



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	24 August 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Post Payment Verification Progress Report for the period 1 st October 2020 to 31 st March 2021
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Director of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Huw Thomas, Director of Finance

**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 highlights the narrative on how practices have been performing over the current Post Payment Verification (PPV) cycle, and two previous. It also demonstrates the overall performance of the UHB against the national averages. Post Payment Verification of claims from General Medical Services (GMS), General Ophthalmic Services (GOS) and General Pharmaceutical Services (GPS) are undertaken as a part of an annual plan by NHS Wales Shared Services Partnership (NWSSP).

The paper is being produced for the Audit & Risk Assurance Committee to review for information purposes and discussion. PPV provides assurance in all contractor disciplines, except for General Dental Services. At certain times throughout COVID-19, cash flow to medical and ophthalmic contractors has been maintained based on historical claiming patterns, due to submission of claims for various enhanced services being suspended. NWSSP reviewed how it was able to reinstate an agreed level of PPV within both the Ophthalmic, Pharmaceutical and Medical disciplines along with the Clinical Waste Audit.

Cefndir / Background

This year, 2020-2021, we have faced major challenges associated with the COVID-19 pandemic. In order to effectively respond to challenges identified within Primary Care, Welsh Government primary care chief officers, in collaboration with associated clinical directors within the service, agreed that PPV processes would be stood down. This decision was taken to protect our front-line services, to maintain colleagues' safety and to remove any pressure on primary care contractors and their teams during unprecedented times. A review of opportunities and a recovery plan was considered during this time, to return to an acceptable level of PPV, which would continue to provide Health Boards with reasonable assurance that public monies are being appropriately claimed. PPV was reinstated on 1st October 2020, which was agreed by General Practitioners Committee (GPC) Wales and Welsh Government.

Asesiad / Assessment

General Medical Services (GMS)

Pre COVID-19, the visit plan ran on a 3-year cycle for GMS and was agreed by Health Board Audit Committees. Following review of the All Wales visit plan, NWSSP reinstated remote access PPV arrangements within the GMS discipline. It was agreed that resources be focused to clear all planned GMS routine and revisits due for 2020-2021 by 1st April 2021. These visits would be completed remotely and would not be intrusive or place additional requirements on local front-line service provision. Remote access verification would take place based on a sample of claims submitted from April 2019 - March 2020, due to the sudden decrease of claims from the point of lockdown in March 2020. NWSSP has allowed a postponement of visits in this time, due to the COVID-19 vaccination programme and the additional pressure that contractors are under.

It was agreed by General Practitioner Committee Wales and Heads of Primary Care that PPV proceed with the GMS visits during the 2021-2022 financial year as part of the PPV three-yearly cycle, utilising 2019-2020 claim data from April 2021.

General Ophthalmic Services (GOS)

Pre COVID-19, the visit plan for GOS 2020-2021 was agreed by Health Board Audit Committees. However, ophthalmic practices have been unable to remain open to the public for certain periods and it is a service where PPV teams did not have the ability to undertake reviews via remote access at this time. We are looking at remote access now via TEAMS and hoping to begin this if agreed with all relevant parties in October 2021.

NWSSP provided data to Welsh Government regarding the opening hours and claims for GOS. We are also undertaking the GOS quarterly patient letter programme across Wales to provide elements of assurance to our Health Boards.

Pharmacy Services (GPS)

Due to COVID-19, the Medicines Use Review (MUR) service was stopped in March 2020. In 2021, NWSSP is hoping to introduce a pilot for two new service checks by PPV, which are the Quality and Safety Scheme and the Collaborative Working Scheme.

The reports detail specific risks as outliers in a traffic light system, but provide the narrative for what PPV, Primary Care, Finance and Counter Fraud consider to be the best approach to support practices in improving.

Due to COVID-19, we are unsure as yet when 'normal' PPV visits will begin again for General Ophthalmic and Pharmacy Services, but we are exploring remote alternatives and hoping to roll these out in the upcoming months.

Argymhelliad / Recommendation

The Audit & Risk Assurance Committee is requested to note the contents of this report.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference

Cyfeirnod Cylch Gorchwyl y Pwyllgor

3.15 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):	7. Staff and Resources
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Evidence is collated based on claims submitted by contractors of a specific sample period
Rhestr Termiau: Glossary of Terms:	Included 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:	Not applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	To promote value for money by deterring and preventing fraud and loss
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable
Gweithlu: Workforce:	Not applicable
Risg: Risk:	Not applicable
Cyfreithiol: Legal:	Not applicable
Enw Da: Reputational:	Not applicable
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Not applicable

Hywel Dda University Health Board
GMS PPV Progress Report: October 2020 to March 2021

0-4%	Low risk
5-9%	Medium risk
10%+	High risk

UHB Claim error % Ave	18.34%
Wales claim error % Ave	
2019/20 recovery amount	£39,889.65

