

Payments For Vaccines

Prepared by Wessex Local Medical Committees

For

GP Practices in Wessex

Our thanks to Kent Local Medical Committee for their background contribution in producing this document. May 2005.

How to use this information sheet

The vaccinations and immunisations listed in this Guide are divided into 3 sections with respect to payments:

1. **Global sum** - vaccinations and immunisations that are now part of the Global sum and where **NO** charges may be made to patients. The vaccine can be obtained either in bulk by the practice and charged to the PPA on FP10 or FP34D(appendix) for Flu, Typhoid, Hep A, Hep B, Pneumococcol, Meningococcol or combination of these vaccines e.g. Twinrix. Some vaccines, mainly for children, are free from Farillon
2. **Private service** - where the practice may charge the patient directly for the service. **But Please Note:**
 - a. You **CANNOT** charge for advice
 - b. You **CANNOT** charge if the service is available on the NHS
 - c. You **CANNOT** mix NHS and non NHS
 - d. The level of charges is for the practice to determine. It is advisable to develop a practice protocol available to patients in the form of a leaflet or section of the practice leaflet
 - e. You cannot provide occupational health services to your own patients and charge either the patient or the employer. You must refer patients to another practice. This is particularly relevant to Hep B.
 - f. Where practices claimed IoS previously, this is now included in the global sum
 - g. Where practices charged for injection i.e. 2nd Hep A, they may continue to do so
3. **Where some reimbursement/payment may be claimed** - vaccinations and immunisations where the item of service has been transferred to a NES or where a LES is in place and has been agreed between the Wessex PCTs and the LMC.
 - *Practitioners should also refer to the Green Book, and the Yellow Book for advice on appropriate immunisation and the BNF for detailed advice for each preparation.*
 - *Details of the 'at risk groups' have been mainly taken from the headings in the Green Book and are not a full explanation. If in doubt, please consult the Green Book for full details*
 - *Check with your PCT that either the NES or the LES has been approved before claiming.*

Links to useful sources of information

NHS Immunisation Information (Mainly designed for patient information)

<http://www.immunisation.nhs.uk/>

The National Travel Health Network and Centre (NaTHNaC) is funded by the DoH to promote clinical standards in travel medicine.

<http://www.nathnac.org/healthprofessionals/>

The Green Book "Immunisation against Infectious Disease" on line from:

<http://www.kentlmc.org/> On line version with all current updates

http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsPolicyAndGuidance/PublicationsPolicyAndGuidanceArticle/fs/en?CONTENT_ID=4072977&chk=87uz6M

Health Advice for travellers

<http://www.dh.gov.uk/PolicyAndGuidance/HealthAdviceForTravellers/fs/en>

Health Information for Overseas Travel (Yellow Book)

<https://www.the-stationery-office.co.uk/doh/hinfo/index.htm>

<http://www.prodigy.nhs.uk/>

Prescription Pricing Agency

<http://www.ppa.org.uk/index.htm>

For a copy of FP34PD and FP34D Appendix

http://www.ppa.org.uk/ppa/FP34PD_appendix_form.doc

NB: High volume drugs are Influenza, Typhoid, Hep A, Hep B, Pneumococcal, Meningococcal or combinations of the vaccines listed e.g. Twinrix and Hepatyrix

Wessex Local Medical Committees Payments for Vaccines

VACCINES INCLUDED IN THE GLOBAL SUM

Vaccine	Age	Comment	Details
DTaP/IPV/Hib Vaccine	2, 3 & 4 months	Primary Course	3 doses, a month between each dose
DTaP/IPV Vaccine	3 - 5 years	Booster Dose	3 years after completion of Primary Course TaP/IPV available as alternative
Td/IPV	13-18 years	Booster Dose	
Hib	2, 3 & 4 months	Primary Course	3 doses, a month between each dose Normally given as combined DTaP/Hib/IPV vaccine
Men C	2, 3 & 4 months	Primary Course	3 doses, a month between each dose
MMR	12 - 15 months	First Dose	Can be given at any age over 12 months
MMR	3 - 5 years	Second Dose	
Tuberculosis (BCG)	10-14 years		Also neonates at high risk

