

Northern, Eastern and Western Devon
Clinical Commissioning Group

PERSONAL MEDICAL SERVICES (PMS) REVIEW

Process for NEW Devon CCG



Personal Medical Services Review

- Personal Medical Services (PMS) and General Medical Services (GMS) are the two main contract types for general practice
- PMS review moves all practices to an equivalent level of funding for their provision of core services (same as GMS).
- NHS England has set out the national requirements for the review of PMS contracts
- PMS Contract review is running in parallel with movement to equity for General Medical Services (GMS)

PMS Review

- Review process identifies a 'PMS Premium' that will be reinvested by the CCG
- The PMS Premium must be invested in general practice services and all practices entitled to have an equal opportunity to earn the premium
- The funding that a PMS or GMS practice will receive is weighted for workload and unavoidable costs.

Carr-Hill Formula

Drivers of workload at GP practice level

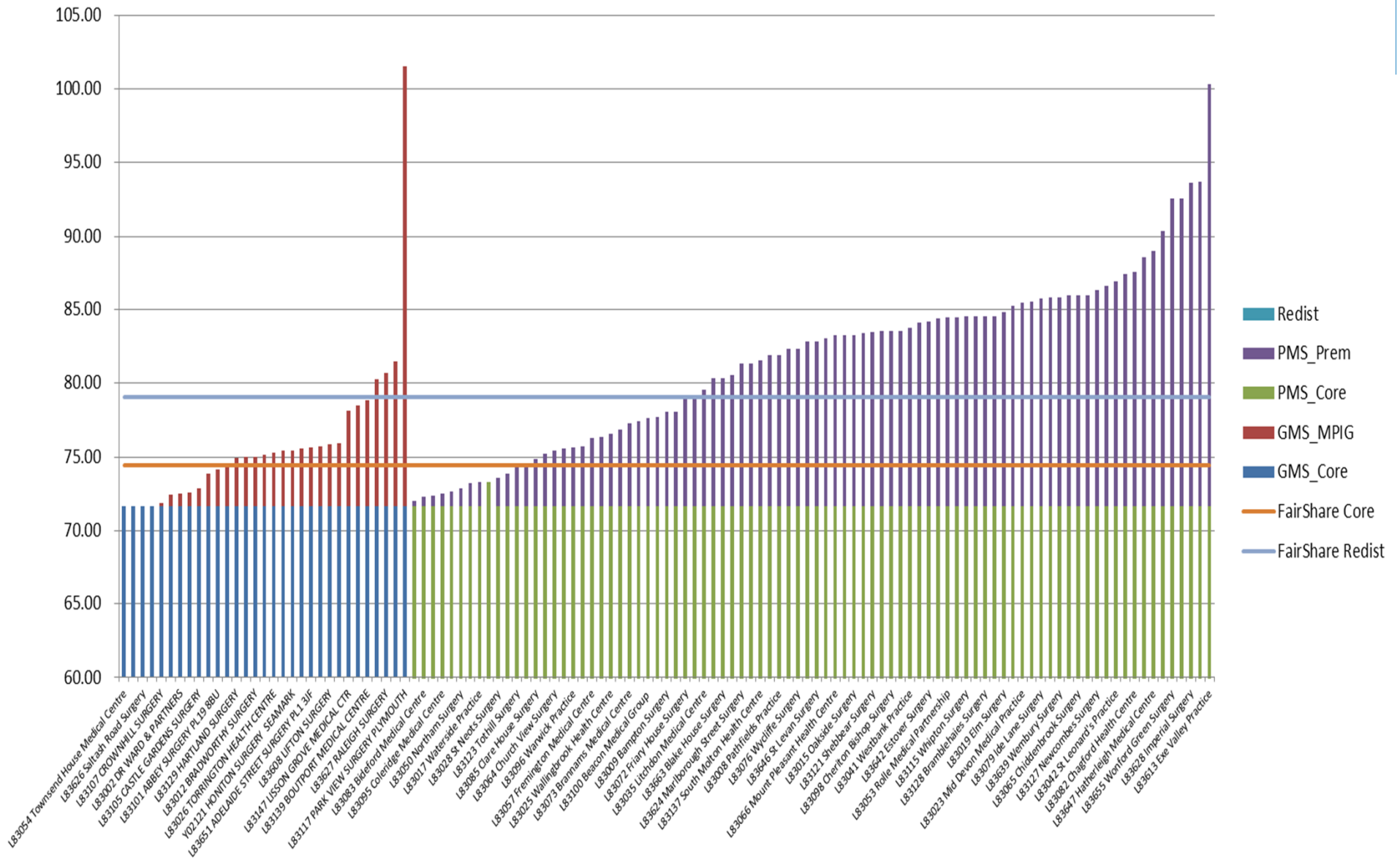
- Patient age and sex
- Nursing and Residential home patients
- Additional needs of patients(morbidity and mortality)
- Adjustment for list turnover

