

Factsheet 61

Help with health costs

August 2025

About this factsheet

Most NHS services are free but there are charges for NHS prescriptions, dental treatment, sight tests, glasses and contact lenses, wigs and fabric supports.

This factsheet explains what happens with these charges:

- once you reach age 60, or
- if you receive Pension Credit Guarantee Credit.

It explains how the NHS Low Income Scheme can help with charges if you are on a low income and when you can claim for costs of travel to receive NHS treatment, including patient transport services.

The information in this factsheet is correct for August 2025 to July 2026. Benefit rates are reviewed annually and take effect in April but rules and figures can change during the year. The benefit rate information in this factsheet is correct for the period April 2025 to March 2026.

The information in this factsheet is applicable in England. If you are in Scotland, Wales or Northern Ireland, please contact Age Scotland, Age Cymru or Age NI for their advice about the rules in these countries. Contact details can be found at the back of this factsheet.

Contact details for any organisation mentioned in this factsheet can be found in the *Useful organisations* section.

Contents

1 Free NHS services when reaching age 60	3
2 Pension Credit – help with health costs	3
2.1 Guarantee Credit only or with Savings Credit	3
2.2 Savings Credit only	4
3 NHS Low Income Scheme	4
3.1 Do you qualify?	4
3.2 How entitlement is calculated	5
3.3 How to apply	5
3.4 Full help with health costs	6
3.5 Partial help with health costs	6
3.6 Expiry date and change of circumstances	6
3.7 Refunds for treatment received before applying	6
4 Proving your entitlement	7
4.1 Visiting the dentist	7
4.2 Visiting the optician	8
4.2.1 How much will I have to pay?	9
5 Healthcare Travel Costs Scheme	10
5.1 Rules of the Healthcare Travel Costs Scheme	10
6 Non-Emergency Patient Transport (NEPTS)	12
Useful organisations	14
Age UK	15
Support our work	15

1 Free NHS services when reaching age 60

When you reach the age of 60, you do not pay for:

- NHS prescriptions
- NHS-funded sight tests.

Flu jab

The annual flu jab is offered free of charge from the age of 65. It is free if you are under 65 and have a long-term health condition putting you at risk of complications if you catch flu, for example, a heart or lung condition, asthma, or diabetes. The flu jab is free if you receive Carer's Allowance or are an informal carer of an older person who relies on you for care. Ask at your GP practice if not sure if you can have a free flu jab.

2 Pension Credit – help with health costs

If you are on a low income and have reached State Pension age (SPA), you may be entitled to Pension Credit (PC). PC is a weekly benefit with two parts – Guarantee Credit and Savings Credit. If you reached SPA after 6 April 2016, you cannot make a new claim for Savings Credit.

You can receive PC Guarantee Credit on its own, or Guarantee Credit with Savings Credit, or Savings Credit on its own.

2.1 Guarantee Credit only or with Savings Credit

If you, or your partner if you have one, receive PC Guarantee Credit (with or without Savings Credit), you are automatically entitled to:

- free NHS dental checks and treatment
- a voucher towards the cost of glasses or contact lenses
- help towards travel costs to receive NHS treatment after being referred by a doctor, dentist or optician
- free NHS wigs and fabric supports.

Partner means your spouse or civil partner or someone you live with as though you are married or civil partners.

2.2 Savings Credit only

You are not automatically entitled to help with health costs if you receive PC Savings Credit only. You may qualify for help through the NHS Low Income Scheme. You can check your Pension Credit award letter if unsure about which parts of Pension Credit you receive.

If you need a copy of your letter, call the Pension Service on 0800 731 0469 or 0800 731 0464 (textphone). For more information about Pension Credit, see Age UK factsheet 48, *Pension Credit*, or information guide IG50, *Pension Credit*.

3 NHS Low Income Scheme

The NHS Low Income Scheme (LIS) may help if you have a low income and currently pay for:

- NHS prescriptions
- NHS dental checks and treatment
- glasses or contact lenses
- travel costs for NHS treatment following referral by a doctor, dentist, or optician
- NHS wigs and fabric supports.

3.1 Do you qualify?

You may be eligible for full or partial help with health costs if you have:

- a low income, and
- capital of £16,000 or less, or
- capital of no more than £23,250 and live permanently in a care home.

Capital includes money in a bank or other savings account, National Savings certificates, Premium Bonds, shares, unit trusts or other investments, and property you own except the house you live in.