VACCINATIONS THAT INCUR A PRIVATE FEE

Vaccine	Details	CAN CHARGE A PRIVATE FEE?
Cholera	<ul style="list-style-type: none"> Travellers requesting vaccination as a personal preference 	Issue a private prescription or charge patients from your stock and charge for the administration of the vaccine
Hepatitis A	<ul style="list-style-type: none"> Occupational Exposure (refer to employer to undertake or to another practice) Travellers to areas that do not qualify for GMS *SECOND DOSE for persons (particularly those going to reside for 3 months or longer or who, if infected, might be less resistant because of pre-existing disease) travelling outside northern Europe, Australia or New Zealand to areas e.g. poor sanitation, where the degree of exposure to infections is likely to be high - see section 3, points f & g of Explanation Sheet. 	Issue a private prescription or charge patients from your stock and charge for the administration of the vaccine
Hepatitis B (Patient registered with practice)	<ul style="list-style-type: none"> Occupational Health. Patient seen by employer to request Hep B immunisation for occupational health where: <ol style="list-style-type: none"> Healthcare workers involved in invasive procedures or caring for drug misusers or patients with severe learning difficulties The risk is no greater than the population as a whole and for whose welfare they are responsible e.g. health care workers not involved in invasive procedures; prison; ambulance officers; morticians and embalmers 	Advise the employer to carry out a COSHH assessment. If Hep B is still required, inform the employer that this service is not covered by GMS and the employer will have to make private arrangements with another practice or occupational health provider to administer the vaccine
Hepatitis B (Patient not registered with practice)	<ul style="list-style-type: none"> If requested by employer to carry out this service If as part of the service blood tests for Hep B are indicated If for travel and the patient does not fall into a risk groups for a GMS service - MAKE PATIENT AWARE OF THE NEED FOR 3 INJECTIONS OF HEP B VACCINE AND THE BLOOD TEST TO CONFIRM IMMUNITY 	Bill employer for payment for administration and cost of drug (+ VAT) + on-cost and dispensing and administration fee Bill the employer for the cost of phlebotomy and the test Issue a private prescription or charge patients from your stock and charge for administration of the vaccine
Hep A & Hep B Combined vaccine	<ul style="list-style-type: none"> Twinrix should only be used for the small group of travellers who are at risk of Hep A & B and who present for immunisation at least 6 months before they travel. The potential benefit to these travellers is the reduction in the total number of injections from 5 to 3. Those at risk of both diseases who present with less time should be immunised with the separate vaccines using the accelerated Hep B schedule The cost of the Twinrix primary course is the same as a primary course using the separate vaccines in pre-filled syringes. The primary course of Twinrix should give protection against Hep A for 10 years and Hep for 5 years, the same as for the vaccines given separately. This may cause confusion because after 5 years, people at continuing risk will need a Hep B booster only AND NOT a Twinrix booster. The cost of using Twinrix as a Hep B booster is more than double the cost of Hep B vaccine 	FP34D OR issue a private prescription or charge patients from your stock and charge for administration of the vaccine
Hep A & Typhoid Combined vaccine	<ul style="list-style-type: none"> Where a patient requests vaccination but does not qualify for a GMS service 	Issue a private prescription or charge patients from stock and charge for the administration of vaccine
Influenza	<ul style="list-style-type: none"> Where the doctor does not consider the vaccine is clinically indicated it should NOT be given Where the doctor considers the vaccine is indicated but the patient does NOT qualify for the DES, the patient should be referred to another practice for a private service Patients who are NOT registered with the practice 	Issue a private prescription or charge patients from stock and charge for the administration of vaccine
Japanese Encephalitis	<ul style="list-style-type: none"> In connection with travel abroad Vaccine not licensed in UK - available only on named-patient basis 	Issue private prescription or charge patients from stock and charge for the administration of vaccine
Meningococcal A, C, W135 & Y Vaccine Enhanced Service	<ul style="list-style-type: none"> If the vaccination is requested in connection with travel abroad 	Issue private prescription or charge patients from stock and charge for administration of vaccine
Rabies	<ul style="list-style-type: none"> Travellers 	Issue private prescription or charge patients from stock and charge for administration of vaccine
Tick-borne Encephalitis	<ul style="list-style-type: none"> Travellers requiring vaccination Vaccine NOT licensed in UK - available only on a named-patient basis - see BNF for details 	Issue private prescription or charge patients from stock and charge for administration of vaccine
Typhoid Polysaccharide Vaccine	<ul style="list-style-type: none"> If the patient is travelling to an area that does NOT qualify 	Issue private prescription or charge patients from stock and charge for administration of vaccine
Varicella (Chickenpox) Patients NOT registered at the practice	<ul style="list-style-type: none"> All Health Care Workers in the private sector 	Issue private prescription or charge patients from stock and charge for administration of vaccine
Varicella (Chickenpox) Patients registered at the practice	<ul style="list-style-type: none"> All Health Care workers in the private sector 	Refer to another practice
Yellow Fever <i>Practices wishing to apply for designation should write to HEF2, DoH, Skipton House, 80 London Road, London SE1 6LW. Yellow Fever vaccine and international certificates are supplied to such centres</i>	<ul style="list-style-type: none"> Persons aged nine months and over travelling through or living in infected areas and those travelling outside urban areas of countries in the yellow fever endemic zone (see maps 'Health Information for Overseas Travel'), even if these countries have not officially reported the disease and do not require evidence of immunisation on entry. Immunisation under nine months is NOT recommended but may be performed if exposure to the risk of infection cannot be avoided Travellers requiring an International Certificate of Vaccination for entry into a country 	Issue private prescription or charge patients from stock and charge for administration of vaccine