Unavoidable costs

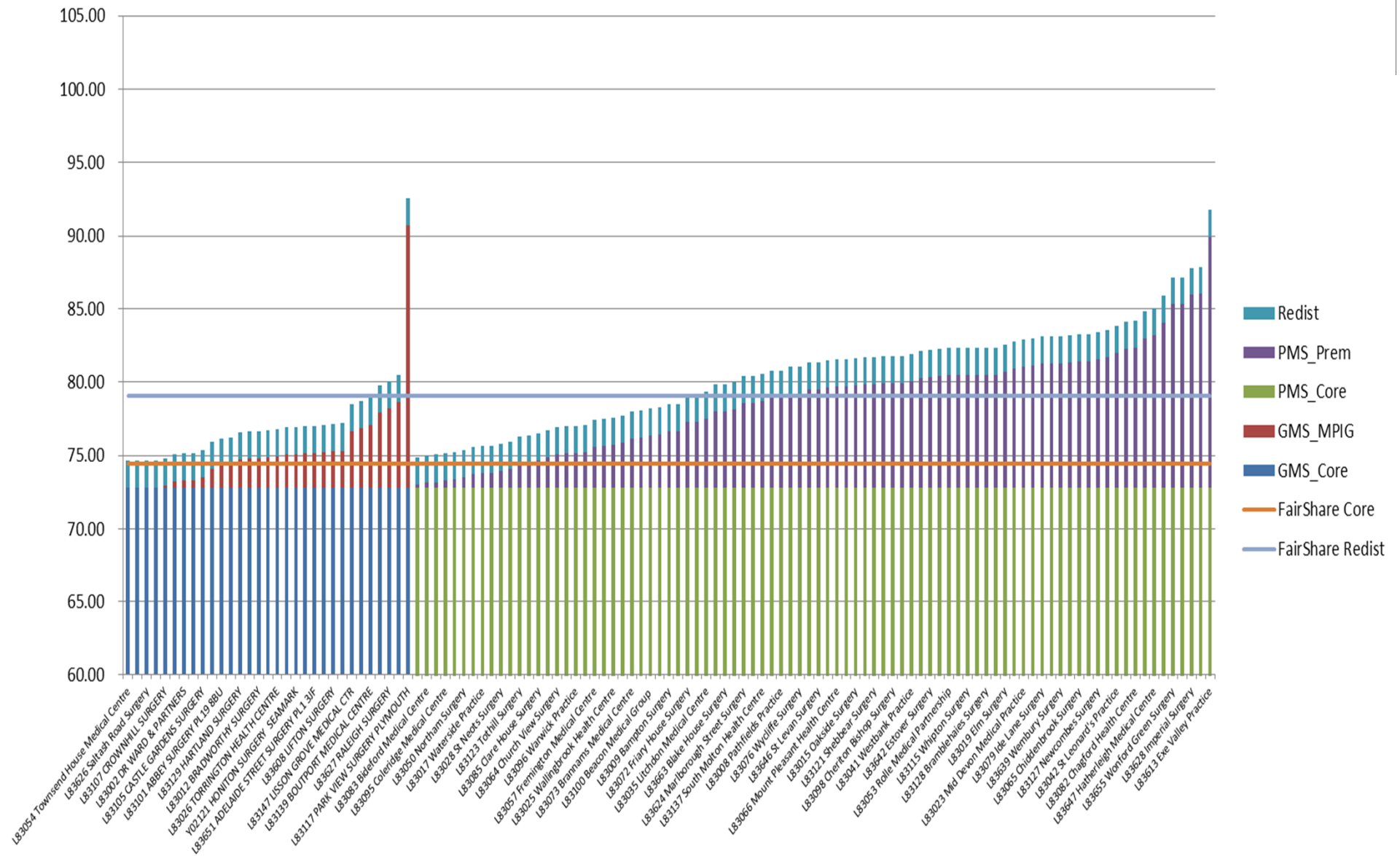
- Staff market forces
- Assessment of rurality

NEW Devon CCG has requested that Public Health review the effectiveness of the Carr-Hill formula, and whether it should look to make differential investment in relation to deprivation, student populations, travellers, rurality and ethnicity.

