



PAC-R-339

Correspondence 3.13  
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Health Service Executive  
Parliamentary Affairs Division  
Block D, 2<sup>nd</sup> floor  
Parkgate Business Centre  
Parkgate Street  
Dublin 7

Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

Tel. (01) 635 2505  
Fax (01) 635 2508

Web: <http://www.hse.ie/go/rialtas>

**28<sup>th</sup> February 2012**

Mr. John McGuinness T.D.  
Chairman,  
Committee of Public Accounts,  
Leinster House,  
Dublin 2



Dear Chairman,

I wish to update the Committee in relation to the project agreed with the Public Accounts Committee at the end of January 2012 - to review and further develop the processes and customer service elements of the centralised Medical Card system and to implement changes to existing processes as required.

Following a tender process the HSE engaged the services of consultants PwC (PricewaterhouseCoopers). The project commenced immediately after the meeting with the PAC and consists of a number of work streams and will focus specifically on a number of key areas including inter alia:

- National Assessment Guidelines
- July 1 Centralisation & Migration
- Key Impacts of Centralisation
- Customer Application Form and Processes (New & Review)
- Communications & Engagement (Customer / GPs / etc)
- Customer Service - Experience
- Call Centre Integration & Service Delivery
- Local Health Office Support
- People & Capacity Planning
- Technology and Integration

We are scheduled to complete the work over the next two weeks and we plan to have a draft report available in the first week of March 2012.

In the meantime the HSE is working to resolve the backlog of cases outstanding from the July to December 2011 period and we are continuing to work on the new self-assessment processes to increase the number of applications and reviews completed within the agreed service levels.

We have also taken a number of steps to streamline operations in the central office and to make the process for renewing a medical card simpler and easier for the public. As part of this we have implemented self-assessment reviews for medical card holders who are 66 years or over. The self-assessment review model has also been extended to medical card holders under 66, who were granted their medical card on the basis of a means assessment. We have also standardising eligibility periods from two years to three years for people aged under 66, with a new four year eligibility period for medical card holders aged 66 or over. An initiative is also underway to make the application process easier for the public and the HSE is working with the National Adult Literacy Agency (NALA) to review the medical card application form, and other associated forms and letters. Currently more than 35% of all applications received by the central office are incomplete.. The application process is being simplified and more self assessment coupled with longer eligibility periods will ease the burden on applicants.

Under these new procedures, a Medical Card will remain valid, irrespective of the expiry date shown on the card, once the Medical Card holder is genuinely engaging with the HSE review process. Eligibility for services can be confirmed by any Doctor or Pharmacist or by the Medical Card holder online at [www.medicalcard.ie](http://www.medicalcard.ie) or through the GP practice systems or in any Local Health Office or through the helpline at 1890-252-919.

The Review agreed with the Public Accounts Committee (PAC) at the end of Jan 2012 committed that the HSE would review the operations and processes within the central processing office with a view to ensuring that the most responsive service for the public is in place. This is well underway and on schedule. We plan to use this review project to improve the operations and processes and to focus on the probity approach which was a key element in the management decision to centralise and ensure comprehensive governance and accountability. We are satisfied that our concerns regarding costs and waste which drove these management decisions were well founded and can now be addressed in the centralised environment. The work conducted in this area during the initial 6 months of the centralisation project has confirmed a risk that there are significant levels of excess registration on the database for a variety of reasons. The review will quality assure this work and report next week.

On a separate but related matter the HSE has agreed arrangements with the Irish Medical Organisation in relation to GPs involvement in the centralised medical card process. I attach for the committee's attention a copy of the letter of agreement between the HSE and the IMO and a FAQs document for GP's which outlines how the new arrangements will work.

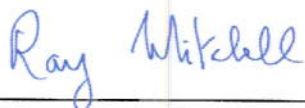


This will ensure that there is a protection in place for eligible persons who may slip through a review process and also bring to an end over and under payments to GP's in respect of births and deaths. The capability which is now available to GPs helps to provide solutions to a number of longstanding issues which have existed within the medical card system for many years. The delivery of these solutions designed together over two year's represents a significant achievement providing benefits to medical cardholders, GP's and the HSE.

Finally we know that the Committee wishes to hold a meeting with the HSE to discuss the outcome of the review and in that regard we will be available to meet with the committee when the review process is complete.

I trust this information is of assistance.

Kind regards,



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**Ray Mitchell**  
**Assistant National Director**  
**Parliamentary & Regulatory Affairs**



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

Feidhmeannacht na Seirbhíse Sláinte  
Seirbhís Aisioca Priomhchúraim  
Bealach amach 5 an M50  
An Bóthar Thuaidh  
Fionnghlas  
Baile Átha Cliath 11

Guthán: (01) 864 7100  
Facs: (01) 834 3589

Health Service Executive  
Primary Care Reimbursement Service  
Exit 5, M50  
North Road  
Finglas  
Dublin 11

Tel: (01) 864 7100  
Fax: (01) 834 3589

27 February 2012

Circular No 004/12

Dear Doctor,

This letter is being issued jointly on behalf of the Irish Medical Organisation (IMO) and the Health Service Executive (HSE).

The IMO and HSE have been engaged in reviewing existing processes and procedures between the HSE and GP contract holders. Much of this process to date has focused on medical card registrations. While medical cards will continue to be issued in the normal way by PCRS, who have responsibility for the issuing and management of cards, this change provides GPs with the facility to deal with commonly experienced problems.