When assessing your financial situation, Council Tax liability and housing costs are taken into account, so you may get help through LIS, even if you do not qualify for PC Guarantee Credit.

If you have a partner, you are assessed as a couple when calculating eligibility. Partner means spouse or civil partner or someone you live with as though you are married or civil partners.

For more information see www.nhs.uk/using-the-nhs/help-with-health-costs/nhs-low-income-scheme-lis/

You can download HC12, *A quick guide to help with health costs including charges and optical voucher values* from the NHS Business Services Authority website, or call 0300 123 0849 to order this leaflet.

3.2 How entitlement is calculated

You qualify for full help if your income is less than or equal to your weekly 'requirements', or is greater than this amount by no more than half the current cost of an NHS prescription. *Requirements* include: set personal allowances for you and your partner for daily living expenses, premiums for special needs, housing costs and council tax. See HC1 guidance notes, page B.

Every £250 or part of £250 of capital between £6000-£15,999 gives you a tariff income of a £1 a week which is used in the calculation. If your income exceeds your *requirements*, you may be entitled to partial help.

3.3 How to apply

You apply by completing an online application or a HC1 form. You can only apply online if you do not have capital or savings over £6,000.

If you live permanently in a care home and the local authority helps with the cost, there is a special short form HC1 (SC).

Download HC1 using the NHS link in section 3.1. To order forms HC1 and HC1 (SC) or for large print or other formats, call 0300 123 0849. For help to complete a form, call the Help with Health Costs helpline. Staff can provide an interpreter if English is not your first language.

They normally assess an application within 18 working days of receipt.

Depending on your circumstances, you receive full help (HC2 certificate) or partial help (HC3 certificate). Both certificates last between one and five years.

3.4 Full help with health costs

You receive an **HC2** certificate if you qualify for full help with health costs. Anyone named on the certificate and dependent children under 19 who normally live with you are entitled to full help with the cost of:

- NHS prescriptions
- NHS dental treatment
- a voucher, based on their prescribed lenses, towards the cost of glasses or contact lenses
- travel costs for NHS treatment after referral by a doctor, dentist or optician
- NHS wigs and fabric supports.

3.5 Partial help with health costs

You receive an **HC3** certificate if you qualify for partial help.

This certificate entitles you and others named on the certificate to limited help with health costs and states the maximum amount you must pay towards any costs.

3.6 Expiry date and change of circumstances

In most cases, you do not need to notify changes to your financial circumstances, and you can use your certificate until it expires. However, if it lasts for five years, certain changes may affect its validity, so contact the Help with Health Costs Helpline if your circumstances change.

If you claim help with health costs after your certificate expires, you may have to pay a penalty charge of up to £100.

3.7 Refunds for treatment received before applying

You can submit a claim for a refund at the same time as you apply to the LIS if you paid for dental treatment, glasses, wigs, fabric supports, or eligible travel costs within the past three months.

There is a separate HC5 form for each charge, for example HC5(D) for dental charges. Download the relevant form by following the NHS link in section 3.1 or call 0300 123 0849. Complete and return HC5 form and original receipt (if your refund relates to purchase of glasses, include a copy of your optical prescription). You can send a completed HC1 form at the same time.

4 Proving your entitlement

4.1 Visiting the dentist

A dental check-up allows your dentist to see if you have any dental problems currently, but may also detect early signs of problems, making them easier to treat or prevent them altogether. The time between check-ups can vary between three months and two years depending on your general oral health and any risk factors. Your dentist should discuss this with you at your check-up.

Tell the receptionist you are eligible for help when making an appointment and take your PC Guarantee Credit award letter or HC2 or HC3 certificate to your appointment as proof of entitlement.

Help is available for NHS treatment only. However, there are emerging gaps in the provision of NHS dentists across England, which may mean you experience difficulties accessing an NHS dentist. See Age UK factsheet 5, *Dental care: NHS and private treatment*, for information on finding an NHS dentist.

Pension Credit Guarantee Credit or named on HC2 certificate

You must sign a form when treatment starts but will not be charged.

Named on HC3 certificate

You must sign a form when treatment starts and pay either the amount on the certificate, the actual charge, or the maximum charge you can pay for the band of NHS treatment you had – whichever is the least.

Example

NHS dental treatment. If you had band 2 treatment and your certificate says you should pay £30 towards dental treatment, you pay only £30, not the band 2 full charge of £75.30.