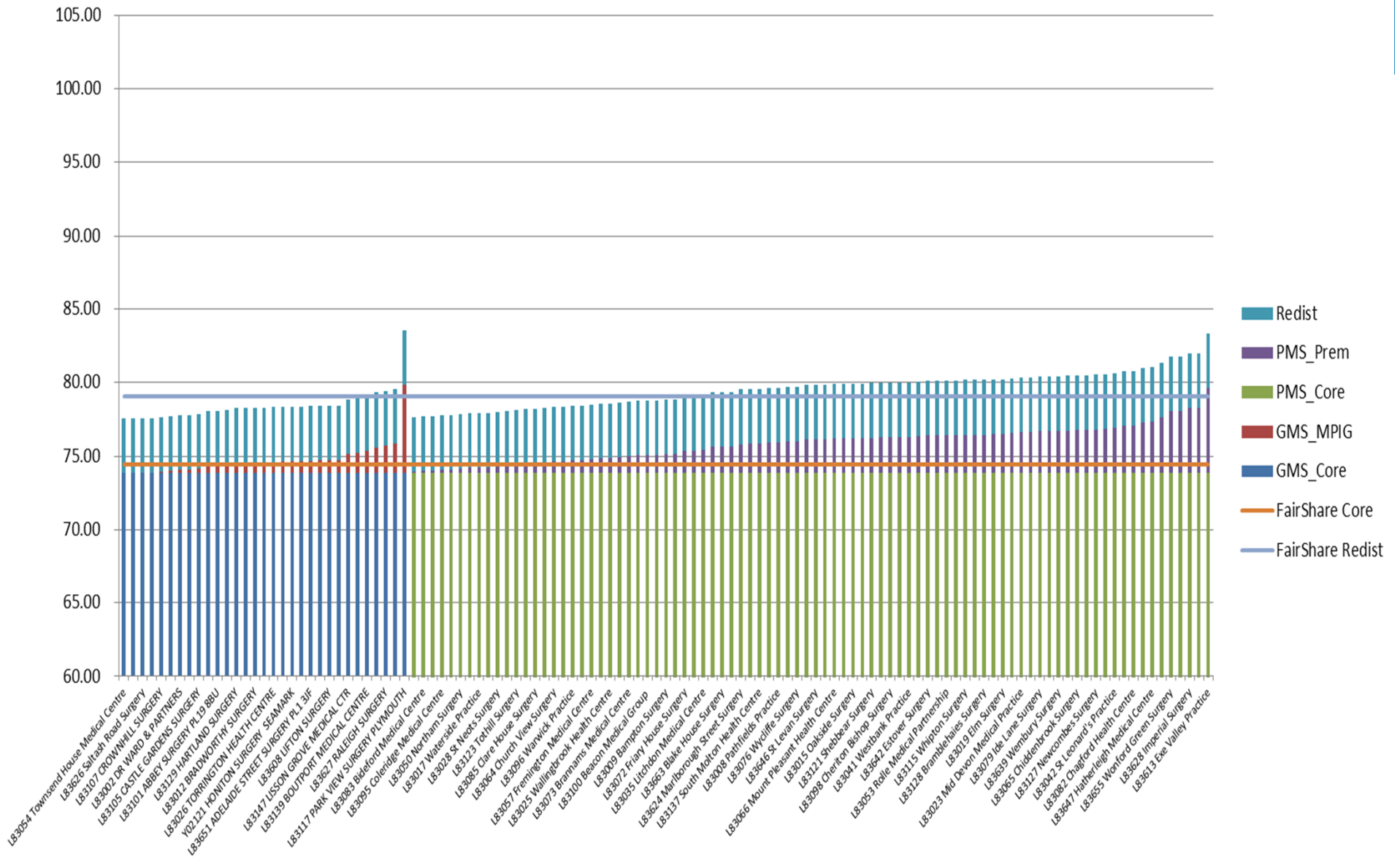
2015/16



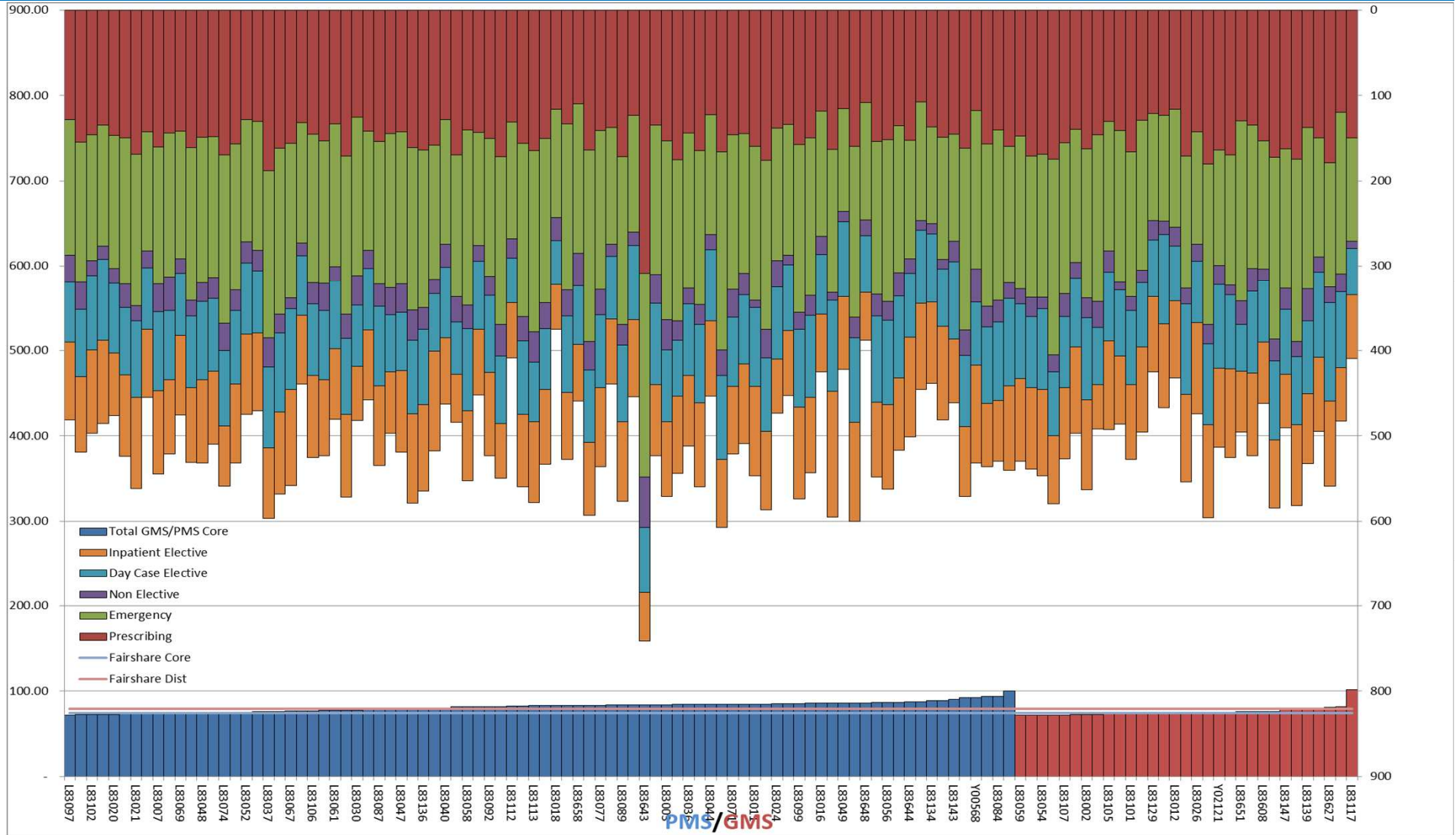
