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HIV Outpatient: Commissioners

Name

Date

Scope

- Not Priced
- Not Paediatrics
- Not Admissions
- Not Excluded Drugs (i.e. ARVs)
- It is the currency only at this stage

Current Position

- There is a mix of commissioning arrangements for HIV services
- Commissioning on a per patient/episodic approach.
- ARV drugs are either a pass through cost or a cost per patient approach.
- Local Quality and Outcomes measures

The possible future

- From 2013/14 commissioning arrangements will change
- Specialist Commissioning and Local Area Teams
- National Development with Local provision

Commissioning 2013/14



- We are working on a series of business rules
- It is highly likely that these will follow the principles already established in other mandated Payment by Results pathways.
- For 13/14 recommend using contract mechanisms to:
Agree implementation plan for HARS and the pathway
Shadow
Plan for 14/15.

Business Rules

- Service Model
- Service Movers and Leavers
- Joint Clinics
- Unbundling

Validation

- The Health Protection Agency (HPA) will be building in automatic validation of the dataset to ensure the data is “clean”.
- Need feedback from commissioners on what level of automatic validation want them to carry out (subject to funding)
- As with acute if activity looks very different than expected can query/audit it...

Commissioning Plans



- The NHS is getting better at detection and Commissioners need to take the long term view
- The improved dataset also gives much more timely and detailed benchmark data to also assist in this.
- For 13/14:
Agree implementation plan for HARS and the pathway

Shadow

Plan for 14/15.

Feedback

- The guidance generically around pathways in Payment by Results is improving and becoming more detailed.
- We need your feedback and comments

Any Questions?