

**WRITTEN QUESTION TO THE MINISTER FOR SOCIAL SECURITY
BY DEPUTY S.Y. MÉZEC OF ST. HELIER
ANSWER TO BE TABLED ON MONDAY 27TH NOVEMBER 2017**

Question

Could the Minister indicate how much is spent per year on subsidising GP appointments for Islanders and further give estimates as to the potential cost of fully subsidising the service to allow people to attend appointments with their GP without having to pay?

Answer

The table below shows the total value of medical benefit subsidies made towards the cost of GP consultations.

Year	Cost
2014	£7,108,000
2015	£7,298,000
2016	£7,195,000

On average 354,000 GP consultations have taken place per year over the three year period 2014 to 2016. In addition since 2015, GPs have received contractual payments under the Jersey Quality Improvement Framework with an annual value of £1,584,000.

An initial estimate can be made to calculate the cost to the States if these consultations were funded in full by considering the current GP list prices for each type of patient and for each type of service.

For example, using the fees published on GP web sites, the cost of a surgery consultation averages £39.50. Some surgeries charge less for students and children (ranging from £0 to £27) and most charge more for home visits (ranging from £70 to £96 and averaging £85). Analysis completed in March 2017, when this question was also tabled, suggested that 6% to 7% of GP consultations are home visits, attracting the higher fee.

If these averages are used (£39.50 for surgery visits and £85.00 for home visits) the cost to fully fund basic GP consultations would be an additional £15 million a year and £22 million in total including the medical benefit of £20.28 paid from the Health Insurance Fund to subsidise each consultation.

As noted in the response to this question in March 2017, estimates of the level of funding to provide a fully subsidised GP service are vulnerable to further variation because changes to the payment mechanism will impact on both patient and provider behaviour. As such, these estimates do not take into account:

- The volume of discounting included within the current payment system
- Any increase in the number of consultations which could be generated within a fully funded system
- The level at which a full subsidy would be agreed by GP practices

In addition, this £22 million estimate reflects the amount which might be required to fully subsidise basic consultations. It does not include a calculation to consider additional services which might be funded in a General Practice States contract. For example, practices currently make further charges in addition to the basic consultation fee for ear syringing, blood tests, travel vaccinations, family planning, hormone replacement therapy implants, electrocardiograms (ECG), letters of referral, and so on. Social Security do not hold figures on the volume of these additional services, or the entire range available, but such services will make up a significant proportion of the transactions which take place in primary care.