply the glasses may -

(a) on arranging to supply the glasses, make the charge, and

(b) on supplying the glasses or having them available for supply, recover the charge from the patient (if it has not previously been paid).

Eligibility for payment of costs of optical appliances

3.—(1) A payment shall be made as provided for by these regulations to meet, or to contribute towards, the cost incurred (whether by way of charge as referred to in regulation 2 or otherwise) for the supply of an optical appliance for which a prescription has been given in consequence of a testing of sight under the Act for an eligible person.

(2) For the purposes of these regulations an eligible person is a person who at the time of supply of the optical appliance is any of the following:-

(a) a child;

(b) a person who is under the age of 19 years and receiving qualifying full-time education within the meaning of paragraph 7 of Schedule 11 to the Act(**a**);

(c) a person whose resources are treated, in accordance with paragraph (3), as being less than his requirements;

(d) a person entitled to welfare milk under article 4 of the Welfare Food Order 1980(**b**) or to welfare food under article 5 of that Order;

(e) a person to whom the Secretary of State has issued an exemption certificate pursuant to regulation 7(1)(i) of the National Health Service (Charges for Drugs and Appliances) (Scotland) Regulations 1980(**c**) (exemption from prescription charges on low income grounds);

(f) a person for whom a prescription is issued for a complex appliance.

(3) A person's resources shall be treated as being less than his requirements if -

(a) he is in receipt of a supplementary pension or allowance under the Supplementary Benefits Act 1976(**d**) or his requirements fall under that Act to be aggregated with, and treated as, those of a person in receipt of such a pension or allowance;

(**a**) Paragraph 7 was substituted by the Health Services Act 1980 (c.53), Schedule 5, paragraph 8.

(**b**) S.I. 1980/1648; relevant amending instrument is S.I. 1985/1932.

(**c**) S.I. 1980/1674, to which there are amendments not relevant to these regulations.

(**d**) 1976 c.71; the Act was amended by the Social Security Act 1980 (c.30), and as so amended is set out in Part II of Schedule 2 to that Act of 1980; the Act was also amended by section 38 of, and Schedule 4 to, the Social Security and Housing Benefits Act 1982 (c.24), and Schedule 8 to the Health and Social Services and Social Security Adjudications Act 1983 (c.41).

(b) he is a member of a family for which a family income supplement under the Family Income Supplements Act 1970(**a**) has been determined as payable; or

(c) his patient's contribution is less than the face value of a voucher issued to him under these regulations.

(4) For the purposes of regulation 5 and other provisions of these regulations as they apply to payments where the testing of sight was by a Health Board as part of the provision, under Part III of the Act, of ophthalmic services (other than general ophthalmic services) at any hospital, a person is also an eligible person if, because of the frequency with which the condition of his eye changes, he is considered by the Health Board to be non-tolerant of his existing optical appliance.

Issue of vouchers in connection with general ophthalmic services

4.—(1) A person making an application for a testing of sight pursuant to regulation 14 of the Ophthalmic Services Regulations who considers that he may be an eligible person and wishes a payment to be made under these regulations in his case shall indicate to the ophthalmic medical practitioner or optician to whom the application is made that he may be an eligible person.

(2) An ophthalmic medical practitioner or optician who, following a testing of sight under the Ophthalmic Services Regulations, issues a prescription for an optical appliance to a patient -

(a) who has indicated that he may be an eligible person; or

(b) whose prescription is for a complex appliance,

shall, in the circumstances described in paragraph (4), but subject to paragraph (5), issue a voucher to the patient relating to the optical appliance prescribed.

(3) The ophthalmic medical practitioner or optician issuing the voucher shall sign it and shall -

(a) mark on it the letter code specified in column 2 of the Table set out in Schedule 1 which relates to the type of optical appliance prescribed as set out in column 1 of that Table; and

(b) duly complete the relevant parts of the voucher with the name and address of the patient, the patient's age if under 19, particulars of the prescription issued to the patient, the date on which the patient's sight was tested and the date of issue of the voucher.

(4) The circumstances referred to in paragraph (2) are where the ophthalmic medical practitioner or optician, having consulted any records which he has relating to the patient and made such enquiry of the patient as he considers relevant, is satisfied that -

(a) the patient requires an optical appliance for the first time or an optical appliance to a prescription the particulars of which differ from those relating to his existing appliance; or

(b) the patient requires an optical appliance because his existing optical appliance has been rendered unserviceable by fair wear and tear.

(**a**) 1970 c.55.

