

Amendments to reference costs guidance for 2011-12

The reference costs guidance for 2011-12 published on 26 January 2012 has been reissued with the clarifications and amendments listed in the table below.

Payment by Results team
Department of Health
26 April 2012

Para ref	Amendment
21	Correction to pseudo codes for trauma (110T) and non-trauma (110N)
74	Addition of Calderstones Partnership NHS Foundation Trust to the list of trusts not required to submit reference costs.
155	Removal of text about reporting of non-elective short and long stays, which will now have separate worksheets in the workbook.
166	Revisions to two device names: <ul style="list-style-type: none"> • Percutaneous valve replacement and repair devices • Radiofrequency, cryotherapy and microwave ablation probes and catheters
381	Addition of HRGs WA20W and WA20Y to table 37.
389	"Tertiary eating disorder services" amended to "specialised eating disorder services" in table 39, and reference provided. Reference also provided for perinatal mental health services (mother and baby units).
392	Amendment to confirm that a memorandum column has been added for sub-contracted services.
405	Two amendments to table 41: <ul style="list-style-type: none"> • Clarification of the counting of service user episodes • Additional row added for sub-contracted services.
406	Clarification of the reporting of patients not clustered or assessed.
415	Clarification and amendments to table headings in table 44.
419	Sub-paragraph (c) added for adult eating disorder services.
430	Clarification that both attendances and non face to face contacts should be reported for mental health outpatient attendances.
435	Clarification that both face to face and non face to face contacts should be reported for community contacts.
455	Sub-paragraph (a) (iii) amended to clarify definition of multi professional.
532	Sub-paragraph (a) to clarify treatment of high cost cystic fibrosis drugs.
554-556	New paragraphs added to clarify the treatment of R&D funding streams.
561	Amendments to list of services excluded from reference costs in table 55: <ul style="list-style-type: none"> • clarification of discrete external aids and appliances services • addition of hospital travel costs scheme • clarification of intensive care bed information services

	<ul style="list-style-type: none"> • addition of other specialised services which incorporates the previously separated exclusions for photopheresis and poisons or medical toxicology units, and adds malignant hyperthermia unit.
576	Additional requirement to separate MADEL, NMET and SIFT income from other operating income.
Annex A	<p>Amendments to table 58 to reflect:</p> <ul style="list-style-type: none"> • reporting of electives, non-elective long stays and non-elective short stays on separate worksheets • reporting of cancer multi-disciplinary team meetings on a separate worksheet to outpatient attendances • other minor changes to the reference costs workbook.
Annex C	Amendments to table 60 to clarify mandatory validations in the reference costs workbook. Addition of new tables 61 and 62 for mandatory validations in the spells workbook and reconciliation workbook respectively. Amendments to table 63 to clarify non-mandatory validations that require investigation in the reference costs workbook.