



David Cullinane TD
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.

12th March 2021

PQ 9785/21

“To ask the Minister for Health the number of applications for a refund of phlebotomy charges incurred by medical card patients; the status of such claims awarded, refused and pending by county and CHO in tabular form; the grounds on which claims were accepted and refused; the value of claims awarded; and if he will make a statement on the matter. -David Cullinane”

Dear Deputy Cullinane,

The Health Service Executive (HSE) has been requested to reply directly to you in the context of the above Parliamentary Question (Reference 9785/21), which you submitted to the Minister for Health for response.

Under the terms of the current GMS contract, GPs are required to provide eligible patients with "all proper and necessary treatment of a kind usually undertaken by a general practitioner and not requiring special skill or experience of a degree or kind which general practitioners cannot reasonably be expected to possess". Routine blood tests, which are deemed clinically necessary by the patient's GP are comprehended by this scope of service. It is of course a matter for the treating GP to determine in the case of each individual patient what is proper and necessary care. In circumstances where a GP, in the exercise of his/her clinical judgement, determines that a particular treatment or service requested by a patient is not clinically necessary but the patient still wishes to receive same, it is at the GPs discretion as to whether he/she imposes a charge for providing the service/treatment in question. An example of this might be an asymptomatic patient about whom the GP does not have any clinical concerns requesting a general health screening. Consultation fees charged by GPs outside the terms of the GMS contracts are a matter of private contract between the clinicians and their patients. The HSE does not have any role in relation to the regulation of such fees.

The role of the Primary Care team, within each CHO, is to investigate, in the first instance, the validity of any claim that a person with eligibility makes regarding charges inappropriately levied by their GP of choice for blood tests undertaken at the GP's practice - 'as part of proper and necessary treatment of a kind usually undertaken by a general practitioner and not requiring special skill or experience of a degree or kind which general practitioners cannot reasonably be expected to possess'

If a refund is due the Primary Care Eligibility & Reimbursement Service (PCERS) must be instructed by the CHO following their investigation. The role of the PECRS is to act appropriately on the basis of the recommendations made by the local health manager to:

- make a refund to the complainant
- make a corresponding deduction from the regular payments to the GP in question.

The attached schedule shows the number of applications for a refund of phlebotomy charges in 2021, to the end of February 2021, and the status of these applications. Note that the available data is by CHO area.

I trust this information is of assistance to you.

Yours sincerely



TJ Dunford

Head of Operations; Primary Care.
Community Operations.