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Our ref JAC/mn
Your ref 517/1

18th March 2009

PRIVATE AND CONFIDENTIAL



Deputy G P Southern
Chairman
Income Support Sub-Panel
Scrutiny Office
States Greffe
Morier House
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Dear Deputy Southern,

Thank you for your letter dated 11th March. I apologise for the slight delay in responding but the letter arrived while I was on leave and I had a fair amount of clinical matters to deal with on my return.

I asked one of my senior colleagues in the practice how he would respond to a question regarding his understanding of the HMA scheme and his response was "it's a mystery"! Albeit a rather glib response, I think that this would accurately cover the understanding that many of my GP colleagues have of the HMA scheme, myself included.

Prior to the initiation of the scheme, we did have a number of briefings from senior members of the Social Security department. I have to say that these briefings as much added to our confusion as clarified the situation. There seemed to be a number of unresolved issues that would be sorted out 'as we got going.'

On the matter of patients requiring visits above the number budgeted for by the scheme; it was, I think, suggested at one stage that GP's should write to inform the department of such patients. As I recall however, the GP's felt that this would be impractical as we have no way of forecasting patients' requirements accurately. Instead, I understood it that the Social Security department would monitor visits made by GP's and that if patients were requiring above the budgeted number of visits then the GP would be contacted and asked to explain the circumstances.

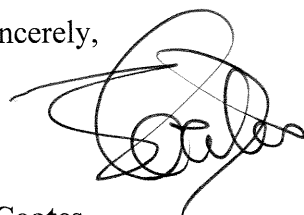
Deputy G Southern

Since the initiation of the scheme, I have only once been asked to provide detailed information on a patient said to be requiring over the budgeted amount of GP input. Strangely this detailed report was requested on a patient that I see relatively infrequently! Since then, we have all been given a list of patients requiring greater than the budgeted amount of GP input and simply asked to confirm that this was a genuine need (sic) and whether it was likely to continue for the foreseeable future. We were told that this would then be followed up by a visit to the practice to discuss the situation further if deemed necessary.

I am aware that one or two of my patients are vexed by the consequences of the HMA scheme on their family budgets. They are finding that, as I understand it, if they visit the doctor more than the budgeted number of times, then their HMA is topped up at least partially to the detriment of their income support benefit payments. This makes them think twice and thrice about seeing the doctor, which is obviously a worry.

I hope this information is useful to the panel; if I can be of any further assistance, please don't hesitate to get in touch.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'J A Coates', written in a cursive style with a large loop at the top.

Dr J A Coates