



Liaison Body for Healthcare Benefits in kind within the European Union

Application form for an Entitlement Card issued in terms of the Health Care Convention between the Government of the Republic of Malta and the Government of the United Kingdom of Great Britain and Northern Ireland

Please fill in using **BLOCK LETTERS**

| | | | |
|---------------------------------------|----------------------|---------|----------------------|
| Name | <input type="text"/> | Surname | <input type="text"/> |
| Identity Card Number (Expiry Date) | <input type="text"/> | Tel/Mob | <input type="text"/> |
| Passport Number (Expiry Date) | <input type="text"/> | | |
| Date of Birth | <input type="text"/> | E-mail | <input type="text"/> |
| Postal Address | <input type="text"/> | | |

Persons who are not yet in possession of a residence certificate/permit may still apply for this scheme but will be covered on a provisional basis.

Declaration

I hereby declare that I reside in Malta or in Gozo and have consented to my personal details being disclosed. All the information given on this form is correct and complete to the best of my knowledge. I undertake to inform immediately the Entitlement Unit of any changes in my residence status. I agree to this scheme's terms and conditions of this scheme.

I declare that I do not work or receive a state pension:

I would like to receive notification/s through: E-mail
 SMS

Signature of Applicant

Date

FOR OFFICE USE ONLY

Above information authenticated and verified by:

Signature

Rubber Stamp

*Completed application forms are considered and processed as **confidential** documents.*

The unit retains the right to ask for further information to ascertain entitlement. All data is collected and processed in accordance with the General Data Protection Regulation (EU) 2016/679 (GDPR) and the Data Protection Act (Cap 586), the said Ordinance, other subsidiary legislation and the Data Protection Policy of the Department.

Terms and Conditions:

- The Entitlement Card issued will entitle holders to healthcare services in local public healthcare institutions on in-patient and out-patient basis as well as other specialist services provided for Maltese nationals.
- RHA Entitlement Card holders will **not** be entitled to treatment abroad including the UK, the European Health Insurance Card (EHIC) or long-term care and other things and services provided for under the Social Security Act and other legislation.
- Persons who do not submit a copy of the residence certificate/permit can only be granted a provisional cover.
- This document will no longer be valid should the Reciprocal Health Agreement cease to be renewed anytime before the expiry of the document.

Instructions:

- A separate application must be made for each family member.
- Kindly fill in and sign the application form.
- Applications may be submitted online/sent via e-mail on entitlement.health@gov.mt or handed in personally or by post provided accompanying documents (residence certificate/permit and/or valid UK passport) are duly authenticated.
- Applications are to be sent to the Entitlement Unit, Ground Floor, Ex-Outpatient Block, St. Luke's Hospital, G'Mangia Hill, G'Mangia, PTA 1010.
- For further information or in case of difficulty, you may consult our website: www.ehealth.gov.mt, phone the number shown on this application form or visit our office during the opening times shown hereunder. Make sure to bring along your residence certificate/permit and/or valid UK passport.
- Entitlement Unit opening hours: Monday to Friday 08:00 – 13:00