As a result of such interactions the IMO and HSE are pleased to inform you of measures to enhance access to PCRS processes thus allowing a more real time registration process.

Attached for your information and attention is a copy of the agreed Specification, which describes in detail the new functionality now available to you, and a set of Questions and Answers to some of the key aspects of this functionality.

The capability which will now be available to GPs helps to provide solutions to a number of longstanding issues which have existed within the medical card system. We feel that the delivery of these solutions designed together over a considerable period represents a significant achievement providing benefits to GPs, our medical cardholder clients and the HSE. Currently available PCRS processes will continue for GPs who choose not to engage in the new functionality.

Under these new procedures, a Medical Card will remain valid, irrespective of the expiry date shown on the card, once the Medical Card holder is genuinely engaging with the HSE review process. Eligibility for services can be confirmed by any Doctor or Pharmacist, through the GP practice system, by the Medical Card holder online at [www.medicalcard.ie](http://www.medicalcard.ie), in any Local Health Office, or through the helpline at 1890-252-919.

All stakeholders face unprecedented challenges in the current financial environment to deliver services under the GMS in a way that minimises any adverse impact on patients and protects as far as possible, the most vulnerable.

The IMO recognises that the HSE is obliged to ensure that its resources are used effectively and that services are delivered in accordance with the contracts in force. Equally, the HSE recognises that IMO members are entitled to remuneration for the services they provide under their GMS contracts.

On that basis, the HSE and the IMO have agreed to establish a joint forum, which will meet on an ongoing regular basis to work through and address the rollout of the new functionality regarding medical cards and any other related matters covered under the current GMS contract.

We will arrange to keep you updated in relation to these initiatives as we progress.

Yours sincerely,

Patrick Burke  
HEALTH SERVICE EXECUTIVE

George McNeice  
IRISH MEDICAL ORGANISATION



# GP's and Medical Card Centralisation Project

## FAQs for GPs

### What can I do with the new functionality?

**Add a new baby:** Add a new baby to a family that have medical card eligibility.

**Sensitive renewal:** Where a patient may lose eligibility because he/she cannot engage or complete his/her review due to a medical condition or social circumstances you can extend eligibility for that client for one year.

**Patient Reinstatement:** If a patient presents for medical care that has had eligibility removed in error, e.g. due to a lack of response to the review process because of a change of address, you can reinstate eligibility for four months.

**Remove a person from panel:** This allows you to remove a medical card patient from your panel in circumstances where you are satisfied that the client has passed away or is non resident.

**Register movement of a patient in and out of a state medical facility:** This allows you to register the fact that a patient has entered or left a state medical facility, which will in turn cause the capitation payment to cease or re-commence.

**Panel confirmation:** This allows you to confirm that your panel is, to the best of your knowledge, correct, on a quarterly basis.

### Adding a new baby:

Where a new baby has been born into a family who already have medical card eligibility, and are on your panel, and the parents have not yet added the baby to their medical card you can do so by providing the baby's details on the new system. The baby is added immediately, with the details followed up by the HSE to confirm the eligibility with the parents. GPs are expected to make best efforts to provide the PPS Number when it's available, however, the PPS Number will not be mandatory at the point of addition of a baby.

### Sensitive Renewal:

A sensitive renewal can occur if a patient's eligibility is due for review and you are aware of circumstances that will result in the patient losing eligibility because he/she has not or cannot complete the standard review process. In these cases eligibility will be extended for one year, during which time the HSE will make contact with the patient to establish the relevant details. Sensitive renewals occur before a patient loses eligibility.

### Patient Reinstatement:

A patient reinstatement can be made if a patient presents to a GP for services and for some reason his/her eligibility had been suspended. Where the GP is satisfied that the patient is alive and in the jurisdiction and is still entitled to receive contracted services free of charge under the Medical Card Scheme he/she can reinstate eligibility for four months. Patient Reinstatement occurs after a patient loses eligibility.

### **Remove a Person from Panel:**

This allows you to remove a medical card patient from your panel directly in circumstances where you are satisfied that the client has passed away or is non resident. This function will be treated as a notification of removal. Responsibility for the removal, and the maintenance of the national database, remains with the HSE.

When such a notification is made the HSE will reference other data sources, as appropriate, and where necessary will communicate with the client directly, or the client's family, to confirm the status of the client.

### **Register Movement of a Patient in and out of a State Medical Facility:**

Patients that go into a state medical facility, where his/her care is provided in house, remain on your panel, however capitation is affected depending on how long the patient is in the facility. This function allows you to register the fact that one of your medical card patients has entered or left a state medical facility, which will in turn cause the correct capitation payment to be made.

### **How does Panel Confirmation work?**

Panel confirmation provides "tick" boxes for you to confirm that your panel is correct. Once the panel is confirmed through this mechanism the panel maintenance functions set out above will remain available to you. After ticking the boxes you simply print out the form, sign and return it to PCRS. This is a quarterly process.

### **What happens when I create or extend a person's eligibility?**

All of the relevant information is automatically submitted to the PCRS, who will follow up each case directly with the client to confirm the eligibility status of the client.

### **Are there limits and controls on the changes that can be made?**

Yes, a series of limits and controls are in place to ensure, for example, that a duplicate record cannot be created. There is also a limit set for each change type on the maximum number of changes that a GP may complete in any calendar month. Details are set out in the protocol document.

### **Is there a review and continuous improvement process in place?**

Yes. This initiative, deliverables and operation, will be the subject of formal meetings between the HSE and the IMO on a regular basis.