4.2 Visiting the optician

An NHS-funded sight test is free if you are aged 60 or over. As well as checking your vision, it can pick up early signs of eye conditions such as glaucoma and problems such as diabetes and high blood pressure.

You should have a sight test every two years or as advised by your optician. If you have difficulty visiting the optician due to illness or disability, you can have a sight test at home. Contact NHS England or your local Healthwatch for a list of local opticians who do home visits.

When booking a test, explain you are eligible for help if you need new glasses or contact lenses. Take your PC Guarantee Credit award letter or HC2 or HC3 certificate to your appointment as proof of entitlement.

After a sight test, the optician must give you a copy of your optical prescription, even if you do not need glasses or contact lenses. If your prescription has changed and you qualify for an optical voucher, the optician completes a GOS 3 form – the optical voucher's official name.

If prescribed bifocals or varifocals, one voucher applies. If you need two pairs of glasses, a reading and a distance pair, you have a voucher for each prescription.

You can have an NHS optical voucher every two years if your prescription changes or your glasses are no longer functional due to wear and tear. You are not eligible for an NHS optical voucher if your prescription is unchanged and your glasses are usable.

You do not need to have a sight test and use the voucher at the same opticians. You can take the NHS voucher to an optician of your choice as long as they accept them.

4.2.1 How much will I have to pay?

Voucher values

The voucher value depends on the type and strength of lens you need - the stronger the lens, the higher the value.

For more information, see:

www.nhs.uk/nhs-services/opticians/nhs-voucher-values-for-glasses-and-lenses

Pension Credit Guarantee Credit or named on HC2 certificate

This entitles you to the value of the voucher for the lens you need. Opticians should have several pairs of glasses with appropriate lens for your voucher. If they do not, try another optician.

If your glasses or contact lenses cost more than the value of your voucher, you must pay the difference.

Named on HC3 certificate

This entitles you to partial help with the cost of contact lenses or glasses fitted with the type of lens you need. Your certificate indicates how much you must contribute towards the voucher value for the lens you need.

Example

If your voucher value is £64.26 and your certificate says you must contribute £14, you are entitled to £50.26 (£64.26 – £14) towards the cost of glasses.

Help with cost of repairs or replacement glasses

If breakage or loss is due to illness, you may get help with the cost of repairing or replacing glasses if you are entitled to a voucher. Speak to your optician or call the Help with Health Costs helpline.

If you are not entitled to a voucher, you may wish to check whether your insurance or a warranty will cover the cost instead.

(Factsheet continues overleaf).

5 Healthcare Travel Costs Scheme

You can submit a claim through the Healthcare Travel Costs Scheme (HTCS) for necessary travel for NHS tests or treatment if you:

- receive PC Guarantee Credit, or
- are named on an HC2 or HC3 certificate.

Pension Credit Guarantee Credit or named on HC2 certificate

You can claim a full refund of reasonable weekly travel expenditure.

Named on HC3 certificate

You can claim partial help with reasonable weekly expenditure. Your certificate indicates how much you should contribute to the overall cost.

Example

If your HC3 certificate indicates you should contribute £5 per week and your weekly travel costs are £15, you can claim a refund of £10.

5.1 Rules of the Healthcare Travel Costs Scheme

If you are referred to hospital or other NHS premises for diagnostic tests, treatment, or pre or post-operative checks by a doctor (GP or hospital doctor), dentist, optician or other ophthalmic professional, you may be able to claim a refund for reasonable travel expenses under the Healthcare Travel Costs Scheme (HTCS).

To be eligible, the services:

- must not be usual services available through your GP practice, dentist, or optician, and

Example

You visit your GP with a swollen foot following a fall. Your GP refers you to a neighbouring health centre with x-ray facilities to check for broken bones.

As you make an extra journey, in this case to *different premises* for the x-ray, you can claim travel expenses.

- you must need to make an extra journey to go to hospital or NHS premises for the test, treatment or consultation.

This applies whether the test or treatment is provided at the premises where your GP or another health professional who issued the referral is based or at a different location (hospital or clinic).

Claims for travel to hospital

You submit a claim, with receipts, to the hospital cashier's department on the day of your appointment and they reimburse you in cash.

If it would be difficult to pay for travel upfront and then claim money back, contact the cashier's department to explain your difficulty and ask for payment in advance. Alternatively, contact your local Integrated Care Board (ICB) for advice.

Claims for travel to non-hospital premises

Ask the health professional if their referral to non-hospital NHS premises qualifies under HTCS rules. If it does, ask how to submit a claim, as non-hospital-based premises may not have a cashier's office.

