

LMC Summary of GP Contract 2019/20

Funding

- For 2019 the GP contract is to increase by 1.4% in addition to funding through networks, with further uplifts for each year of the contract.
- This year's funding includes a 2% uplift for GP and staff pay and expenses.
- £20m a year to cover practice costs for dealing with SARs.
- Extra funding to cover full costs of increased employer pension contributions.

Indemnity

- New state backed indemnity scheme from April 2019 to cover all GPs and other staff, in and out of hours, for NHS work.
- Scheme will be run by NHS Resolution and comes at no direct cost to practices or GPs.
- GPs and practices will still need to arrange cover from a medical defence organisation for non-NHS work, and to ensure they have cover for GMC, criminal/coroners cases, private reports etc.

Primary Care Networks

- Networks will typically cover between 30-50,000 patients.
- Funding will be delivered through a direct enhanced service (DES) from July 2019.
- Each network will be led by a local GP Clinical Director.
- Networks will receive 100% recurrent funding for social prescribers and 70% funding for clinical pharmacists in 2019/20. Future years will see 70% funding for physiotherapists and physician associates (from 2020/21) and paramedics (2021/22).
- In addition to workforce costs, each network will receive recurrent funding of £1.50 per patient. Additional funding has been added to the global sum for practices to establish and engage with networks.

Digital

- Practices to be expected to make 25% of appointments bookable online from July 2019.
- Programme to digitise paper records will enable electronic records for all patients.
- Practices to offer one appointment per 3,000 patients each day for NHS 111 to book direct.
- From April 2020 all patients should have access to online consultations, and to their full record online.

QOF

- From April 2019, 28 'low value' indicators worth 175 points will be retired.
- 101 points will be recycled into 15 new indicators; the remaining 74 will cover a new quality improvement domain.
- A new personalised care adjustment will replace exception reporting.