NHS
Lancashire and South Cumbria
Integrated Care Board

Phlebotomy LES Year-End Payment Approach 2026/27

Further to recent communications about LES arrangements for 2026/27 we are conscious that you have been awaiting confirmation of the approach for phlebotomy. We have now had the opportunity to review the outturn data for 2026/26 and discuss with clinical colleagues and partners.

This document sets out the approach that will be used during 2026/27 to support in-year assurance monitoring and year-end payment decisions for the Phlebotomy LES.

Overview

This approach will be applied to year-end payment decisions for Phlebotomy in 2026/27. It is intended to provide clarity and transparency on how activity delivery and recording will be used to support assurance of service delivery.

Although the Phlebotomy LES is capitated and does not specify contractual minimum activity requirements; practices are expected to deliver the service in line with the service specification throughout the full financial year. Indicative activity levels will be used for assurance purposes only and do not constitute contractual targets. They will be used to assess whether an appropriate level of service delivery has been achieved.

Practices can access the **LES 2026/27 – Phlebotomy Expected Activity Levels & Practice Tracker** on the intranet, within the **Phlebotomy** section under **Supporting Documents & Resources**, to review their indicative expected activity levels.
Further details on how planned activity is calculated are available on the **Guidance** tab.

Expectation of Delivery and Recording

Practices are responsible for:

Delivering the service in line with the service specification.
Ensuring that all activity delivered is accurately and timely recorded using the agreed coding and recording arrangements.

Practices are expected to continue delivering the service throughout the full financial year regardless of whether indicative assurance thresholds have already been achieved. Recorded activity will form the basis of all year-end payment decisions.

Year-End Payment Approach

Year-end payment positions will be determined based on recorded activity levels achieved by the end of the financial year:

Under 50% delivery – A proportion of the annual capitated funding will be retained, aligned to the level of recorded activity delivered.

50%–75% delivery – practices will retain 75% of the annual capitated funding.

Over 75% delivery – practices will retain 100% of the annual capitated funding.

Over 110% delivery – practices will retain 100% of the annual capitated funding. Any activity delivered above the 110% threshold will be reconciled as part of the end-of-year reconciliation process and paid on a cost and volume basis. For example, if a practice achieves 114%, the additional 4% delivered above 110% will be paid at the **cost and volume rate of £3.75.**

Where recovery of funding is required, practices will be able to discuss an appropriate repayment plan with the ICB Finance team.

Thank you for your continued hard work. Should you have any questions regarding the above, please contact lscicb.primarycareles@nhs.net