

# **Medical Advice Contract Employer Guide**

**My Civil Service Pension**

# Medical Advice Contract Employer Guide

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# 1. About This Guide

## General

This guide gives guidance on the processes you need to follow when dealing with Ill-Health Retirement and Injury Benefits.

## Review and Appeals Process

This guide does not cover the review or appeals processes for ill-health retirement or injury benefits. We have outlined those processes in the *Medical Reviews and Appeals Guide*, available on our website [www.civilservice.gov.uk/pensions](http://www.civilservice.gov.uk/pensions)

# 2. The Contract

## General

Where access to benefits under the Civil Service pension and compensation arrangements are dependent upon medical advice the sole providers of this advice is the Scheme Medical Adviser.

My Civil Service Pension (MyCSP) appoint the Scheme Medical Adviser and have set up a framework agreement for provision of their services. Employers and Pension Service Centres (PSCs) can contract services under this agreement on a call-off basis using the appropriate order form.

## Scheme Medical Adviser

Capita Health Solutions are the exclusive provider of this service and our agreement with them runs until 31 March 2013.

## 3. What is Ill-Health Retirement?

### General

Members who are medically retired receive immediate payment of their scheme benefits. We will only pay benefits once the Scheme Medical Adviser has confirmed that your employee satisfies the criteria. There are a number of differences in the medical retirement criteria between **classic**, **premium (or classic plus)** and **nuvos**. The benefits and arrangements for **partnership** members are different again. We have briefly explained the criteria in the relevant sections below. The money they will get and the service enhancement they may receive depend upon which section of PCSPS they belong to. We have outlined these in the ill-health leaflets that we provide – all available on our website [www.civilservice.gov.uk/pensions](http://www.civilservice.gov.uk/pensions)

### Classic

The criteria for medical retirement are that an individual is *prevented by ill health from discharging his/her duties and that the ill health is likely to be permanent*.

Where benefits are awarded, the member will get their pension for life without review.

### Premium & Nuvos

There are two tiers of medical retirement.

The Scheme Medical Adviser will recommend **upper tier** benefits if an individual has suffered a permanent breakdown in health that prevents them from discharging their duties and undertaking any other gainful employment. Where upper tier benefits have been awarded the Scheme Medical Adviser will review the medical condition on a periodical basis until the member reaches pension age. This will be at a maximum of 5-year intervals from when the award was made, but could be made at shorter intervals.

The Scheme Medical Adviser will recommend **lower tier** benefits only if an individual has suffered a permanent breakdown in health that prevents them from discharging their substantive duties.

The lower tier element is paid for life without review.

### Partnership

The criteria are that the Scheme Medical Adviser assesses that a breakdown of health is permanent and that the member is incapable of doing their own or a comparable job.

### How Does Ill-Health Retirement fit Into the Absence Process?

Before considering ill-health retirement you, with the help of your own occupational health adviser, must have investigated ways of helping the individuals return to employment.

As the employer you are responsible for referring all cases to the Scheme Medical Adviser when either management, or the individual concerned, consider that the causes of poor performance or poor attendance may make retirement on medical grounds appropriate. Ill-health retirement must be considered before taking any action to dismiss the individual.

If the Scheme Medical Adviser does not support the application in these circumstances then dismissal on poor performance or attendance grounds may proceed before the outcome of any subsequent appeal is known. If a subsequent appeal is successful then an award of ill-health retirement will be backdated to the last day of service.

## 4. What is Early Payment of Preserved Award on Medical Grounds?

### General

This provision is available to members of the **classic** scheme only.

A former member may apply to have their pension brought into payment early if their health breaks down. There is no enhancement, but the pension will remain in payment without review.

The criteria are that the person falls ill after leaving the Civil Service and that had they remained in the Civil Service they would have met the criteria for ill-health retirement.

