

Feidhmeannacht na Seirbhíse Sláinte Seirbhís Aisíoca Príomhchúraim Bealach amach 5 an M50 An Bóthar Thuaidh Fionnghlas Baile Átha Cliath 11 Health Service Executive Primary Care Reimbursement Service Exit 5, M50 North Road Finglas Dublin 11

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Circular No. 014/14

28 March 2014

Dear Doctor,

As you are aware payments issued under your GMS contract as a contribution to locum expenses in respect of sick leave are analogous to those which apply to officers of the Health Service Executive.

Under these arrangements, GP contractors may receive the appropriate contribution towards locum expenses at the full rate up to a maximum of 6 months and at half the appropriate rate for a further 6 months subject to an overall maximum of 365 contribution days in a rolling 4 year period. This is the current position.

The new Public Service Sick Leave Scheme is due to come into operation on 31 March 2014.

From 31 March 2014, once the legislation is enacted, there will be a reduction in the number of days for which full and half pay can be paid in respect of sick leave absences. Under the new arrangements a maximum of 92 calendar days on full pay in a year, followed by a maximum of 91 calendar days on half pay, subject to a maximum of 183 calendar days paid sick leave in a rolling four year period may be paid.

This means that for General Practitioner contractors the contribution towards locum expenses at the full rate will now be payable up to a maximum of 92 calendar days on full rate in a year, and at half the appropriate rate for a further 91 calendar days, subject to an overall maximum of 183 contribution days in a rolling 4 year period. General Practitioners who are on sick leave prior to 31 March 2014 and who remain absent when the new arrangements come in to operation will retain their existing contribution to locum expenses entitlement until they return to practice, after which the new arrangements will apply.

In recognition of the fact that, sometimes, a longer period of sick leave can be required to address a very serious illness or serious physical injury there is provision for additional payments to apply for critical illness or serious physical injury in line with those which apply to officers of the Health Service Executive. The award of extended sick leave for critical illness or serious physical injury is at the discretion of the HSE, after medical advice from an Occupational Health Physician nominated by the HSE has been received.

I should stress that this change will not impact on other contractual terms and conditions relating to panel size and contribution amounts etc.

Yours faithfully,

Mol

Patrick Burke Primary Care Reimbursement Service