(5) Where a patient requires an optical appliance to a prescription the particulars of which differ from those relating to his existing appliance only because the patient is non-tolerant of that appliance, and has been so since it was supplied to him, no voucher shall be issued unless the Health Board responsible for the arrangements for the sight test, being satisfied (after consultation with the appropriate Joint Ophthalmic Committee) that the prescription for that existing appliance was clinically correct, has authorised the issue of a voucher.

(6) Where, on an application by a patient within 6 months of a voucher having been issued to him under paragraph (2), a Health Board is satisfied, having made such enquiries as it considers relevant, that the voucher has been lost or destroyed without having been presented to a supplier of optical appliances, it may issue to the patient a replacement voucher completed in accordance with paragraph (3)*(a)* and *(b)*, but with the date of issue of the voucher being that on which the replacement is issued.

(7) Unless paragraph (6) applies, not more than one voucher shall be issued to a patient in respect of any one optical appliance prescribed.

Issue of vouchers by Health Boards in connection with the hospital eye service

5.—(1) A person, whose sight is tested by a Health Board as part of the provision, under Part III of the Act, of ophthalmic services (other than general ophthalmic services) at any hospital, who considers that he may be an eligible person and wishes a payment to be made under these regulations in his case shall indicate to the Health Board that he may be an eligible person.

(2) A Health Board which, following a testing of sight, issues a prescription for an optical appliance to a patient -

(a) who has indicated that he may be an eligible person;

(b) whose prescription is for a complex appliance; or

(c) who is an eligible person by virtue of regulation 3(4),

shall issue a voucher to the patient relating to the optical appliance prescribed.

(3) The Health Board issuing the voucher shall -

(a) mark on it the letter code specified in column 2 of the Table set out in Schedule 1 which relates to the type of optical appliance prescribed as set out in column 1 of that Table;

(b) duly complete the relevant parts of the voucher with the name and address of the patient, the patient's age if under 19, particulars of the prescription issued to the patient, the date on which the patient's sight was tested and the date of issue of the voucher.

Use of voucher

6.—(1) Subject to paragraphs (3) to (5), a patient to whom a voucher, duly completed in accordance with regulation 4 or regulation 5, has been issued may present it to a supplier who supplies or is to supply him with an optical appliance, provided that the arrangements for supply are made within 6 months of the date on which the voucher was issued;

(2) A supplier may accept the voucher in substitution for payment by the patient of an amount equal to its redemption value, being the whole or part of the cost incurred for the supply of an optical appliance.

(3) Before presenting the voucher to the supplier the patient shall sign on the voucher -

(a) a declaration in writing to the effect that he is an eligible person, indicating the grounds of his eligibility;

(b) an undertaking in writing to the effect that, if he is unable to show that he is an eligible person, he will pay to the responsible Board an amount equal to the voucher's redemption value.

(4) A patient wishing to present to a supplier a voucher which has been issued only because he may be an eligible person by virtue of regulation 3(3)*(c)* shall, before presenting the voucher to the supplier, apply to the Secretary of State for Social Services for a contribution assessment.

(5) A patient to whom a contribution assessment is issued shall present it to the supplier at the same time as he presents him with a voucher in accordance with paragraph (1).

Payments to suppliers

7.—(1) The responsible Board shall, if the conditions specified in paragraph (2) are fulfilled, make a payment of a voucher's redemption value to a supplier who has accepted the voucher from a patient in accordance with regulation 6.

(2) The conditions referred to in paragraph (1) are that -

(a) the patient has signed the declaration and undertaking referred to in regulation 6(3) and acknowledged receipt on the voucher of the optical appliance supplied to him;

(b) the optical appliance is not sold or supplied in contravention of section 21(1) of the Opticians Act 1958(**a**);

(c) the supplier has -

(i) made and kept a written record of the supply and issued to the patient a receipt for any money received from the patient,

(ii) made a claim for a payment, on a duly completed voucher, to the responsible Board, and

(iii) sent to the responsible Board any contribution assessment presented to him under regulation 6(5).

Payments to patients where vouchers issued in connection with hospital eye service

8.—(1) Where a voucher has been issued to a patient by a Health Board as part of the provision, under Part III of the Act, of ophthalmic services (other than general ophthalmic services) at any hospital, a payment may be made under this regulation to the patient if -

(a) the voucher has been so issued only because he might be an eligible person by virtue of regulation 3(3)*(c)*; and

(**a**) 1958 c.32; section 21 was amended by the Health and Social Security Act 1984 (c.48), section 1(1).

