

Health and Social Care Act 2012

2012 CHAPTER 7

PART 3

REGULATION OF HEALTH AND ADULT SOCIAL CARE SERVICES

[^{F1}CHAPTER 4

THE NHS PAYMENT SCHEME

[^{F1}114D Objections to proposed NHS payment scheme

- (1) This section applies where—
 - (a) within the consultation period under section 114C, NHS England receives objections to the proposed NHS payment scheme from one or more integrated care boards or relevant providers, and
 - (b) either or both of the following apply—
 - (i) the objection percentage for integrated care boards exceeds the prescribed percentage;
 - (ii) the objection percentage for relevant providers exceeds the prescribed percentage.
- (2) In subsection (1)(b) the "objection percentage" is the proportion (expressed as a percentage) of integrated care boards or (as the case may be) relevant providers that objected.
- (3) NHS England must consult such persons as appear to NHS England to be representative of the integrated care boards or relevant providers from whom objections were received.
- (4) If, having complied with subsection (3)—
 - (a) NHS England decides to make amendments of the proposed NHS payment scheme that are, in its opinion, significant, and

Changes to legislation: Health and Social Care Act 2012, Section 114D is up to date with all changes known to be in force on or before 30 April 2024. There are changes that may be brought into force at a future date. Changes that have been made appear in the content and are referenced with annotations. (See end of Document for details) View outstanding changes

(b) it would, in NHS England's opinion, be unfair to make the amendments without further consultation,

NHS England must consult again under section 114C.

- (5) If, having complied with subsection (3), NHS England decides not to amend the proposed NHS payment scheme, it may publish the scheme but, before doing so, must—
 - (a) publish a notice stating that decision and setting out the reasons for it, and
 - (b) send a copy of the notice to—
 - (i) the persons consulted under subsection (3), and
 - (ii) the integrated care boards or relevant providers from whom objections were received.]

Textual Amendments

F1 Pt. 3 Ch. 4 substituted (1.7.2022 but only for the insertion of ss. 114C, 114D for specified purposes, 1.4.2023 in so far as not already in force) by Health and Care Act 2022 (c. 31), s. 186(6), Sch. 10 para. 3; S.I. 2022/734, reg. 2(b) (with regs. 13, 29, 30); S.I. 2023/371, reg. 2(d)

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Changes and effects yet to be applied to the whole Act associated Parts and Chapters: Whole provisions yet to be inserted into this Act (including any effects on those provisions):

- Pt. 9 Ch. 1B inserted by 2022 c. 31 s. 96
- s. 102(4)(ba) inserted by S.I. 2019/93, Sch. 1 para. 13(3) (as substituted) by S.I. 2019/1245 reg. 28 (This amendment not applied to legislation.gov.uk. The affecting statutory instrument has no legal effect. It was made under a procedure which meant that it ceased to have effect 28 days after signing unless it was debated and approved in Parliament within that time. It was not debated and approved within 28 days, so it has expired with no effect.)
- s. 105(3A)(3B) inserted by 2013 c. 24 Sch. 14 para. 21
- s. 106(3A)(3B) inserted by 2013 c. 24 Sch. 14 para. 22
- s. 250(2)-(2B) substituted for s. 250(2) by 2022 c. 31 s. 95(2)(a)
- s. 250(6)-(6D) substituted for s. 250(6) by 2022 c. 31 s. 95(2)(d)
- s. 251251ZA substituted for s. 251 by 2022 c. 31 s. 95(3)
- s. 251C(6A) inserted by 2022 c. 31 s. 95(4)(a)
- s. 259(1)(aa)(b) substituted for s. 259(1)(b) by 2022 c. 31 s. 98(b)
- s. 259(1)(aa) words substituted by S.I. 2023/98 Sch. para. 17(11)(a)(iii) (This amendment comes in force at the same time as 2022 c. 31, s. 98 comes into force)
- s. 259(10A)(10B) inserted by 2022 c. 31 s. 98(h)
- s. 304(5)(ja) inserted by 2022 c. 31 s. 95(5)