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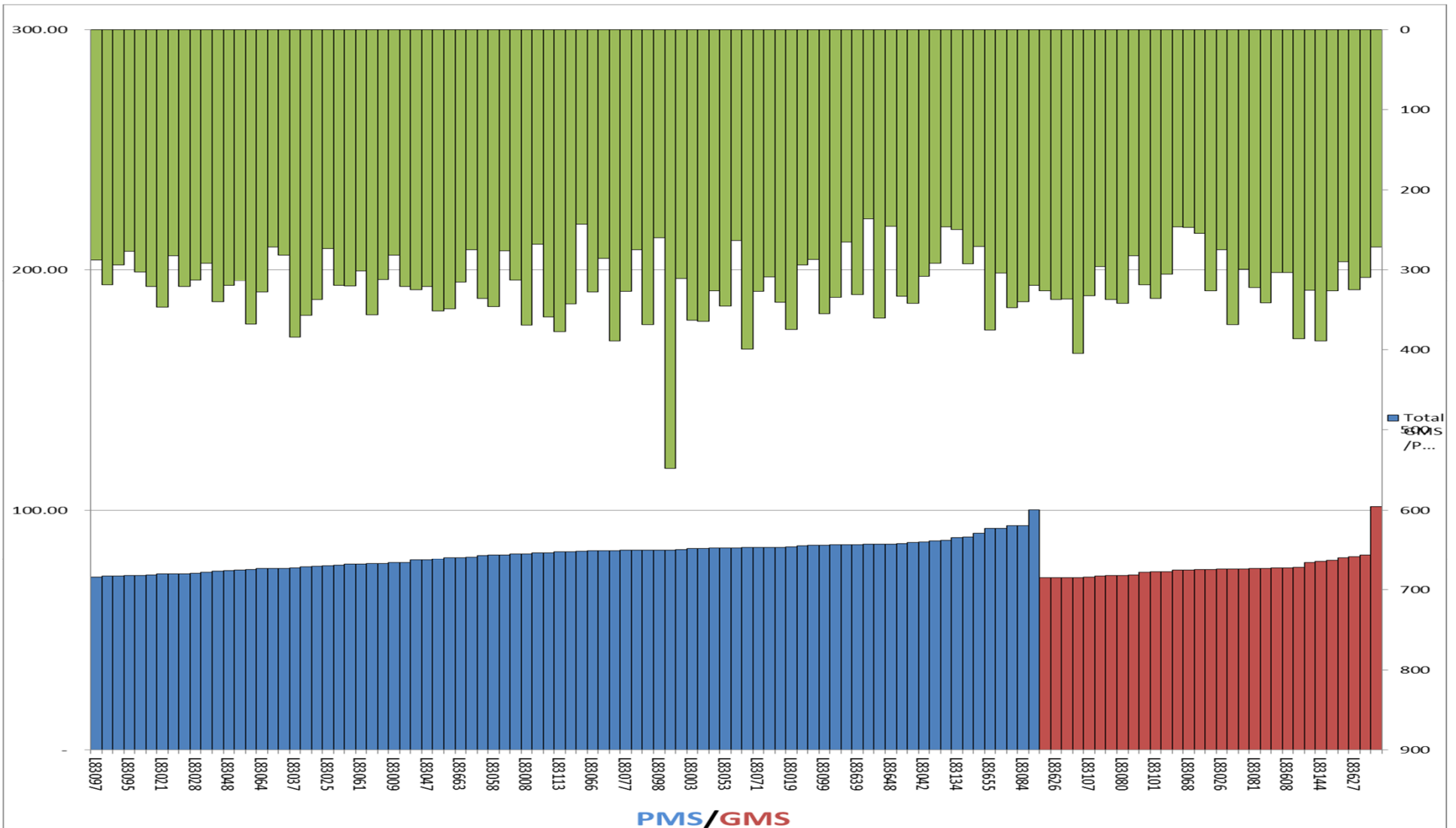
2019/20