(b) he incurs cost for the supply of an optical appliance without first having obtained a contribution assessment and without presenting his voucher to a supplier.

(2) A patient who wishes a payment to be made to him under this regulation shall -

(a) apply to the Secretary of State for a contribution assessment;

(b) sign the declaration and undertaking referred to in regulation 6(3); and

(c) within six months of the date on which he was supplied with the optical appliance, apply to the responsible Board for a payment and send to that Board -

(i) the voucher issued to him,

(ii) any contribution assessment issued to him, and

(iii) evidence of the cost incurred for the supply of the optical appliance.

(3) On an application made in accordance with paragraph (2), the responsible Board shall, if satisfied -

(a) that the patient was an eligible person;

(b) as to the cost incurred for the supply of the optical appliance,

make a payment to the patient of the voucher's redemption value.

Redemption value of voucher

9.—(1) The redemption value of a voucher shall, subject to paragraphs (2) and (3), be the lesser of -

(a) the full cost which would have been payable by the patient for the supply of the optical appliance but for these regulations;

(b) the face value of the voucher.

(2) In the case of a patient who was an eligible person only by virtue of regulation 3(3)*(c)*, the amounts taken for the purposes of paragraph 1*(a)* and *(b)* shall be reduced by the patient's contribution.

(3) In the case of a patient who was an eligible person by virtue of regulation 3(2)*(f)*, the redemption value of a voucher shall be -

(a) where he was an eligible person on some other ground also, an amount calculated in accordance with paragraphs (1) and (2) or the minimum complex appliance payment, whichever is the greater;

(b) in any other case, the minimum complex appliance payment.

Amounts wrongly paid

10.—(1) Where a person who is not an eligible person declares on a voucher that he is an eligible person and -

(a) a supplier accepts the voucher; and

(b) the responsible Board makes a payment to the supplier under these regulations,

the person who makes the declaration shall repay to the Board the amount of the payment which it makes to the supplier.

(2) Where a supplier makes a claim for payment to the responsible Board representing that the conditions specified in regulation 7(2) are fulfilled, but those conditions are not fulfilled and the Board makes a payment to the supplier under these regulations, it may recover the amount of that payment from the supplier.

Signatures

11. A signature required by these regulations may be given -

(a) on behalf of a child by either parent, or in the absence of both parents, the guardian or other adult person who has the care of the child;

(b) on behalf of any other person who is incapable of giving such a signature, by a relative or any other adult who has the care of that person; or

(c) on behalf of any person under 18 years of age -

(i) in the care of a local authority under Part II of the Social Work (Scotland) Act 1968(**a**) or under the relevant provisions of the said Part II as applied by section 44(5) of the said Act, by a person duly authorised by that authority;

(ii) in the care of a voluntary organisation, by that organisation or a person duly authorised by them.

Transitional

12.—(1) A person who -

(a) before 1st July 1986 but after 31st May 1986 has been given a prescription for an optical appliance following a testing of sight under the Act;

(b) has not made arrangements before 1st July 1986 for the supply of an optical appliance under the Act in pursuance of that prescription; and

(c) considers that he may be an eligible person;

shall, upon his making an application by 31st July 1986 to the person who gave him the prescription, be issued with a voucher in accordance with regulation 4(2) to (5) or regulation 5(2) and (3), as the case may be.

(2) Where, after the coming into operation of these regulations, a patient -

(a) is supplied before 1st January 1987 with an optical appliance for which he incurs cost;

(b) is an eligible person but was not issued with a voucher; and

(c) applies for a payment under this regulation, within six months of the date on which he was supplied with that appliance, to the Health Board which would have been the responsible Board,

that Board shall, if satisfied that a voucher should have been issued to that patient or would have been issued to him had he indicated, when his sight was tested, that he may have been an eligible person, make a payment to him of an amount determined in accordance with regulation 9 as though a voucher had been issued and marked with the appropriate letter code.

(**a**) 1968 c.49.

(3) The provisions of regulation 2(2) shall apply only where the testing of sight leading to the supply of the glasses, or the first such testing, takes place on or after 1st July 1986.

Revocation, amendments and savings

13.—(1) Subject to the following provisions of this regulation -

(a) the regulations specified in column 1 of Part I of Schedule 3 are revoked to the extent specified in column 3 of that Schedule; and

(b) the regulations specified in column 1 of Part II of Schedule 3 are amended as provided in column 3 of that Schedule.

