

Reference: FOI.ICB-2425/162

Subject: ADHD Services Right to Choose - Invoicing and Patient Numbers

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION	RESPONSE																								
<div>1. Please may I ask what period of time the invoicing represents?</div> <div>2. Is this for a month of services for example or does it different with each provider? So you have data on how many patients are being seen by each provider within this period?</div>	<div>Question 1:</div> <table><tr><th>A</th><th>B</th><th>C</th></tr><tr><th>Provider</th><th>Invoice date</th><th>Period of activity</th></tr><tr><td>ADHD 360</td><td>22.7.24</td><td>July 2024</td></tr><tr><td>Clinical Partners</td><td>30.6.24</td><td>May and June 2024</td></tr><tr><td>Jajawi & Asker Ltd</td><td>22.7.24</td><td>June 2024</td></tr><tr><td>Problem Shared</td><td>9.7.24</td><td>July 2024</td></tr><tr><td>Psychiatry UK</td><td>16.7.24</td><td>July 2024</td></tr><tr><td>The Private Pharmacy group (medication only)</td><td>8.4.24</td><td>February – April 2022</td></tr></table>	A	B	C	Provider	Invoice date	Period of activity	ADHD 360	22.7.24	July 2024	Clinical Partners	30.6.24	May and June 2024	Jajawi & Asker Ltd	22.7.24	June 2024	Problem Shared	9.7.24	July 2024	Psychiatry UK	16.7.24	July 2024	The Private Pharmacy group (medication only)	8.4.24	February – April 2022
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	<div>This builds on the information released under the previous FOI, which was based on the most recent invoice received from each provider up to and including 22nd July 2024. As requested, the period of time represented by each invoice is given in column C above. However, it should be noted that invoicing practices vary between providers, so it is entirely possible that charges for other activity within the same period will have been split across more than</div>																								

	<p>one invoice. In short, this means that the invoice information listed may not represent the total activity undertaken within the period stated.</p> <p>Question 2: As per our response to question 1, the period of time the invoices cover varies between providers, as do invoicing practices. In most cases, they are itemised by activity rather than by patient as providers are not permitted to include patient identifiable information on invoices.</p> <p>We would only hold data on numbers of patients being seen where the provider submits fully itemised backing data including patient identifiable information via a secure email account. It is likely though that this would only show part of a patient journey as charges for the full care pathway for that patient may be split across several invoices. We do not actively collect information on numbers of patients being seen as it is not required for the purposes of validating activity performed under Right to Choose. In order to provide assurance that activity is being carried out in line with the service specification in the host commissioner contract and has originated from a GP practice within BNSSG, we would only need to be advised of the patient’s age, the activity performed, the cost and the referring GP practice.</p>										
<p>Questions from previous FOI request:</p> <p>I would like to request how much is spent on Right to Choose services for patients being assessed and treated for ADHD.</p> <p>As well as overall figures, I would like to request specific costs for each assessment, diagnosis, and any management carried out by the Right to Choose provider.</p>	<p>Please read the information below the table, which explains the conditions applied to the calculation of the figures in each column.</p> <table><tr><th>A</th><th>B</th><th>C</th><th>D</th><th>E</th></tr><tr><td>Provider</td><td>Invoice date</td><td>Total spend related to ADHD</td><td>Costs related to ADHD</td><td>Costs related to ADHD medication</td></tr></table>	A	B	C	D	E	Provider	Invoice date	Total spend related to ADHD	Costs related to ADHD	Costs related to ADHD medication
A	B	C	D	E							
Provider	Invoice date	Total spend related to ADHD	Costs related to ADHD	Costs related to ADHD medication							

<p>This should include the prescription of any medications, in particular, those in the amphetamine class, and the physical health monitoring of these medications.</p> <p><i>Clarification received: for adults please.</i></p> <p><i>I only need the information for what the current payments are to Right to Choose providers for the ADHD services they provide. I do not Need historical data.</i></p>				assessment	
	ADHD 360	22.7.24	£10,100	BNSSG ICB does not hold information which would enable further breakdown of costs.	
	Clinical Partners	30.6.24	£10,634.11	£6895.00	£3739.11 Of this, £2,419.11 is listed as prescription and medication costs
	Jajawi & Asker Ltd	22.7.24	£182	Unable to disclose – please see notes below for Column A	
	Problem Shared	9.7.24	£950	Unable to disclose – please see notes below for Column A	
	Psychiatry UK	16.7.24	£36,446.78	£17,142.84	£19,303.94 Of this, £13,710.57 is listed as prescription and medication costs
	The Private Pharmacy group	8.4.24	£2564.71	N/A	£2564.71