You may be asked to complete form HC5(T) refund for travel, and post it back to the address on the form. See section 3.7 for more information.

Travel options

If you have any questions about travel arrangements, speak to the hospital *before* you travel.

You are expected to use the cheapest suitable means of transport for the time you need to travel – bearing in mind the journey, your medical condition, age, and other relevant factors.

You can use public transport, community transport, a voluntary car scheme or private car. Taxis are usually an exception, so if this seems to be the only option, talk to the hospital or clinic before you travel.

You can also claim for unavoidable car parking and road tolls.

If travelling by car to a London hospital within the Congestion Charge zone or the Ultra Low Emission Zone area, you may be reimbursed.

If your appointment is at a hospital within a 'clean air zone' and you are required to pay the daily charge, you may be able to get an exemption.

Claiming for an escort

If a hospital doctor, GP, dentist, or other health professional believes you need someone to travel with you for medical reasons, you can claim your escort's travel expenses as part of your claim.

Before travelling, ensure you have confirmation, preferably written, that an escort is necessary.

Note

You cannot claim for travel costs to visit someone in hospital under the HTCS. You can contact your local council, as it may have money to help with such costs for people on a low income.

6 Non-Emergency Patient Transport (NEPTS)

NEPTS is offered to patients who have a condition or need for supported transport to ensure their safety, safe mobilisation, condition management or recovery. If you are eligible, it is free of charge. You will only be considered if one of the following applies:

- you have been referred by a doctor, dentist or optician to NHS funded health services for diagnosis or treatment – excluding primary care services, or
- you are being discharged from NHS funded treatment.

You must satisfy one or more of the of the criteria below. It is likely that you will be eligible if you:

- have a medical need, such as the need for specialised equipment during the journey
- have a cognitive or sensory impairment which means that you are unable to make your own way with relatives or friends
- have a significant mobility need, for example you may need to travel lying down
- are travelling to or returning from in-centre haemodialysis.

You may also be eligible if there is a safeguarding concern regarding independent travel or you have wider mobility or medical needs.

For further details about the eligibility criteria, see:
www.england.nhs.uk/publication/non-emergency-patient-transport-services-eligibility-criteria

Your local Integrated Care Board (ICB) may add further eligibility criteria to those listed above.

To find out if you are eligible and how to access patient transport in your area, speak with your GP or healthcare professional involved in your care.

You may be able to travel with a carer, relative or friend if your needs are such that you require the support of someone who knows you well or has particular skills to support you.

Useful organisations

Healthwatch England

www.healthwatch.co.uk

Telephone 03000 683 000

Each local authority has a local Healthwatch that seeks views of local people and provides information and advice about local health and care services. Find your local Healthwatch by using the search facility on their website, calling Healthwatch England, or contacting your local authority.

Help with Health Costs Scheme

www.nhsbsa.nhs.uk/nhs-low-income-scheme

Helpline: 0300 330 1343

The NHS Business Services Authority administers the Help with Health Costs scheme. You can read basic information about the scheme on their website.

NHS Business Services Authority

www.nhsbsa.nhs.uk

Telephone: 0191 283 8924

Arm's Length Body of the Department of Health and Social Care, delivering a range of national services to NHS organisations, NHS contractors, patients and the public.

NHS England

www.england.nhs.uk

Telephone: 0300 311 22 33

NHS England leads the NHS in England. It can provide lists of some local NHS services.

NHS website

www.nhs.uk

A government website that provides information on health conditions, NHS services and how to claim help with health costs.

Pension Service (The)

www.gov.uk/contact-pension-service

Telephone: 0800 731 0469

Part of the Department for Work and Pensions providing information about State Pension and Pension Credit claims.

Age UK

Age UK provides advice and information for people in later life through our Age UK Advice line, publications and online. Call Age UK Advice to find out whether there is a local Age UK near you, and to order free copies of our information guides and factsheets.

Age UK Advice

www.ageuk.org.uk

0800 169 65 65

Lines are open seven days a week from 8.00am to 7.00pm

In Wales contact

Age Cymru Advice

www.agecymru.wales

0300 303 44 98

In Northern Ireland contact

Age NI

www.ageni.org

0808 808 75 75

In Scotland contact

Age Scotland

www.agescotland.org.uk

0800 124 42 22

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The evidence sources used to create this factsheet are available on request.

Contact resources@ageuk.org.uk

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