(2) Where arrangements are made before 1st July 1986 for the supply of an optical appliance as part of general ophthalmic services a charge may be made and recovered in respect of the supply as though the revoked regulations remained in force.

(3) Where an optical appliance is supplied under the Act after 1st July 1986, otherwise than as part of general ophthalmic services, but the testing of sight, or the first such testing, takes place before that date, a charge may be made and recovered in respect of the supply as though the revoked regulations remained in force.

(4) In respect of transactions entered into before 1st July 1986, claims and payments may be made as though regulation 8(5) of the National Health Service (Remission of Charges) (Scotland) Regulations 1974(**a**) (which provide for repayments in certain cases for optical appliances supplied, replaced or repairs otherwise than under the health service) remained in force.

John J. MacKay,
Parliamentary Under Secretary of State,
Scottish Office,

New St. Andrew's House,
Edinburgh.
5th June 1986.

(**a**) S.I. 1974/1440; the relevant amending instrument is S.I. 1985/355.

Regulations 1(2) and (3), 4(3)*(a)* and 5(3)*(a)*

SCHEDULE 1

VOUCHER LETTER CODES AND VALUES

Column 1 *Type of optical appliance*	Column 2 *Letter code*	Column 3 *Face value of voucher*
1. Glasses with single vision lenses of a power (plus or minus) not exceeding - *(a)* as respects any spherical power, 6 dioptres; *(b)* as respects any cylindrical power, 2 dioptres.	A	£14.25
2. Glasses with single vision lenses not falling within paragraphs 1 or 3.	B	£22.00
3. Glasses with single vision lenses - *(a)* of a spherical power (plus or minus) exceeding 20 dioptres; *(b)* of a spherical power (plus or minus) exceeding 10 dioptres with any cylindrical power; *(c)* of a cylindrical power (plus or minus) exceeding 6 dioptres; or *(d)* in lenticular form.	C	£33.00
4. Glasses with bifocal lenses of a power (plus or minus) not exceeding - *(a)* as respects any spherical power, 6 dioptres; *(b)* as respects any cylindrical power, 2 dioptres.	D	£27.00
5. Glasses with bifocal lenses not falling within paragraphs 4 or 6.	E	£42.00
6. Glasses with prism segment bifocal lenses or glasses with bifocal lenses - *(a)* of a spherical power (plus or minus) exceeding 20 dioptres; *(b)* of a spherical power (plus or minus) exceeding 10 dioptres with any cylindrical power; *(c)* of a cylindrical power (plus or minus) exceeding 6 dioptres; or *(d)* in lenticular form.	F	£66.00

Column 1 *Type of optical appliance*	Column 2 *Letter code*	Column 3 *Face value of voucher*
7. Glasses not falling within any of paragraphs 1 to 6 for which a prescription is given in consequence of a testing of sight by a Health Board as part of the provision, under Part III of the Act, of ophthalmic services (other than general ophthalmic services) at any hospital.	G	£66.00

Notes

1. The amounts in column 3, and in paragraph 2 of these Notes, shall be increased in the case of any appliance containing a prism which has been prescribed on the basis of clinical need or containing a tinted lens for which the tint has been prescribed on the basis of clinical need; and the amount of the increase shall be -

(a) in the case of single vision lenses, £3.00 in respect of each lens containing a prism and £3.00 in respect of each pair of tinted lenses;

(b) in the case of other lenses, £4.00 in respect of each lens containing a prism and £4.00 in respect of each pair of tinted lenses.

2. The minimum complex appliance payment is -

(a) for a complex appliance with single vision lenses only, £2.00;

(b) for any other complex appliance, £14.00,

plus in each case, the amount of any increase for a prism or a tint provided for by paragraph 1 of these Notes.

Regulation 1(2)

SCHEDULE 2

PATIENT'S CONTRIBUTION

1. For the purposes of calculating the patient's contribution, his requirements and resources shall first be determined.

2. For those purposes a person's requirements and resources shall be determined according to the provisions of Schedule 1 to the Supplementary Benefits Act 1976(**a**) (provisions for determining right to and amount of supplementary benefits), as if -

(a) sections 5 (availability and registration for employment), 6 (exclusion of certain employed persons and pupils), 8 (persons affected by trade disputes) and 19 (notification in certain cases of refusal or neglect to maintain) of, and paragraphs 2(5) (no normal requirements in certain cases) and 3(2)*(b)* (aggregation in prescribed circumstances) of Schedule 1 to, that Act did not apply;

(b) his requirements included the following additional requirements -

(i) the sum of £2.50;

(ii) such amount (if any) as is considered reasonable to meet housing costs;

(iii) such amount in respect of life insurance premiums payable by, and in respect of a policy on the life of, that person as is reasonable in the circumstances;

(iv) an amount in respect of hire purchase payments under a hire purchase agreement for items of essential equipment for which a payment would be made under the Supplementary Benefit (Single Payments) Regulations 1981(**b**) if he were in receipt of a supplementary pension or allowance under that Act;

(c) paragraph 16*(d)* of Schedule 4 to the Supplementary Benefit (Requirements) Regulations 1983(**c**) (which relates to hire purchase) did not apply.