	(medication only)				
	<p>Explanatory notes:</p> <p>Column A – Providers:</p> <ul style="list-style-type: none"> • ADHD 360 – the total spend in column C may include spend on Children's ADHD as the lower age limit for referrals under Right to Choose is under 18 years of age and invoices are not separated according to age or type of contact (assessment, medication etc). • Clinical Partners have been an assessment only service for some time, however, medication and prescription costs continue to be charged to BNSSG ICB for those patients who began medication before this part of the service was withdrawn for Right to Choose referrals. • Jajawi & Asker – it is not possible to provide any further breakdown of costs outside of those stated in column C. Under Right to Choose rules, providers are required to invoice for activity in line with the prices in the NHS Standard Contract they hold with the ICB directly commissioning them (often referred to as the "Host Commissioner"). BNSSG ICB do not directly commission Jajawi & Asker and therefore, provision of further invoice details, including a breakdown of costs would risk disclosure of information not held by BNSSG ICB. • Problem Shared – it is not possible to provide any further breakdown of costs outside of those stated in column C. Under Right to Choose rules, providers are required to invoice for activity in line with the prices in the NHS Standard Contract they hold with the ICB directly commissioning them (often referred to as the "Host Commissioner"). BNSSG ICB do not directly commission Problem Shared and therefore, provision of further 				

	<p>invoice details, including a breakdown of costs would risk disclosure of information not held by BNSSG ICB.</p> <p>Column B – Invoice date:</p> <ul style="list-style-type: none"> • In order to provide current information, the figures in the table are taken from the latest invoices dated up to and including 22nd July 2024, to be received from each provider. • Costs vary across all providers, as does the frequency with which they submit invoices, for example, some may submit an invoice on a regular basis such as weekly or monthly and others invoice on a more ad hoc basis. • On occasion, BNSSG ICB is invoiced for activity which backing data later shows to be the responsibility of another ICB and in this instance, a credit note is requested from the provider to recover the charges levelled in error. As these are the latest invoices, backing data may not be available at this time so it is possible that the spend on these may reduce at a later date if any activity is found to not be the responsibility of BNSSG ICB. <p>Column C – Total spend related to ADHD: Some providers offer both ADHD and Autism assessment services and consolidate costs for both within the same invoice. Where this has been the case, all reasonable steps have been taken to separate Autism spend from ADHD spend and only invoice lines which specifically mention “ADHD” or any medication related interventions have been included. This is because medication is only available from the listed Right to Choose providers following diagnosis of ADHD.</p> <p>Column D – Costs related to ADHD assessment:</p> <ul style="list-style-type: none"> • This includes the costs of assessments as well as follow up appointments and charges where individuals Did Not Attend
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	<p>(DNA) their appointment. Costs for diagnosis would be included within the assessment fee.</p> <ul style="list-style-type: none"> • We are unable to provide costs per assessment as to do so would risk disclosure of information that is not held by BNSSG ICB. <p>Column E – Costs related to ADHD medication:</p> <ul style="list-style-type: none"> • This includes titration appointments, physical health monitoring, medication costs, prescription fees and end of treatment reviews. • Where prescription and medication costs have been specifically referenced on the invoice, these have also been included and are part of the total cost in this column, not separate. • It is not possible to break these down any further into charges for amphetamine class medications as invoices do not include this level of detail. • Please note that medication costs will not be listed for patients who have been discharged to their GP under shared care, if this includes the prescription and supply of medication.
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The information provided in this response is accurate as of 16 August 2024 and has been approved for release by Sarah Truelove, Deputy Chief Executive and Chief Finance Officer for NHS Bristol, North Somerset and South Gloucestershire ICB.