### Considering Ill-Health Retirement Retrospectively

Early Payment of a Preserved Award on Medical Grounds is not the same as considering Ill-Health Retirement retrospectively. Considering ill-health retirement retrospectively is an exceptional measure usually only allowed when there has been an error in the original handling of the case. This could be where you should have referred the individual for consideration of ill-health retirement before the individual left service, but failed to do so.

You must seek permission from MyCSP before referring such cases to the Scheme Medical Adviser. Please see the [contacts](#) section for how to contact MyCSP. You should not use the standard ill-health retirement order form; MyCSP will issue you with the correct form if we decide that the application is appropriate to proceed.

## 5. What is Injury Benefit?

### General

The Civil Service Injury Benefit Scheme (CSIBS) provides compensation to civil servants who suffer a qualifying injury while on duty which reduces their earnings capacity. The CSIBS covers all civil servants, including employees who are not in the Civil Service Pension arrangements. CSIBS does not provide for compensation for the loss of any mental or physical faculties, or for pain and suffering.

In most cases the decision maker will be your PSC. They will decide whether a qualifying injury occurred and may take advice from the Scheme Medical Adviser when appropriate. The Scheme Medical Adviser does not make the decision on whether to make an award.

The criteria of a qualifying injury are one that occurs in the course of official duty and is wholly or mainly attributable to the nature of the duty. (Different criteria applied to injuries that occurred before April 2003.)

### Extension of Paid Sick Leave

Extension of paid sick leave is not a provision of the Civil Service Injury Benefit Scheme. The Civil Service Management Code specifies that where a member is absent from work due to a qualifying injury 6 months extension of paid sick absence on full pay before normal departmental sick pay arrangements are applied. The Scheme Medical Adviser can be asked for advice regarding whether an injury would qualify under CSIBS or whether any subsequent absence is due to the injury.

### Injury Benefits

Temporary injury benefits become payable once the member has exhausted their entitlement to full sick pay and remains on sick absence due to the qualifying injury. The Scheme Medical Adviser will provide advice on the medical aspects of cases. In clear cut cases, for example if someone fractures a limb in a fall on duty, the medical advice will not be needed.

Should the individual suffer a permanent injury that impairs their earnings capacity then an assessment of impairment must be made by the Scheme Medical Adviser. This will be done when the individual is leaving employment, moving to a lower grade or reducing their hours. Your PSC will make the decision awarding benefits.

## 6. What Order Form Should I Use?

### Important

It is vital to ensure that your referral to the Scheme Medical Adviser is complete, contains as much relevant information as possible and includes all the relevant paperwork. The order forms contain more information on what you need to do, please read the form carefully before submitting it to the Scheme Medical Adviser. If you need advice about what to send, please contact the Scheme Medical Adviser helpdesk – see the [contacts](#) section of this document.

All medical advice order forms are available on our website - links to these are below.

### Ill-Health Retirement

Use form **IHR 1** for people in the **classic, classic plus, premium** or **nuvos** schemes

[www.civilservice.gov.uk/pensions/employer/employer-forms](http://www.civilservice.gov.uk/pensions/employer/employer-forms)

Use form **IHR 2 (Partnership)** for people in the **Partnership** scheme

[www.civilservice.gov.uk/pensions/employer/employer-forms](http://www.civilservice.gov.uk/pensions/employer/employer-forms)

### Early Payment of Preserved Award (EPPA)

Use form **EPPA 1** [www.civilservice.gov.uk/pensions/employer/employer-forms](http://www.civilservice.gov.uk/pensions/employer/employer-forms)

### Ill-Health Retirement & EPPA Appeals

Use form **APP 1** for an appeal in relation to ill-health retirement or early payment of preserved award [www.civilservice.gov.uk/pensions/employer/employer-forms](http://www.civilservice.gov.uk/pensions/employer/employer-forms)

### Injury Benefit

Use form **CSIBS 1** [www.civilservice.gov.uk/pensions/employer/employer-forms](http://www.civilservice.gov.uk/pensions/employer/employer-forms)

