



SCOTTISH EXECUTIVE

Health Department
Human Resources Directorate

St. Andrew's House
2 Regent Road
EDINBURGH
EH1 3DG

Dear Colleague

STANDARD CAPITATION FEE SUPPLEMENT 2003-04: AMENDMENT TO THE STATEMENT OF FEES AND ALLOWANCES

Summary

1. This circular amends the relevant provisions of the Statement of Fees and Allowances (SFA) to allow payment of the Standard Capitation Fee Supplement to General Practitioners, in preparation for the introduction of the Quality and Outcomes Framework, as set out in 'Investing in General Practice'.
2. This amendment to the SFA for the financial year 2003-04 is to take immediate effect.

Background

3. Standard Capitation Fee Supplement (SCFS) Payments are to be made in respect of the count of patients on the practitioner's actual list at 1st July 2003.
4. Payments are only to be made in respect of patients for whom General Practitioners receive a standard capitation fee. This means that General Practitioners will not receive payments for those patients for whom they do not receive a standard capitation fee due to the exclusions stated in paragraph 73.1. They will also not receive payments for those patients covered by the capitation additions in paragraph 82.
5. The payments are to be treated as Group 3 - partially superannuable - for the purposes of the NHS Pension Scheme.
6. Standard Capitation Fee Supplement payments are to be wholly disregarded when calculating sums due under the Minimum Practice Income Guarantee.

31 October 2003

Addresses

For action

Chief Executives of Primary Care
Trusts
Chief Executives of Island NHS
Boards
General Medical Practitioners

For information

Chief Executives of NHS Boards
Chief Executives of NHS Trusts
Medical Directors of NHS Trusts
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Personal Medical Services

7. GPs who are participating in Personal Medical Services (PMS) schemes are not providing general medical services and are therefore not entitled to receive payments under these arrangements. Primary Care Trusts/NHS Boards which contain PMS schemes should ensure that PMS contracts are reviewed and where appropriate include provisions to achieve the objectives of this circular. Where there is a substantial variation to existing PMS contracts applications can be made to Scottish Ministers, otherwise variations should be agreed locally between the PCT/NHS Board and the PMS scheme.

Action

8. Primary Care Trusts/NHS Boards are requested to bring this Circular to the attention of GP practices in their area and their Area Medical Committee for the attention of the Secretary of the GP sub-committee.

Yours sincerely



MIKE PALMER
Assistant Director (Workforce and Policy)

ANNEX A

AMENDMENT TO THE STATEMENT OF FEES AND ALLOWANCES

Scottish Ministers, pursuant to regulation 35(1) of the National Health Service (General Medical Services) (Scotland) Regulations 1995, hereby determine that paragraphs 21 and 73.1 of the Statement of Fees and Allowances be amended as set out in Annex B for the financial year 2003-04. These amendments shall take immediate effect.

ANNEX B

AMENDMENT TO THE STATEMENT OF FEES AND ALLOWANCES

PARAGRAPH 21

Eligibility

21.1 Capitation fees will be paid in respect of patients on the personal list of a practitioner.

Method of Payment

21.2 Payment will be made at the three rates set out in Schedule 1 to paragraph 1. The Primary Care Trust/NHS Board will pay automatically the appropriate amount on the ages of the patients on the last day of the preceding quarter.

Stock Order Abatement

21.3 The 1% abatement to the standard capitation fee which applied in certain circumstances was abolished from 1 April 2000. This was agreed as part of the overall arrangements for influenza immunisation as it was not possible to negotiate an Item of Service payment for the <65 at-risk group.

Standard Capitation Fee Supplement for Quality Preparation: 2003-04

21.4 For financial year 1 April 2003 to 31 March 2004 standard capitation fees are being increased in the expectation that all practitioners intend to participate in the Quality and Outcomes Framework set out in 'Investing in General Practice'.

21.5 The payment will be made to individual GPs on the basis of £1.54 per patient using the actual GP list size at 1st July 2003, and is to be treated as group 3 - partially superannuable for the purposes of the NHS pension scheme

2.16 Payments will only be made in respect of patients for whom practitioners receive a standard capitation fee.

21.7 The Supplement is not to count towards the calculation of a practice's Minimum Practice Income Guarantee for 2004-05.

CONSEQUENTIAL AMENDMENT

PARAGRAPH 73.1

73.1 Except as indicated in paragraphs 73.2 and 73.4 below, standard capitation fees and the capitation additions described at paragraphs 82.2 (**but not Supplementary Capitation Fees for Quality Preparation in 2003-04 described in paragraphs 21.3 et seq**) will be paid quarterly, at one-fourth of the annual rates set out in Paragraph 1/Schedule 1, in respect of all patients included in the practitioner's normal list on the first day of the quarter. Similarly, capitation fees for child health surveillance and deprivation and payments for health promotion programmes will be paid quarterly at one-fourth of the specified annual rate. Where, however, the number of patients on the normal list exceeds the maximum number permitted under Regulation 24(1) the said payments will not exceed an amount calculated by reference to that maximum together with: