

Circular No. 028/2015

15th December 2015

Dear Doctor

I enclose herewith Forms PSN/1P, which should be completed in respect of each Secretary / Nurse / Practice manager in your employment. To facilitate us to make payments in respect of practice employees, the completed, forms, together with Income Tax Forms P60, P35 and P35L, should be submitted to us in January 2016.

In order for you to receive payment in any month, the appropriate documentation must be received by us before the end of the previous month. Please be advised that failure to submit forms and supporting documentation in a timely fashion may cause a delay in payments.

During 2016, any relevant changes that occur in the contract of employment with your Secretary, Nurse or Practice manager, must be approved by the Local Health manager before submission to the PCRS. Termination of employee contracts must also be notified to your Local Health Manager and the PCRS immediately.

If you require any further information on the above, please do not hesitate to contact the Doctor's Unit in the PCRS immediately.

I would like to take this opportunity, on behalf of the PCRS, to wish you, your staff and family, a very Happy Christmas and Happy New Year, and thank you for your co-operation with us throughout the year.

Yours faithfully,

Anne Marie Hoey,
Primary Care Reimbursement Service

Claim for payment of subsidy towards the cost of employing a Practice Secretary / Nurse / Manager as provided for under Department of Health Circular No. 5/89

CERTIFICATION OF EMPLOYMENT AND CLAIM FOR PAYMENT OF SUBSIDY FOR PRACTICE SECRETARY / NURSE / MANAGER

I certify that _____ has been in my continuous employment
Name of Secretary/Nurse/Practice Manager*

At my Practice Centre at _____

During the period from _____ to _____ as approved by the
HSE _____ Area on _____

Signed by: _____ Dr. No. _____

**Delete as appropriate*

A separate form PSN/1P (Photocopy original if necessary) claiming subsidy toward the cost of employing each Practice Secretary / Practice Nurse or Practice Manager should be submitted annually in arrears during the month of January. Each separate claim must be accompanied by a copy of Income Tax Forms P60, P35 and P35L as evidence of the payment of salary and return of Income Tax deducted during the previous tax year.

Each claim and related documentation should be submitted to:

Doctors Unit
Primary Care Reimbursement Service
Units 1-5 Ground Floor
J5 North Park Business Park
Exit 5, M50
North Road,
Finglas, Dublin 11
D11PXTO

Changes in personnel or conditions of existing contract of employment must have the approval of the Health Service Executive prior to notification to the Primary Care Reimbursement Service.

CHECKLIST: Please ensure copies of following are attached and tick to confirm inclusion

P60

P35

P35L

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