Use form **CSIBS 2** for an appeal or review in relation to injury benefit

[www.civilservice.gov.uk/pensions/employer/employer-forms](http://www.civilservice.gov.uk/pensions/employer/employer-forms)

### Complaints

Use form **Med 09** [www.civilservice.gov.uk/pensions/employer/employer-forms](http://www.civilservice.gov.uk/pensions/employer/employer-forms)

## 7. Where Do I Send It?

Note: Please read this section in conjunction with any internal guidance your Department has in place, for example referring cases via your occupational health provider or HR Service Centre.

Please refer to your security guidance when sending personal details.

Send order forms to the Scheme Medical Adviser at the address in our [contacts](#) section.

### Contacting the Scheme Medical Adviser about Order Forms

The Scheme Medical Adviser will keep you updated of any delays. Should you wish to query progress of the order please see the [Contact](#) section for details.

If an individual asks about progress of their application please contact the Scheme Medical Adviser on their behalf.



## 8. When Do I Send It?

### Ill-Health Retirement

Before considering ill-health retirement, you must have investigated ways of helping the individual return to, or stay in, employment. Your occupational health adviser will have been involved in this process. The Scheme Medical Adviser will use the medical information that your occupational health adviser has collected. Medical information is only considered current if it has been supplied within the last three months, you should therefore liaise with your occupational health provider to make sure that there are no delays before requesting advice from the Scheme Medical Adviser.

If you are considering dismissal of an individual on grounds of inefficiency, you must allow time for that person to be considered for ill-health retirement first. (Section 6 of the Civil Service Management Code applies)

You should not refer a case to the Scheme Medical Adviser where you will not consider Ill-Health Retirement. This will apply where the member is under investigation for alleged misconduct that could lead to their dismissal. In most cases a decision on Ill-Health Retirement will be deferred until the investigation has been completed and then only progressed if the individual has not been dismissed. You must notify the Scheme Medical Adviser of the details of any ongoing disciplinary action when submitting an ill-health retirement order form.

If the scheme member has an outstanding Employment Tribunal that is relevant to the Ill-Health Retirement referral then you must send a copy of the member's claim form and employer response along with any medical evidence. If a judgement has been made on an Employment Tribunal or Employment Appeals Tribunal in the last six months that is relevant to the Ill-Health Retirement referral then a copy must be included with the order form.

The Ill-health retirement order form (IHR 1) contains details of the documentation that needs to accompany the order form.

### Early Payment of Preserved Award on Medical Grounds

You must complete the order form and gather all the information required.

It may be difficult to identify an accurate job description for someone who left some time ago. In such circumstances a general description of the duties will suffice, including any specific physical or mental requirements of the job.

The individual's letter of application is often helpful, particularly if it is accompanied by a GP letter.

### Injury Benefit

Your PSC is the decision maker in all Injury Benefit. They will determine when they need advice from the Scheme Medical Adviser.

### Appeals

Please see the Medical Review and Appeals Guide, which is available on our website [www.civilservice.gov.uk/pensions](http://www.civilservice.gov.uk/pensions)

