

Changes to the proposed 2025/26 NHS Payment Scheme following consultation

Following the consultation on the proposals for the 2025/26 NHS Payment Scheme (NHSPS), NHS England carefully considered the feedback received. This document describes the corrections, clarifications and changes that have been made to the proposals consulted on.

The most substantial change is the removal of the proposal to require commissioners to set payment limits for elective services, and all services paid for on an activity basis, based on the value of planned levels of activity. References to the payment limits have been removed from all documents. This also means that Annex E, which set out the guidance for implementing the proposed limits, is not part of the NHSPS.

There have also been minor editorial changes to improve clarity, consistency and accuracy. For more information, please contact england.pricingenquiries@nhs.net.

Please note: The pay cost estimates used to set the NHSPS cost uplift factor for 2025/26 do not reflect final pay arrangements for 2025/26, which have not yet been agreed.

Location	Issue	Change	Correction, clarification or policy change?
NHS Payment Scheme, Sections 4, 6 and 7 – payment mechanisms rules	Proposed payment limit is not being implemented	Payment limit rules removed	Policy change

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NHS Payment Scheme, Section 5, rule 3 – LVA rules	Lack of clarity on whether mental health lead provider collaborative contracts are in scope of LVA arrangements	Rule 3.a)iv) added to explicitly state that these contracts are out of scope and are excluded from LVA payment values.	Clarification
Annex A: 2024/25 prices workbook – tabs 1 APC & OPROC and 4b Other unit prices	Prices for BZ34 in worksheet '1 APC & OPROC' are different from prices in worksheet '4b Other unit prices', leading to confusion about which is correct.	Remove DC/EL prices for BZ34 in '1 APC & OPROC' worksheet	Correction
Annex A: 2024/25 prices workbook – tab 1 APC & OPROC	Feedback highlighted that the price of automated red blood cell exchange (HRG SA41Z - £2,396) was too low to reflect costs of blood products.	Update price from for SA41Z DC/EL to £2,711, adjusted by CUF.	Policy change
Annex A: 2024/25 prices workbook – tab 4a CDC unit prices	Feedback highlighted confusion about which price to use where CDC prices were different to non-CDC prices.	Removing HRG assigned to dermoscopy + report. Dermoscopy + biopsy continues to group to HRG JC43C. For information, listed the OPCS codes involving biopsy.	Policy change
Annex A: 2024/25 prices workbook – tab 5a BPT prices	Fragility Fracture of Hip and Femur non-elective BPT and non-BPT prices are lower than the non-elective APC prices.	Fragility Fracture of Hip and Femur non-elective BPT and non-BPT prices have been corrected in Annex A.	Correction
Annex A: 2024/25 prices workbook – tab 8 Other guide prices	Feedback highlighted that the proposed diabetic eye screening guide prices did not reflect actual activity and market tested prices. There were particular concerns around the additional 0.3 uplift factor applied to the Time & Motion weighting for DES+OCT price to account for non-pay costs.	Remove the additional 0.3 uplift factor from the price to reflect this.	Policy change

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Annex A: 2024/25 prices workbook – tab 8 Other guide prices	The note under the 'Diabetic Eye Screening and Grading' prices could be used by a provider to argue for reimbursement at the daycase HRG price for BZ88A.	Amende the note to clarify that DES services provided as part of the national DES programme are not mapped to HRGs and set at the OPROC/DC price since they would not include additional day case or outpatient activity that would warrant matching to one of those HRGs.	Clarification
Annex A: 2024/25 prices workbook – tab 12a High cost devices	We have received strong opposition to the proposed changes to the “Radiofrequency, cryotherapy and microwave ablation probes and catheters” category of the High-Cost Device List.	Change the wording of the comments/notes for the ‘Radiofrequency, cryotherapy and microwave ablation probes and catheters device exclusion’ back to the existing comments/notes from the 2023-25 NHSPS.	Change
Annex A: 2024/25 prices workbook – tab 12b High cost drugs	Feedback is that the proposal to change Nirmatrelvir/Ritonavir to Nirmatrelvir should not happen as Nirmatrelvir isn't available as a single ingredient product.	Revert back to Nirmatrelvir/Ritonavir.	Correction
Annex A: 2024/25 prices workbook – tab 15 LVA Schedule by ICB	Following quality assurance, an error was identified in the LVA values for non-acute providers, as their values had been double counted.	Update the LVA values to adjust for the double counting for non-acute sector.	Correction
Annex B: Guidance on currencies, Section 11 – Community Diagnostic Centres	Lack of clarity on which price should be used for dermoscopy activity delivered in a community diagnostic centre (CDC).	Remove HRG assigned to dermoscopy + report. Include, for information, the OPCS codes involving biopsy which group to HRG JC43C.	Policy change / Clarification
Annex B: Guidance on currencies, Section 20 – Specialist rehabilitation	Limited detail about the currency model for specialised rehabilitation	Section updated to give more details of the multi-level complexity-weighted currency model, using weighted bed days (WBD). Confirmation included that WBD will continue to be used following delegation of services to ICBs.	Clarification

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Annex B: Guidance on currencies, Section 21 – Diabetic eye screening	Relative weight of digital surveillance with OCT out of date.	Table 18 updated with revised relative weight	Correction
Annex C: Guidance on best practice tariffs, Sections 9 and 10 – Adult asthma and COPD	National Asthma and COPD Audit Programme has been superseded by the National Respiratory Audit Programme's (NRAP) secondary care audit.	Sections updated, including wording of criteria, to align with the NRAP audit	Clarification
Annex D: Prices and cost adjustments, Section 2.4 – Making post-modelling adjustments to prices	List of gynaecology prices that received uplifts incorrectly included HRGs MA07E, MA07F, MA07G, MA08A and MA08B.	HRGs removed from the bullet point in paragraph 30	Correction
NHS provider payment mechanisms, Section 2.9 – Mental health and community services	Implications for providers and commissioners of mental health and community currencies only described in Annex B so risk being overlooked	New section added to provider payment mechanisms to highlight key responsibilities	Clarification
NHS provider payment mechanisms, Section 3.3 – Setting the fixed element: other factors	Figure for 2023/24 cost uplift factor was the value in the initially published 2023/25 NHSPS (2.9%), not the value updated to reflect 2023/24 pay awards.	2023/24 cost uplift factor updated to 5.2% with a footnote to explain that this relates to the figure following 2023/24 pay awards.	Correction
A guide to the market forces factor, Section 5 – Creating the market forces factor	Lack of clarity about how MFF values are calculated for merged trusts.	Updated information to describe process for calculating values for merged trusts in-year.	Clarification