VACCINATIONS WHERE THERE IS SOME RECOVERY OF COST

Vaccine	Covered in Global Sum	To cover cost of vaccine
BCG Vaccine	<ul style="list-style-type: none"> If the vaccination is requested in connection with travel abroad and the patient has NOT been vaccinated as part of the childhood immunisation schedule then refer the patient to your local Chest Physician 	
Cholera	<ul style="list-style-type: none"> Aid Workers assisting in disaster relief or refugee camps More adventurous backpackers travelling to remote regions with limited access to medical care At risk travellers with underlying gastrointestinal illness or immune suppression in whom cholera would have serious adverse consequences 	Where any of these conditions are met, issue an FP10
Diphtheria/Tetanus & Polio (Td/IPV)	<ul style="list-style-type: none"> Children aged 10 and over who have NOT received basic course of immunisation Staff in hospital considered being at risk of infection of Diphtheria Children aged 6 and over that have the basic course of immunisation but NOT a reinforcing dose Adults and children over 10 year requiring either a Primary Course or a booster should be given a LOW DOSE vaccine For travellers it is recommended that the combined Td/IPV is given where a booster of any element is required **Unimmunised travellers requiring a full course of 3 at monthly intervals** **Previously immunised travellers required a booster dose if they are to live or work with local residents and their primary immunisation was more than 10 years ago** 	For children: the vaccine is centrally purchased and distributed free of charge by Farillon For others - issue FP10
Hepatitis A	<ul style="list-style-type: none"> Patients with chronic liver disease Haemophiliacs Homosexuals Persons in institutions who are exposed to a high risk of infection and for whom vaccination is recommended by the Medical Officer of Environmental Health Person (particularly those going to reside for 3 months or longer or who, if infected, might be less resistant because of pre-existing disease) travelling outside northern Europe, Australia or New Zealand to areas e.g. of poor sanitation, where the degree of exposure to infections is likely to be high (FIRST DOSE ONLY - SEE * UNDER ` VACCINATIONS THAT INCUR A PRIVATE FEE SECTION') 	Where any of these conditions are met, FP34D
Hepatitis A LES	<ul style="list-style-type: none"> Vaccine administered as part of an outbreak control on the advice of Consultant in Communicable Disease Control 	FP34D
Hepatitis B	<ul style="list-style-type: none"> Babies born to mothers who are chronic carriers of Hepatitis B virus or to mothers who have had an acute Hepatitis B during pregnancy Parental drug misusers Individuals who change sexual partners frequently Close family contacts of a case or carrier Families adopting children from countries with a high prevalence of Hepatitis B Haemophiliacs Patients with chronic renal failure Those travelling to areas of high prevalence who intend to seek employment as HCW's or plan to remain there for lengthy periods 	Where any of these conditions are met, FP34D
Hepatitis B LES	<ul style="list-style-type: none"> For children born outside the UK & who have received a primary dose in their country of origin & who are now domiciled in the UK and require their course of the vaccine completed Post-Exposure prophylaxis with Hepatitis B immunoglobulin (HBIG) 	FP34D
Hep A/Hep B Combined Vaccine	<ul style="list-style-type: none"> Few circumstances where this will be required. Hep A combined with Typhoid is a more useful combination where the patient is travelling to a risk area. If Hep B is also indicated, it is preferable to administer separately 	FP34D or issue a private prescription/charge patients for administration fee
Hib Vaccine	<ul style="list-style-type: none"> Asplenic children & adults, irrespective of age or the interval from splenectomy, should receive SINGLE DOSE of HIB if NOT already given 	For children, the vaccine is centrally purchased and distributed free by Farillon For adults, issue FP10