## 9. What Happens Next?

### Scheme Medical Adviser

- The Scheme Medical Adviser assesses order forms upon receipt and they will return any where the papers are incomplete within ten working days. The Scheme Medical Adviser will charge you for returned referrals so it is important that you include all required information and documents.
- They will then decide if there is enough information to provide advice without them having to obtain further information.
- If there is, they will send you a report and certificate, where appropriate, within 10 working days of receipt of the case.
- If they need further evidence they will obtain this:
  - Through a personal consultation with the member or
  - Through obtaining a third party report from the member's GP and/or specialist.Sometimes they will do both. They will keep you informed where this is happening.
- When a consultation is required, the Scheme Medical Adviser will phone the member to arrange this, and send written confirmation of the appointment to both the member and to you. If the member subsequently cancels a consultation, the Scheme Medical Adviser will rearrange the appointment on one occasion only (if the second appointment is not attended or cancelled no further appointment will be offered). If the member fails to attend a consultation or cancels with less than 24 hours notice, there will be a full charge for the consultation. If a second consultation doesn't take place due to the member cancelling or not attending then the case will continue without this additional information. Where the Scheme Medical Adviser has requested a consultation with the member they will send a report, and certificate where appropriate, giving their advice to the employer within 30 working days of receipt of the case. (The 30 day timescale will not include periods where the service standard clock stops, for example when the member has rearranged or not attended an appointment.)
- The Scheme Medical Adviser only undertake domiciliary visits to conduct a consultation in very exceptional circumstances, and at the Scheme Medical Adviser's discretion. The home is a far from ideal environment in which to undertake such assessments and such consultations are expensive for the department and may lead to delay. The best environment for consultations is at the Scheme Medical Adviser's premises. If the member identifies that travel may be difficult you should actively consider assisting the member with their travel arrangements. You should discourage requests for domiciliary visits and inform the individual that they are rarely possible.
- When a third party report is required, the Scheme Medical Adviser will send the request within 5 working days of receipt of the case. They will send two chasers if a report has not been received after 20 and then 25 days and will return the case to the main process when the report has been received or after 30 working days if the report has not been received. The Scheme Medical Adviser will not pay for third party medical reports in advance. This is because there is no guarantee of the quality of the report, how long it will take the doctor to provide it, or even that it will ever be provided. Where a GP or hospital refuse to release information without advance payment for the report, the assessment will proceed without the report, using any other medical evidence that has been gathered and is available.

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Where the Scheme Medical Adviser have requested a third party report they will send a report, and certificate where appropriate, giving their advice to the employer within 45 working days of receipt of the case.

- Where the Scheme Medical Adviser request both a consultation with the member and a third party report they will send a report, and certificate where appropriate, giving their advice to the employer within 65 working days of receipt of the case.

### Employer

- You should keep the member up to date with progress of the application whenever the Scheme Medical Adviser updates you.
- When the report, and certificate if appropriate, is received from the Scheme Medical Adviser, you should advise the individual as soon as possible. Please remember that the final decision on Ill-Health Retirement is yours but that you cannot award Ill-Health Retirement unless the Scheme Medical Adviser has confirmed that your employee satisfies the criteria. Your PSC is the decision maker on all Injury Benefit awards.
- If the Scheme Medical Adviser supports Ill-Health Retirement, they will issue a certificate that is valid for 4 months and 10 days. If you decide to award ill-health retirement the last day of service of the member must be within the 4 month 10 day period.
- In all cases you should give your employee details of the Scheme Medical Adviser advice and advise them of their appeal rights.

## 10. Invoicing Arrangements

### Location Codes

Capita Health Solutions, the current Scheme Medical Adviser, identifies where to send invoices from the location code that you entered on the order form. If you don't know what your correct location code is please contact the Scheme Medical Adviser using the details in the [contacts](#) section. When the Scheme Medical Adviser receives an order form without a location code the ongoing process could be delayed.

Please note that Capita Health Solutions have revised some location codes from 1 April 2009 and will let you know if your location code is to be changed. They will issue new location codes for those used in the past year. Please continue to use your current location code until you have received your new one. If Capita Health Solutions accepts an order with an out of date code they will let you know the new code which you should use the next time that you place an order

### Invoices

Capita Health Solutions will normally send an invoice each month for the services that they have supplied. **Please remember that, as part of the Government's support to business, you should aim to pay invoices within ten days.**

# 11. Complaints Procedure

## Procedure

Should you or your employee wish to complain about the service provided by the Scheme Medical Adviser you should follow the complaints procedure outlined here. Examples might include matters relating to the convenience of any appointment or the way the Scheme Medical Adviser carried out the medical consultation. This process does not cover the medical appeals procedure about Scheme Medical Adviser recommendations. We explain the appeals procedure in the *Medical Reviews and Appeals Guide* available on our website. The complaints process is also separate from the Internal Dispute Resolution procedure, please see the leaflet *If you have a complaint about your pension*, which is on our website.

