



Guidance to GP practices on GP patient registration fraud

Protecting your NHS

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This document has been prepared by the NHS Counter Fraud Service (NHS CFS) and approved by the Department of Health. It offers guidance to GP practices on how to identify and manage suspicions of patient registration fraud and how to prevent this type of activity occurring in the future.

The NHS CFS has responsibility for all policy and operational matters relating to the prevention, detection and investigation of fraud and corruption in the NHS. For more information, please visit www.nhsbsa.nhs.uk/fraud.

What is patient registration fraud?

There have been a number of cases where patients (both temporary and newly registered) have registered at GP practices (often at multiple practices) using their own or false details and fraudulently obtained prescription drugs without providing evidence of their identity or giving details of their most recent GP. They have obtained prescription drugs for personal use and/or to sell on and this is resulting in a financial loss to the NHS.

For example, a 51-year-old Gosport woman who used over 40 identities to obtain drugs from Dorset GPs was sentenced at Bournemouth Crown Court on 29 May 2008 to an 18-month supervised Community Service Order. She had registered with numerous GPs – mainly in the Bournemouth and Poole Primary Care Trust area – between November 2004 and January 2006, seeking prescriptions for the painkiller Co-Dydramol. She appeared before Bournemouth Crown Court on 4 February 2008 and pleaded guilty to 12 charges of deception, with another 30 counts taken into consideration.

Between 8 April and 7 October 2009, the same fraudster went on to obtain more prescriptions illegally, using further multiple aliases and dates of birth. She received a deferred sentence on 30 March 2010 but continued to seek prescriptions fraudulently. However, she was prevented from doing so at a number of practices which asked her for identification. As a result, she was sentenced on 30 July 2010 at Dorchester Crown Court to 1 year and 28 days' imprisonment.

Examples of medication that have been accessed fraudulently in the past include:

- strong opiates
- strong painkillers (e.g. codeine, dihydrocodeine and morphine)
- Tramadol
- benzodiazepines (e.g. temazepam and diazepam)
- opioid analgesics.

What are the current rules around patient registration?

The obligations on contractors (GPs) can be found in the National Health Service General Medical Services Contracts Regulations 2004.

Under these regulations, there are no legislative criteria as to who is 'eligible' to register for primary care. However, there is a requirement for the GP to make a discretionary decision about whether to accept the patient or not and a practice can, if it wishes, ask for proof of identification and other documents.

Under the contract, part 2 of schedule 6 gives the GP the power to accept and, it follows, the power to refuse an application.

Part 2 of schedule 6 also provides that a contractor may, if its list of patients is open, accept an application which is made by or on behalf of any person. It does not matter whether that person is resident in the contractor's practice area or not, or whether they are, at the time of the application, on someone else's list.

A GP may only refuse an application to go on their list if they have reasonable grounds for doing so which do not relate to the applicant's race, gender, social class, age, religion, sexual orientation, appearance, disability or medical condition.

Benefits of preventing patient registration fraud

GP practices could benefit from preventing patient registration fraud. For example, patient registration fraud may impede a GP's ability to attain appropriate Quality and Outcomes Framework (QOF) points. This might be the case with patients fraudulently registering multiple children at the same address (in order to obtain a signed DWP confirmation letter for each). The knock-on effect is that first patient appointments are booked and an interpreter might be requested to attend. This leads to unnecessary costs for the PCT and lost appointments if the children are not brought to the surgery. This may affect QOF points if lists become full with non-resident patients, and targets, such as for take-up of childhood vaccinations, are not met.

Also, repeat offenders returning to a surgery many times once a registration is accepted reduces the time available to surgery staff and hence their ability to deliver a service to 'genuine' patients.

How can your practice minimise patient registration fraud?

Taking the following steps will ensure that patient registration fraud in your practice is minimised.

1. Request identification

It is important to ask all new patients (whether registering permanently or temporarily) to provide identification upon registering.

A combination of the following can be accepted as identification (it is preferable that one item of photo ID is seen, along with one document containing the patient's address):

- birth certificate
- marriage certificate
- medical card
- driving licence
- passport
- local authority rent card
- paid utility bills
- bank/building society cards/statements
- National Insurance number card
- payslip

- letter from Benefits Agency/benefit book/signing on card
- papers from the home office
- P45.

This list is not exhaustive. The following documents are easily obtained and **should not** be accepted as proof of identity if presented in isolation:

- library card
- video rental card
- health club card
- private rent book.

If the patient provides identification, a note of this should be made on their record and they should be treated as normal. If the patient does not provide identification, the registration should still be accepted but a note should be made on the patient's records to say that no identification has been seen and they should be asked to bring something next time they attend the surgery.

2. Request proof of address

Permanent patients should also be asked to provide evidence of their address.

3. Contact your Local Counter Fraud Specialist

GP practices should report suspected false registrations to their Local Counter Fraud Specialist (LCFS), giving as much detail as possible. Details of these patients can then be circulated and all related incidents can be collated by the NHS CFS to identify serial offenders.

Please note that contacting your LCFS with any suspicions of this nature will not breach the Data Protection Act as section 29 (3) of the Act allows for the release of information for the 'prevention and detection of crime'.

Your Local Counter Fraud Specialist is Ian Halliwell and can be contacted on 07771390553 or emailed at ianhalliwell.wyac@nhs.net

Alternatively, information can be given to a confidential NHS Fraud and Corruption Reporting Line (FCRL) by phoning **0800 0284060**. The FCRL is a freephone number and a simple means of reporting concerns about NHS fraud. It allows NHS staff who are unsure of internal reporting procedures or who wish to speak with complete confidentiality to report their concerns. All calls are dealt with by experienced, trained staff and callers may remain anonymous if they wish. Alternatively, you can report online at www.reportnhsfraud.nhs.uk

The following are indicators that a patient may not be genuine (a combination of these could indicate a problem):

- They cannot produce ID.
- They cannot supply details of previous GP and address (the previously declared GP or surgery can be contacted where there is suspicion of fraud).
- They have recently returned from abroad or moved into the area.
- They have asked for an emergency appointment.

- They are asking for specific drugs (that raise concern).

4. Use the checklist summary of guidance attached below

Summary of guidance to GP practices

Checklist: Minimising patient registration fraud

This document has been prepared by the NHS Counter Fraud Service and approved by the Department of Health. It gives GP practices a handy checklist on how to minimise patient registration fraud.

Taking the following steps will ensure that patient registration fraud in your practice is minimised.

1. Request identification from all new patients (whether registering permanently or temporarily).

A combination of the following can be accepted as identification:

- birth certificate
- marriage certificate
- medical card
- driving licence
- passport
- local authority rent card
- paid utility bills
- bank/building society cards/statements
- National Insurance number card
- payslip
- letter from Benefits Agency/benefit book/signing on card
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