

Apply to buy back opted-out service – 2015 Remedy

This form is only for people with eligible service who opted out of their public service pension scheme between 1 October 2014 and 31 March 2022.

These dates refer to 2015 Remedy. You can read more about 2015 Remedy on our website at <https://pensions.gov.scot/2015-remedy>.

You can use this form to buy back the full – or partial – amount of your opted-out service that falls within these dates.

Paying money back

If you apply to buy back opted-out service and are accepted, we'll calculate what the cost will be to you. This amount will include interest.

Changing your mind

You can change your mind about buying back opted-out service once you know what it'll cost you.

Closing date for applying

You have 12 months from the date on your RSS to apply.

More information

You can read more about buying back into your pension on our website at <https://pensions.gov.scot/nhs/nhs-remedy-hub/nhs-remedy-contingent-decision>.

Your details

Superannuation number (if known)

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National Insurance Number

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First name(s)

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Last name

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Previous last name(s) (if applicable)

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Title (optional)

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Date of birth

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Address

Postcode

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Phone number (landline or mobile)

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Personal email address

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1. Explain briefly the reason(s) why you opted out of the pension scheme.

2. Tick which box applies:

I'm applying to buy back **all of my service** for the remedy period

I'm applying to buy back **some of my service** for the remedy period

3. Your employment history

Please include details of your employment history for the period(s) of service you're applying to buy back.

Employer name (for example, NHS Greater Glasgow and Clyde)	Pay/staff reference (if known)	Period from	Period to

4. Did you opt out of the NHS Pension scheme as part of the Recycling of employer contributions (REC) payment scheme from in 2019/2020?

Yes

No

5. Declaration

I confirm that, if the discrimination had not happened, I – or the member I am representing – would not have opted out of the pension scheme.

I declare that the information I have provided in this form is true, to the best of my knowledge.

Your name

Your signature

Date

 / /

Return your form

Return your completed application form to us.

You can do this by email or post.

Email:

SPPAcustomercare@gov.scot

Post:

Scottish Public Pensions Agency

7 Tweedside Park

Tweedbank

Galashiels

TD1 3TE