## How?

Where a member raises a complaint, you must first decide whether it refers to the Scheme Medical Adviser and that you want them to investigate. You may be able to respond to the complaint yourselves, explaining any problems or delays. If you do feel that it is appropriate to refer the complaint to the Scheme Medical Adviser you must ask the member to complete form Med 9, or you may complete the form on the member's behalf. Who ever is making the complaint should complete Section 1 of the form. You or your PSC should complete section 2 of the form.

## Where?

All complaints must be sent on form Med 9 to the Scheme Medical Adviser at:

Administration Team  
Capita Health Solutions  
10 Queen Victoria Road  
Coventry  
CV1 3PJ  
Email: [pcsps.chs@capita.co.uk](mailto:pcsps.chs@capita.co.uk)

## What Next?

The Scheme Medical adviser will acknowledge receipt of the Med 9 form within 5 working days and will normally provide a full reply within 4 weeks. The reply will be provided to you. Where the case concerns a member complaint you must give the member written details about the outcome.

## Escalation

If the member is dissatisfied with the response from the Scheme Medical Adviser they should tell you. If you feel the matter has been resolved you must explain your reasons to the member. If you agree with the member that the complaint remains unresolved you should refer the case to MyCSP at the address on the [contacts](#) page. MyCSP will take the matter up with the Scheme Medical Adviser and reply to you or your PSC.

## 12. Contacts

### The Scheme Medical Adviser

**Name** Capita Health Solutions  
**Address** 10 Queen Victoria Road  
Coventry  
CV1 3PJ  
**Email** [pcsps.chs@capita.co.uk](mailto:pcsps.chs@capita.co.uk)  
**Phone** 02476 500700

### My Civil Service Pension

**Name** My Civil Service Pension  
**Address** Grosvenor House  
Basing View  
Basingstoke  
RG21 4HG  
**Email** [employerhelpdesk@cabinet-office.x.gsi.gov.uk](mailto:employerhelpdesk@cabinet-office.x.gsi.gov.uk)  
**Phone** 01256 846414  
**Website** [www.civilservice.gov.uk/pensions](http://www.civilservice.gov.uk/pensions)