Practice code	Visit 1				Visit 2				Visit 3					
	Visit date	Visit type	Claim error %	Recovery	Visit date	Visit type	Claim error %	Recovery	Visit date	Visit type	Sample size	Claim errors	Claim error %	Recovery
Practice 1	Jul-18	REVISIT	16.78%	£6,722.61	Jul-18	Routine	15.62%	£6,621.80	Oct-20	Routine	230	10	4.35%	£924.19
Practice 2	Aug-18	Routine	1.29%	£218.24	Oct-19	REVISIT	0.00%	£0.00	Oct-20	Routine	308	18	5.84%	£983.70
Practice 3	May-16	Routine	12.59%	£5,429.34	Nov-20	REVISIT	21.60%	£12,413.12	Dec-20	Routine	386	30	7.77%	£1,211.70
Practice 4	Dec-14	Routine	0.95%	£60.24	Dec-17	Routine	1.03%	£40.99	Mar-21	Routine	276	13	4.71%	£640.76
Practice 5	Nov-14	Routine	1.68%	£86.54	Aug-17	Routine	2.37%	£185.16	Oct-20	Routine	249	5	2.01%	£121.70
Practice 6	Feb-15	Routine	0.93%	£136.81	Nov-17	Routine	0.00%	£0.00	Nov-20	Routine	335	0	0.00%	£0.00
Practice 7	Jul-17	Routine	5.07%	£637.19	Apr-19	REVISIT	4.42%	£2,680.81	Oct-20	Routine	236	13	5.51%	£729.36

Practice code	Visit 1				Visit 2				Visit 3					
	Visit date	Visit type	Claim error %	Recovery	Visit date	Visit type	Claim error %	Recovery	Visit date	Visit type	Sample size	Claim errors	Claim error %	Recovery
Practice 8	Aug-12	Routine	0.00%	£0.00	May-16	Routine	12.59%	£5,429.34	Dec-20	REVISIT	4306	911	21.16%	£12,413.12
Practice 9	Mar-16	Routine	0.82%	£128.98	Aug-19	Routine	1.29%	£198.38	Feb-21	REVISIT	161	41	25.47%	£4,435.00
Practice 10	Aug-18	REVISIT	43.13%	£13,963.29	Jun-19	Routine	15.59%	£4,189.75	Mar-21	REVISIT	224	141	62.95%	£10,431.12
Practice 11	Sep-17	REVISIT	6.86%	£3,571.29	Dec-18	Routine	5.28%	£704.99	Jan-21	REVISIT	34	9	26.47%	£999.00
Practice 12	Nov-15	REVISIT	1.31%	£287.80	Aug-18	Routine	0.73%	£78.94	Dec-20	REVISIT	9	0	0.00%	£0.00
Practice 13	Jan-18	REVISIT	16.06%	£4,581.18	Jan-19	Routine	2.90%	£166.02	Jan-21	REVISIT	4	0	0.00%	£0.00
Practice 14	Mar-17	Routine	2.30%	£213.54	Jul-19	Routine	2.51%	£511.81	Jan-21	REVISIT	168	57	33.93%	£1,995.00
Practice 15	Jun-18	REVISIT	3.74%	£1,811.47	Sep-18	Routine	8.13%	£1,467.62	Nov-20	REVISIT	194	58	29.90%	£5,005.00

It is important for the average claim error % to note that a REVISIT checks 100% of claims triggered from a Routine whereby a particular service was over 10% in errors. In these circumstances the % error rate is generally high which increases the average.

	Health Board		
	2018/2019	2019/2020	2020/2021
Number of practices visited	35	36	15
Amount of claims sampled	17,184	30,464	7,120
Claim errors identified	1,650	2,923	1306
Average claim error rate	9.60%	9.59%	18.34%
Recovery amount	£60,553.13	£37,397.39	£39,889.65

	All Wales		
	2018/2019	2019/2020	2020/2021
	216	145	188
	93,772	107,335	83,248
	7,585	9,699	10,401
	8.09%	9.04%	12.49%
	£223,105.62	£161,817.08	£215,460.57

We have representatives from every Health Board in Wales and have set up a newly reformed GMS working Group. This is to keep communications open and transparent between PPV and Health Boards whilst also collaboratively working to review specifications and ensure standardised approach for PPV remote access samples. This group is proving very successful.

We are in the process of becoming an All Wales service. This will guarantee a more robust PPV team and ensure business continuity.

We have developed a video recorded guide to PPV to aid contractors and equip them with useful information in a simplified format/update FAQ documents.

To use technology to continue one-on-one training requirements from practices that request this as this was previously undertaken in person in the practice premises.

All PPV audit reports are sent to the Director of Primary Care for information purposes and for feedback.

We are restarting PPV training events/roadshows to Practice Managers across Wales, utilising technology to host these events as opposed to 'in-person' presentations. We are basing the contents of training on our trend analysis data that we collect.

We have re-establish our quarterly meeting with ourselves, Primary Care, Counter Fraud and finance in our quarterly meetings. The idea behind this being that we can decide on appropriate actions from the appropriate division for all the practices in Amber and Red.

In General Ophthalmic Services, previously from PPV reinstatement in October 2020, we launched a recently successful pilot where we utilised trend analysis data to write out to patients to ensure they are receiving the services that have been claimed. This is now an All Wales quarterly process that we run to provide assurance to our HB's. We have also piloted remote access for Ophthalmic PPV via Microsoft TEAMS. This was successful and we are looking to roll this out by October 2021.

PPV will begin working on 2 New services checks for Pharmacy in April. These are the Collaborative working Scheme and the Quality and Safety Scheme.