Hep A & Typhoid Combined Vaccine	<ul style="list-style-type: none"> Persons (particularly those going to reside for 3 months or longer or who, if infected, might be less resistant because of pre-disposing disease) travelling outside northern Europe, Australia or New Zealand to areas of poor sanitation, where the degree of exposure to infections is likely to be high. This requirement is the same for both Hep A and Typhoid Hepatyrix is presented as a convenience to travellers in that Hep A & Typhoid vaccinations can be administered with one injection Primary Course of Hepatyrix should give protection against Hep A for up to 1 yr and Typhoid for 3 yrs. This is the same as for the vaccines given separately. This may lead to confusion because at 6 month - 1 year, patients will need a booster dose of Hep A. After Hepatyrix booster, patient's protection for Hep A is extended to 10 yrs but the Typhoid component only gives protection for 3 yrs 	If any of these conditions are met, FP34D
Influenza	<ul style="list-style-type: none"> Where the doctor considers the vaccine is indicated but the patient does NOT qualify for the enhanced service, no fee can be charged from the patient 	FP34D
Influenza DES	<ul style="list-style-type: none"> Where the patient qualifies under the terms of the DES 	FP34D
Meningitis C	<ul style="list-style-type: none"> Adults entering full-time education, asplenic patients and adults (single dose) 	NO - Vaccine is centrally purchased and distributed free by Farillon
Meningococcal A, C, W135 & Y Vaccine	<ul style="list-style-type: none"> Asplenic children and adults irrespective of age or the interval from splenectomy should receive a single dose of the vaccine before travelling to areas where there is a risk of Group A infection under GMS even if they have previously had Men C 	For adults FP34D
Meningococcal A, C, W135 & Y Vaccine Enhanced Service	<ul style="list-style-type: none"> Meningococcal vaccination of contacts of cases. Where a case is confirmed as infected within a Group A or C strain, the Communicable Disease Control Team of the Health Authority will advise the doctor to offer the vaccination as additional protection to those who have already received prophylaxis with rifampicin/ciprofloxacin 	FP34D
MMR Enhanced Service	<ul style="list-style-type: none"> Children over the age of 15 yrs if not previously immunised with an MMR combined vaccine Opportunistically young adults who have not been vaccinated 	NO - Vaccine is centrally purchased and distributed free by Farillon
Pneumococcal Vaccine ***** Prevenar for 'at risk' babies under 2yrs Pneumovax for 2 yrs and over	<ul style="list-style-type: none"> Asplenic Chronic renal disease or nephritic syndrome Immunodeficiency or immunosuppression due to disease or treatment, including HIV at all stages Chronic heart disease Chronic lung disease Chronic liver disease including cirrhosis Diabetes Mellitus 	If any of these conditions are met, FP34D
Rabies	<ul style="list-style-type: none"> At kennels and catteries approved by the Ministry of Agriculture, Fisheries & Food for the quarantine of imported dogs, cats etc. At quarantine premises in zoological establishments By carrying agents authorised to carry imported dogs, cats etc. At approved research and acclimatisation centres where primates and other imported mammals are housed In laboratories handling rabies virus At seaports and airports where they are likely to come into contact with imported animals or animals on ships or aircraft, e.g. Customs & Excise and police officers As veterinary and technical staff of MAFF As inspectors appointed by local authorities under the Diseases of Animal Act or employed otherwise who, by reason of their employment, encounter enhanced risk Licensed bat handlers Health care workers who are likely to come into close contact with rabies Persons directly involved in control measures carried out under the direction of Medical Officer for Environmental Health, together with veterinary surgeons engaged in private practice within the infected area and their ancillary staff 	Issue FP10
Rabies Enhanced Service	<ul style="list-style-type: none"> Post exposure treatment including travellers 	Vaccine is supplied by centres listed in PHLS Directory - see BNF for details
Typhoid Polysaccharide Vaccine	<ul style="list-style-type: none"> Travel outside the UK EXCEPT to Canada, USA, Australia, New Zealand and northern Europe (Belgium, Denmark, Iceland, Netherlands, Norway, Sweden) Travel to an infected area Travel to countries where it is a condition of entry that visitors should have been immunised 	If any of these conditions are met, FP34D
Varicella (Chickenpox)	<ul style="list-style-type: none"> Front-line Health Care Workers. No patients should be treated as they should all be covered by an appropriate Occupational Health Service 	Refer to relevant Occupational Health Service