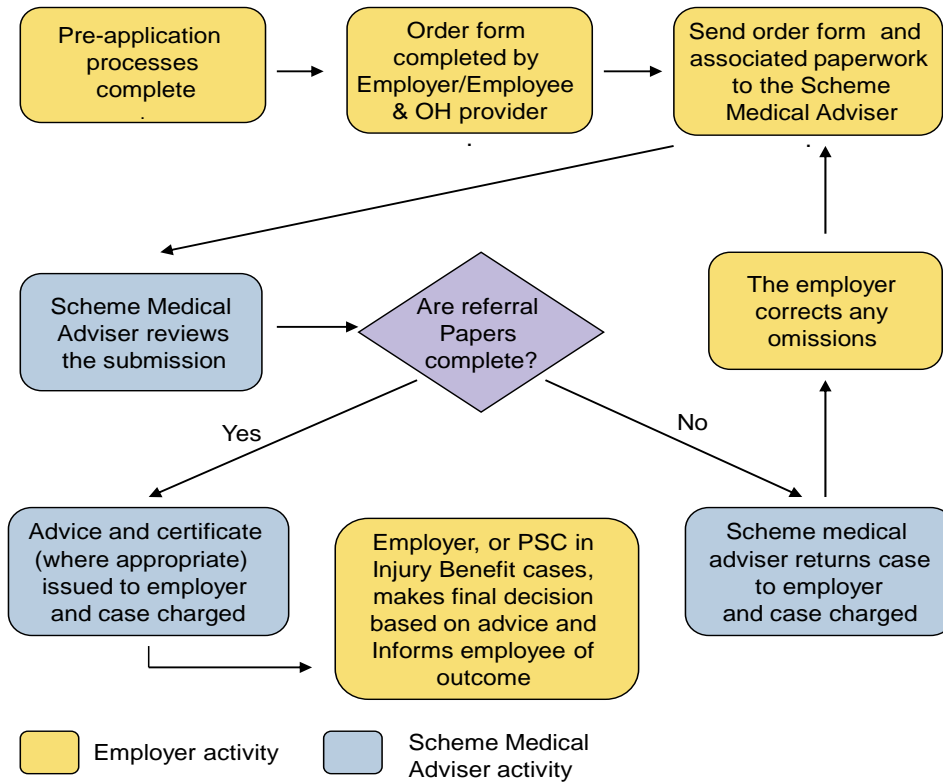
## 13. Workshops

### Scheme Medical Adviser

The Scheme Medical Adviser holds workshops for employers at regular intervals and will always be willing to discuss the possibility of holding bespoke events to include your occupational health provider and PSC, or to hold events at your premises. Workshops are routinely scheduled to take place in London three times a year. Please see our website for planned dates [www.civilservice.gov.uk/pensions](http://www.civilservice.gov.uk/pensions).

If you wish to attend a workshop or arrange a bespoke course please contact Capita Health Solutions using the details in the [contacts](#) section. For cost details please see [Annex B](#).

# Annex A – Process Flowchart



## Service Standards

The Scheme Medical Adviser will issue an assessment within ...

1. 10 working days of receiving the order form if there is sufficient medical evidence in the submission.
2. 30 working days of receiving the order form where a consultation is offered.
3. 45 working days of receiving the order form where a third party report is requested.
4. 65 days of receiving the order form where both a consultation is offered and a third party report requested.

Where the Scheme Medical Adviser fails to meet these standards the chargeable fee will be reduced. Delays outside of the Scheme Medical Adviser's control will extend the deadlines – for example, if an employee rearranges a consultation. My Civil Service Pension monitors the Scheme Medical Adviser performance against these standards.



## Annex B - Medical Fees

Applicable from 01/04/2010

Service	Contractor's function	Proposed Fees
<b>1. Medical retirement.</b>	Consider whether a member meets the medical retirement criteria for whichever part of the PCSPS they are a member (or PPAIHBS if the case may be); advising on a review date, if any, in the 2002 or 2007 Section; issuing the appropriate Scheme certificate. Provide a written report to the employer, taking due regard to medical in confidence material.	£80.78
1a. Review of upper tier award	Consider whether a member still meets the medical retirement criteria for an upper tier award (2002 and 2007 sections only)	£97.14
<b>2. Appeal against decision that medical retirement criteria are not met:</b>		
2a. First stage appeal.	To review original decision (which may or may not be on the basis of fresh medical evidence). Issuing appropriate Scheme certificate if appeal upheld.	£80.78
2b. Second stage appeal	The Contractor's senior physician (or deputy) reviews all the evidence relating to the case determining whether first stage decision not to support medical retirement was correct. Issue appropriate PCSPS certificate if appeal upheld. If unable to uphold, decide whether appropriate to proceed to Stage 3.	£80.78 (2a charge)+ £369.12 = £449.90
2c. Appeal to medical review board independent of Contractor	The Contractor's senior physician (or deputy) to convene an independent medical review board which prepares and issues a case report.	£183.03 to arrange + Chair fee £644.18 + Board member fee £541.93
<b>3. Early payment of preserved pension benefits on medical grounds.</b>	Advise whether or not a former member of the classic scheme with preserved benefits would have met the medical retirement criteria had they remained in the PCSPS employment, issuing the appropriate PCSPS certificate.	£ 80.78
<b>4. Pension Allocation.</b>	Based on a medical examination by a doctor nominated by the Contractor, advising whether the member wishing to allocate part of their pension is in good health.	£170.76 + £80.78 = £251.54
	Paper based referral	£80.78

