#### STATUTORY INSTRUMENTS

# 1992 No. 635

# The National Health Service (General Medical Services) Regulations 1992

# **PART VI**

# PAYMENTS TO DOCTORS

### **Payments**

- **34.**—(1) In respect of each financial year the FHSA shall make payments to doctors with whom arrangements for the provision of general medical services exist in its locality, in accordance with such rates and subject to such conditions as the Secretary of State may determine and publish in a Statement, after consultation with such organisations as he may recognise as representing doctors with whom arrangements for the provision of general medical services exist.
  - (2) The determination under paragraph (1) shall make provision for the following matters—
    - (a) basic practice allowance, and additional allowances for designated areas, seniority and employment of assistants;
    - (b) standard capitation fees and capitation fees for elderly patients;
    - (c) fees for items of service, maternity medical services and temporary residents;
    - (d) fees and allowances for the supply of drugs and appliances and for rural practice;
    - (e) allowances for training doctors and for study leave;
    - (f) allowances for initial practice or inducement to practise;
    - (g) allowances for practice expenses and, in particular, allowances for practice staff including any who are spouses or other relatives and who provide qualifying services in accordance with the determination;
    - (h) allowances for improvement of premises;
    - (i) group practice loans;
    - (j) fees for contraceptive services;
    - (k) payments in relation to the making of arrangements for, and payments for, the temporary provision of general medical services;
    - (l) capitation fees in respect of patients who participate in a consultation pursuant to paragraph 14 of the terms of service;
    - (m) capitation fees in respect of patients to whom child health surveillance services are provided;
    - (n) capitation fees in respect of patients living in deprived areas;
    - (o) fees for minor surgery sessions undertaken;
    - (p) fees in respect of the provision of health promotion clinics approved by the FHSA;
    - (q) target payments in respect of immunisations provided;

- (r) target payments in respect of cervical cytology;
- (s) allowances for the employment of locums by a doctor during maternity leave, sickness or study leave;
- (t) allowances for undergoing approved post-graduate education;
- (u) allowances for the employment of doctors by isolated single-handed doctors;
- (v) allowances in respect of providing placements in the practice for undergraduate medical students;
- (w) transitional payments in consequence of changes to doctors' terms of service.
- (3) The determination under paragraph (1) may be amended from time to time by the Secretary of State after consultation with the organisations referred to in that paragraph and any amendments shall also be published in a Statement.
- (4) Where a doctor is in the medical list of more than one FHSA, any payment due to the doctor may, where the Statement so provides, be made on behalf of all FHSAs concerned.

# Claims and overpayments

- **35.**—(1) Any claim for fees, allowances or other remuneration by doctors shall be made in accordance with the provisions of the Statement under regulation 34.
- (2) Where the FHSA considers that a payment has been made in circumstances when it was not due, the FHSA, except to the extent that the Secretary of State on the application of the FHSA directs otherwise, shall draw the overpayment to the attention of the doctor and—
  - (a) where the overpayment is admitted by him; or
  - (b) where the overpayment is not so admitted but, the matter having been referred under regulation 7(1) of the National Health Service (Service Committees and Tribunal) Regulations 1992(1) for investigation, the FHSA, or the Secretary of State on appeal under regulation 10(1)(c) of those Regulations, decides that there has been an overpayment,

the amount overpaid shall be recoverable either by deduction from the doctor's remuneration or in some other manner.

(3) Recovery of an overpayment under this regulation shall be without prejudice to the investigation of an alleged breach of the terms of service.