3. Where the patient's resources are equal to or less than his requirements, the patient's contribution is nil.

4. Where the patient's requirements exceed his resources, the patient's contribution is an amount equal to three times the excess.

(**a**) 1976 c.71.
(**b**) S.I. 1981/1528; the relevant amending instrument is S.I. 1983/1000.
(**c**) S.I. 1983/1399, to which there are amendments not relevant to these regulations.

SCHEDULE 3 Regulation 13(1)

PART I

REGULATIONS REVOKED

Column 1 *Regulations revoked*	Column 2 *References*	Column 3 *Extent of revocation*
The National Health Service (Remission of Charges) (Scotland) Regulations 1974	S.I. 1974/1440	*(a)* In regulation 2(1), the definition of "children's glasses" and "current specified cost"; *(b)* in regulation 5(1)*(a)*, all the words following "optical appliance" where it first occurs; *(c)* regulation 5(1)*(b)*;
The National Health Service (Dental and Optical Charges) (Scotland) Regulations 1979	S.I. 1979/705	*(a)* In regulation 2(1), the definition of "optician"; *(b)* regulations 9 and 10; *(c)* in regulation 3*(a)*, the words "or optical"; *(d)* regulations 3*(b)* and 4*(b)*.
The National Health Service (Dental and Optical Charges and Remission of Charges) (Scotland) Regulations 1981	S.I. 1981/359	Regulation 9.
The National Health Service (Dental and Optical Charges) (Scotland) Amendment Regulations 1982	S.I. 1982/333	*(a)* Regulations 7, 8, 9. *(b)* Regulation 10 in so far as it relates to Schedule 2.
The National Health Service (Dental and Optical Charges) (Scotland) Amendment Regulations 1984	S.I. 1984/293	Regulations 4 and 6.

PART II

AMENDMENT TO REGULATIONS

Column 1 *Regulations amended*	Column 2 *References*	Column 3 *Extent of amendment*
The National Health Service (Dental and Optical Charges) (Scotland) Regulations 1979	S.I. 1979/705	*(a)* In regulation 3*(a)*, for "Schedules 1 or 2 respectively" substitute "Schedule 1".

EXPLANATORY NOTE

(This Note is not part of the Regulations.)

These regulations provide for payments to be made by Health Boards in respect of the cost incurred by certain categories of persons (specified in regulation 3) for the supply of optical appliances prescribed following a sight test under the National Health Service. As a consequence of amendments made to the National Health Service (Scotland) Act 1978 by the Health and Social Security Act 1984, the supply of optical appliances will cease, on 1st July 1986, to be part of the general ophthalmic services provided under Part III of the 1978 Act. Optical appliances will continue to be supplied as part of the hospital eye service and regulation 2 provides for charges to be made for those supplies.

Under these regulations, whether a person's sight is tested under the general ophthalmic services (regulation 4) or the hospital eye service (regulation 5), a voucher is to be issued to him, if he appears eligible for a payment under the regulations. The voucher is required to bear a letter code which varies according to the type of appliance prescribed and indicates a monetary value (set out in the Table in Schedule 1). The patient may use the voucher towards the cost incurred by him for the supply of the optical appliance prescribed (regulation 6) and the supplier may claim a payment from the Health Board (regulation 7). The amount of that payment varies according to whether or not the patient is required to make a contribution (which has the effect of reducing the voucher's value) and whether or not the optical appliance is a complex appliance (regulation 9). In some hospital eye service cases, payment may be made direct to the patient if he has been supplied with his optical appliance without using his voucher (regulation 8). These regulations also contain provision for repayment of amounts wrongly paid (regulation 10), for signatures on behalf of those under disability (regulation 11) and transitional provisions (regulation 12). They effect revocations and amendments (regulation 13 and Schedule 3) mainly consequential upon the introduction of the provisions for payment and upon the new provision for charges in regulations 2.

SI 1986/966(
ISBN 0-11-066966-5