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4a Medical examination reveals health doubt	Offering and arranging a consultation by one of its medical referees (consultants).	£134.97
4b Examination by consultant inconclusive or where member produces contrary report by a consultant.	Offering and arranging a medical board to consider all evidence and also to report the outcome. Fees for the board chair and member(s) will be charged at cost. The Contractor will use best endeavours to minimise that cost.	£131.90
<b>5. Advice on Civil Service Injury Benefit Scheme (CSIBS) applications.</b>		
5a. Advising on qualifying injury	Advise on potential CSIBS qualifying injuries, including whether there is a causal link between the specified injury and the nature of the applicants duty (CSIBS rule 1.3). Provide a written report explaining rationale.	£100.21
5b. Assessment of impairment of earnings capacity.	Where a CSIBS qualifying injury has occurred, advising on the degree of impairment of earnings capacity (CSIBS rule 1.7). Provide a written report explaining rationale.	£100.21
<b>6. Ad hoc issues raised by employers/ PSCs relating to schemes provisions.</b>	Providing professional medical advice or support not otherwise covered by this schedule.	Hourly rate £193.25 ½ day rate £774.03 Daily rate £1,316.98
<b>7. Medical retirement and other data as required by employers/PSCs.</b>	Other than as provided elsewhere in this contract to meet reasonable requests for information about the services undertaken by the Contractor, including analysis of type of referral and outcome in respect of cases referred by the employer/PSC making the request.	£86.91
<b>8. Inadequate referral - case referred without sufficient information to allow Contractor to carry out requested service.</b>	Providing report explaining why work could not be undertaken.	£57.26
<b>9. PCSPS Medical Examination (standard single consultation)</b>	Providing a medical examination by an occupational health physician and producing the associated report	£170.76
<b>10. PCSPS Medical Examination (extended session for a complex case consultation)</b>	Providing a medical examination by an occupational health physician and producing the associated report	£298.57

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<b>11. Obtaining further medical evidence or third party reports (does not include medical appeals, where such reports must be provided by the appellant).</b>	Requesting appropriate medical information or commissioning third party reports from GP/specialist, chasing reports as specified in the service standards, making payments to third parties at cost.	<b>£Cost +£35</b>
<b>12. Medical Opinion.</b>	Other than provided elsewhere in this contract providing medical reports in response to customer requests.	<b>£80.78</b>
<b>13. Re-referral – Medical retirement.</b>	The Contractor has returned the case to the employer after carrying out the chasing actions specified in the service standards, charging the full appropriate fee. The case is re-referred with the all information now present. The Contractor provides advice/certificates as in Service 1 or 5.	<b>£60.33</b>
<b>14. Re-referral – CSIBS.</b>	The Contractor has returned the case to the employer after carrying out the chasing actions specified in the service standards, charging the full appropriate fee. The case is re-referred with all the information now present.	<b>£60.33</b>
<b>15. Non-attendance at pre-arranged face to face consultation.</b>	Non-attendance without prior notifications.	100% of fee
<b>16. Cancellation/reschedule of appointment:</b>		
	with less than 48 hours notice	100% of fee
<b>17. Domiciliary / home visits</b>	In cases where the client is unable to physically attend an appointment due to medical / ill-health reasons	Hourly rate <b>£193.25</b> ½ day rate <b>£774.03</b> Daily rate <b>£1316.98</b>
<b>18. Training courses</b>	Provision of general or bespoke training for the employer, PSC or occupational health providers. (class sizes between 10-30 attendees)	<b>£ 215.75</b> per place Prices for bespoke events upon request