

**Digital-first primary care consultation outcome**  
**Briefing for LMCs**  
**27<sup>th</sup> September 2019**

NHS England and NHS Improvement recently sought views on options and proposals to change patient registration, payment and contracting rules.

They received over 230 responses to the digital-first primary care consultation and have now published their response to the consultation.

You can read the board paper [here](#) and the full response [here](#).

The GPC England response can be read [here](#).

**Summary**

1. NHS England and NHS Improvement will take forward the proposal to disaggregate a patient list and create a new APMS contract when a provider registers a certain number of out-of-area patients in another CCG. The threshold will be set at 1,000 patients.

They would separately be awarded a local APMS contract in that CCG, through which to serve those patients, meeting all normal requirements including access to physical premises where required. Those patients would no longer be out-of-area patients.

These proposals require the Department of Health and Social Care to change GMS Regulations and therefore will have to form part of contractual discussions with GPC.

2. NHS England and Improvement will make a CCG adjustment based on the age and gender of the patients registering with digital first practices, plus the practice they were previously registered with.
3. Following concerns expressed by respondents, NHS England will not to take forward their proposal on the new patient registration premium and will leave arrangements unchanged.
4. There was broad agreement NHS England and NHS Improvement should not create new opportunities for providers to set up new digital-first services anywhere in England and instead for targeting these opportunities in areas of greatest need e.g. under-doctored areas, which is the proposal they will now take forward.

GPC argued strongly for the abolition of the out of area regulations, as they allow digital providers to prioritise largely healthy patients and short-term care over patients with more healthcare needs and continuity of care for a local population in order to profit from this arrangement. However, this has been ruled out by NHS England as they argued it would restrict patient choice of GP. In addition, they do not plan to change the level of payment for out-of-area patients.