

## PWYLLGOR ARCHWILIO A SICRWYDD RISG AUDIT AND RISK ASSURANCE COMMITTEE

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	18 April 2023
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	General Medical Services (GMS) PPV Update
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Jill Paterson, Director of Primary Care, Community and Long Term Care
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Tracey Huggins, Head of General Medical Services and Community Pharmacy (Contracting)

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Gwybodaeth/For Information

### ADRODDIAD SCAA

#### SBAR REPORT

##### Sefyllfa / Situation

This paper provides an updated position on Post Payment Verification for General Medical Services (GMS).

Since the transition of family practitioner payments away from the National Health Application and Infrastructure Services to Business Services Organisation in Northern Ireland's Family Practitioner Payment System in December 2021, the Post Payment Verification (PPV) service provided by NHS Wales Shared Services Partnership (NWSSP) has been largely restricted. It was NWSSP's intention to agree with all individual Health Boards to re-instate the PPV service in the second half of 2022/23, and to undertake reviews of 222 practices across Wales in 2022/23, with resumption of full reviews from April 2023.

Due to difficulties experienced with data collection and submission from practices to NWSSP Primary Care Services using the new system, NWSSP Primary Care Services is unable to meet this target or deadline.

##### Cefndir / Background

NHS Digital has traditionally provided the Open Exeter system used for making payments to general practices in Wales, via its National Health Application and Infrastructure Service (NHAIS). On notification of NHS Digital's intention to decommission this system, NWSSP began the process of procuring an alternative system. In April 2020 the contract for provision of this service was awarded to the Business Services Organisation in Northern Ireland, to be delivered via their Family Practitioner Payment System (FPPS), and this became operational in December 2021. Following the implementation of the FPPS, the claims verification process was designed around practices submitting evidence in support of claims via the payment system; and the Payment Team then collating the supporting evidence submitted at the end of each payment cycle (either monthly or quarterly). This is then passed on to the Post Payment Verification Team to form a claim sample for each practice. The sample shows payments made against claims, based on individual NHS numbers, and forms the basis of the PPV process.

The claims process in NHS Northern Ireland differs from that in Wales in that there is no requirement for practices to submit evidence to support their claims at the point of claiming, and therefore this not an existing feature within the FPPS. This was a recognised difference from the outset, and it was hoped that it could be solved through system design changes within the FPPS itself to replicate some of the previous Open Exeter/NHAIS functionality. This allowed for claims to be submitted and then matched directly against NHS numbers provided as evidence within the payment system, resulting in a “cleansed” sample being available to the Post Payment Verification Team. Unfortunately, despite much work within both the Wales and Northern Ireland teams, this has not proved possible.

In short, this functionality was never designed to be built into the original system and has proved too problematic to resolve in the way originally anticipated. As a consequence, the Post Payment Verification Team has been unable to receive collated practice samples and is therefore unable to meet the planned review of 222 practices across Wales as anticipated.

### Asesiad / Assessment

There are two key risks in the current situation:

1. Errors in claims go undetected and un-reconciled (Finance)
2. NWSSP is unable to meet its Post Payment Verification commitment as agreed with Health Boards, and submitted to their respective Audit Committees (Reputation)

In order to mitigate the risks noted above, NWSSP Primary Care Services will:

- a) Suspend all GMS Post Payment Verification reviews for the remainder of 2022/23 (with effect from December 2022) restarting them fully again from April 2023 when the actions noted below are operational. Ophthalmic and Pharmacy reviews will continue as planned during this period.
- b) Establish an in-house Reconciliation System that replicates, as far as practicable, the original Open Exeter cleansing process that links claims submitted by practices to NHS numbers. This has been operational since 3 January 2023.
- c) Review all claims data from October 2021 to September 2022, through the Payment Team, using the in-house Reconciliation System to provide verification of all payments made during that period. This process will be subject to Internal Audit review to assure effectiveness. Claims from October 2022 onwards will not need to be reviewed retrospectively as they will have been processed through the Reconciliation System directly.

### Argymhelliad / Recommendation

The Audit & Risk Assurance Committee is asked to **NOTE** the information contained within this report, including the risks in relation to Post Payment Verification, and the plan in mitigation that NWSSP has committed to implement.

<b>Amcanion: (rhaid cwblhau)</b> <b>Objectives: (must be completed)</b>	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.1 The Committee shall review the adequacy of the UHB's strategic governance and assurance arrangements and processes for the maintenance of an effective system of good governance, risk management and internal control, across the whole of the organisation's activities (both clinical and non-clinical) that supports the achievement of the organisation's objectives. 3.3 In carrying out this work, the Committee will primarily utilise the work of Internal Audit, Clinical Audit, External Audit and other assurance functions, but will not be limited to these audit functions. It will also seek reports and assurances from directors and managers as appropriate, concentrating on the overarching systems of good governance, risk management and internal control, together with indicators of their effectiveness. 3.14 Receive an assurance on Post Payment Verification Audits through quarterly reporting to the Committee.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	3.4 Information Governance and Communications Technology 3.5 Record Keeping
Amcanion Strategol y BIP: UHB Strategic Objectives:	6. Sustainable use of resources
Amcanion Cynllunio Planning Objectives	5A_22 NHS Wales Delivery Framework Targets
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	10. Not Applicable

<b>Gwybodaeth Ychwanegol:</b> <b>Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	N/A
Rhestr Termau: Glossary of Terms:	Contained within the body of the report

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg: Parties / Committees consulted prior to Audit and Risk Assurance Committee:	NWSSP
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<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian:</b> <b>Financial / Service:</b>	Risks outlined in body of report
<b>Ansawdd / Gofal Claf:</b> <b>Quality / Patient Care:</b>	N/A
<b>Gweithlu:</b> <b>Workforce:</b>	N/A
<b>Risg:</b> <b>Risk:</b>	Risks outlined in body of report
<b>Cyfreithiol:</b> <b>Legal:</b>	N/A
<b>Enw Da:</b> <b>Reputational:</b>	Risks outlined in body of report
<b>Gyfrinachedd:</b> <b>Privacy:</b>	N/A
<b>Cydraddoldeb:</b> <b>Equality:</b>	N/A