

SUMMARY OF CHARGES 2024

Effective: Monday 1 April 2024

| Service | Customer Group | CLS Scheme | Gross Fee (Private) | MedBen (Rebate) | Nett Fee (Customer) |
|--|-------------------------------------|-----------------|---------------------|-----------------|---------------------|
| GP Surgery Consultation <i>Duration up to 15 minutes</i> | Adults aged 18 and Over | HIO/HMA/Private | £88.00 | £40.00 | £48.00 |
| | | HAS | £69.64 | £59.64 | £10.00 |
| | Child/Young Person Aged 0-17 | HAS/CHS/Private | £69.63 | £69.63 | £ - |
| GP Remote Consultation <i>Duration up to 15 minutes</i> | Adults aged 18 and Over | HIO/HMA/Private | £64.28 | £20.28 | £44.00 |
| | | HAS | £64.94 | £54.94 | £10.00 |
| | Child/Young Person Aged 0-17 | HAS/CHS/Private | £64.93 | £64.93 | £ - |
| Nurse Surgery Consultation <i>Duration up to 15 minutes</i> | Adults aged 18 and Over | HIO/HMA/Private | £44.28 | £20.28 | £24.00 |
| | | HAS | £48.02 | £41.02 | £7.00 |
| | Child/Young Person Aged 0-17 | HAS/CHS/Private | £48.02 | £48.02 | £ - |
| GP Follow-Up / Reduced Consultation <i>Reduced from the Standard Consultation Fee</i> | | HIO/HMA/Private | - £25.00 | £ - | - £25.00 |
| Cervical Smear Cytology Screening <i>SOJHCS Cytology Screening Programme Entitlement</i> | | HIO/HMA/Private | £71.17 | £71.17 | £ - |
| Home Visit Charges: (During Normal Surgery Hours) | | | | | |
| GP Home Visit (Acute) <i>During Normal Surgery Hours</i> | Adults aged 18 and Over | HIO/HMA/Private | £150.00 | £20.00 | £130.00 |
| | | HAS | £135.42 | £105.42 | £30.00 |
| | Child/Young Person Aged 0-17 | HAS/CHS/Private | £135.42 | £115.42 | £20.00 |
| GP Home Visit (Chronic) <i>During Normal Surgery Hours</i> | Adults aged 18 and Over | HIO/HMA/Private | £100.00 | £20.00 | £80.00 |
| Out of Hours Charges: Provided by the Jersey Doctors On Call (JDOC) Service (Effective From 02/01/2024) | | | | | |
| JDOC GP Telephone Consultations <i>Evenings and Weekends Before 23:00</i> | | HIO/HMA/Private | £50.28 | £20.28 | £30.00 |
| | | HAS / CHS | £50.28 | £30.28 | £20.00 |
| JDOC GP Telephone Consultations Overnight <i>Evenings and Weekends after 23:00</i> | | HIO/HMA/Private | £60.28 | £20.28 | £40.00 |
| | | HAS / CHS | £50.28 | £30.28 | £20.00 |
| JDOC GP Base Consultations <i>Evenings and Weekends up to 23:00</i> | | HIO/HMA/Private | £94.00 | £20.00 | £74.00 |
| | | HAS / CHS | £94.00 | £64.00 | £30.00 |
| JDOC GP Home Visit <i>Evenings and Weekends up to 23:00</i> | | HIO/HMA/Private | £165.00 | £20.00 | £145.00 |
| | | HAS / CHS | £165.00 | £104.00 | £61.00 |
| JDOC GP Home Visit Overnight <i>Evenings and Weekends after 23:00</i> | | HIO/HMA/Private | £199.00 | £20.00 | £179.00 |
| | | HAS / CHS | £199.00 | £124.00 | £75.00 |
| Additional Service Charges: (in addition to the standard consultation fee) | | | | | |
| Blood Test / Swab / Laboratory Analysis/Screening (Standard SOJH Laboratory) | | | | | £16.00 |
| Cryo-Therapy (Liquid Nitrogen or CryoDerm) / Ear Irrigation | | | | | £16.00 |
| Pregnancy Test / Urinalysis (Dip Analysis) / GUM Screening (speculum/proctoscope examination) | | | | | £7.00 |
| ECG / Spirometry / 24 Hour Blood Pressure Monitoring | | | | | £48.00 |
| Injection Administration / B12 / Depo / Pnuemovac / Shingles | | | | | £15.00 |
| Referral Letter (to SOJ Health Clinician) / Medical Certificate / Forms Completion (Insurance/Passport etc) from | | | | | £16.00 |
| Private Referral / Letter (to Private Consultant) from | | | | | £16.00 |
| Travel Vaccinations (All vaccinations must be paid for at the time of vaccination) | | | | | £Variable |
| Prescription Charges: | | | | | |
| Repeat Prescription (charged per month up to 3 Month's Supply of medication) | | | 1m £6.00 | 2m £8.00 | 3m £10.00 |
| Acute (Non-Repeat) / Urgent Same-Day Request Prescription Issued | | | | | £5.00 |
| Fax/Email/Post to Pharmacy/Home (Prescribing Regulations Apply for faxing/emailing of prescriptions) | | | | | £1.00 |
| Account Charges: (for all fees not paid at the day/time service incurred) | | | | | |
| Invoicing Fee (Fee can be deducted where service fees payment in full is received within 14 days of invoice date) | | | | | £10.00 |
| Overdue Account Fee (applied monthly to overdue accounts outstanding at the end of the month following invoice) | | | | | £10.00 |
| Not Attendance / Late Cancellation Fee – (For non-attendance to a pre-booked appointment) | | | | | £30.00 |
| General Terms: | | | | | |
| All surgery fees are payable at the time of service, a £10.00 Invoicing Fee will be applied to all fees not paid in full on the day of service, this can be deducted if payment is made in full within 14 days of service/invoice date . | | | | | |
| We kindly request a minimum of 2 Hours Notice to cancel an appointment to prevent non-attendance or cancellation fee being incurred. | | | | | |
| All services and fees are subject to our standard terms of service and charges. All fees are at the clinician/Practice Manager discretion | | | | | |