PMS / GMS Investment Levels versus Use of other Resources



PMS / GMS Investment versus Use of Resources (Emergencies)



FINANCES

General Medical Services

- 7 year pace of change to equity across GMS (MPIG redistribution)
- 2016/17 is Year 3 of 7
- Net loss to NEW Devon CCG of £30k per annum

Personal Medical Services

- 5 year pace of change to equity across PMS
- 2016/17 is Year 1 of 5
- Premium Reinvestment of approx. £800k per annum across both PMS and GMS practices

APMS

- Excluded from this process

FINANCE – Equity

Impact across Localities

- PMS Premium is taken out of PMS Contracts by NHSE
- PMS Premium is redistributed by CCG's (requires transfer of resources from NHSE to CCG)

- At end of Year 5 all practices have equal £'s per weighted patient
- Moves money between Localities:
 - £998k from Eastern Devon
 - £595k to Northern Devon
 - £256k to Western Devon

IMPLICATIONS

- GP practices who are currently funded above average will see a reduction in the funding that their practice receives.
- Movement to a national average, and reinvestment of the Premium will mean that monies move across NEW Devon CCG localities.
- Movement of monies when primary care is facing challenges in relation to capacity and recruitment.
- Managing expectations around the reinvestment over the 5 year pace of change

SUMMARY

- Movement to equitable funding with monies moving from those practices with above average core funding to those practices with below average funding.
- All monies to be reinvested in General Practice
- Pace of change of 5 years