**Premises Reimbursement Claims and Premises change in Tenure, renewal leases and Rent Reviews**

Please note the change in the generic email accounts to be used for submissions to the NWL Estates Team relating to any premises reimbursement claims and relating to the premises tenure and rent reviews.

The generic email accounts to use are:

* Premises Reimbursement Claims: [nhsnwl.gpreimbursementnwl@nhs.net](mailto:nhsnwl.gpreimbursementnwl@nhs.net)
* Premises change in Tenure, renewal leases and Rent Reviews: [nhsnwl.gprrnwl@nhs.net](mailto:nhsnwl.gprrnwl@nhs.net)

1. **Reimbursement of premises costs:**

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| **What can be claimed?** | Rent | * **Leased / Rented Premises claims,** reimbursement based on lower of agreed CMR or actual invoice value whichever is the lower * **Notional and Cost rent are on an automatic monthly reimbursement so no claim required** |
| Rates | * Reimbursement based on **actual invoice** **value** * **Reimbursement not based on direct debit payments** |
| Water | * Reimbursement based on **actual invoice value** * **Reimbursement not based on direct debit payments, the water company invoice is required** |
| Clinical Waste | * **Clinical Waste Only** * **Not General or Domestic Waste** |
| Congestion Charges | * Only for costs incurred in relation to delivering healthcare services * Must be claimed within 6 months of the journey |
| **When should Claims be submitted by?** | By 15th of the month for reimbursement in the following month. | * Submission by 15th of the month for reimbursement in the following month through PCSE * If submitted after 15th the claim will be delayed by a month |
| **How do I submit a claim**? | Complete all the required documentation, converted to PDF files and email to:  [nhsnwl.gpreimbursementnwl@nhs.net](mailto:nhsnwl.gpreimbursementnwl@nhs.net)  by 15th of the month | * **Require completed claim form, copy invoices and evidence of payment. Preferred evidence of payment is a bank statement with information blanked out / redacted as required** * **Claim form should detail:**   • Practice name  • Practice Number  • Borough  • Date of claim  • Type of claim: e.g. Rent : complete the dates claim covers and value being claimed  • Completion of the declaration with an original signature (if needed scan after signature being made and PDF the claim form)   * **PDF’s only**, |
| **What happens if reimbursement in advance of payment is required?** | Submit the claim to the same email address | * Reason for payment in advance request to be detailed on the claim form and email. This is an exceptional circumstance arrangement and not an automatic entitlement * Borough approval is required for each payment in advance * Retrospective evidence of proof of payment will still need to be submitted by the practice, * In advance payments will not be made if previous evidence is not submitted |

1. **Agreement of CMR for Rent Reimbursement:**

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| **What needs to be agreed.** | Rent: the level of reimbursement to be made to the practice that the NHS considers forms value for money. | * For any premises the process is required as detailed in the Premises Cost Directions * Prior approval is required for any change in the premises where the practice are requesting the NHS provide reimbursement based on the proposal   e.g. rent review, renewal lease, change in tenure for the premises.   * The District Valuer provides a view of valuation on behalf of the NHS that is considered value for money for reimbursement to the practice * For leased premises the valuation will be provided having given regard to the terms of the lease. * Comment will also be provided on any terms of the lease that may not prove value for money for the NHS |
| **What types of Tenure?** | Owner occupied or Leased | * Owner Occupied (GP or a member of the partnership also owns the premises) This is known as rent reimbursement on a notional basis * Leased Premises. Lease in place between a Landlord and the practice. Practice request reimbursement to be made based on the lease terms and conditions. This is known as rent reimbursement on an actual basis |
| **What is required** | Prior approval of the level of rent reimbursement and that the proposal offers value for money to the NHS before any change takes place  Email: [nhsnwl.gprrnwl@nhs.net](mailto:nhsnwl.gprrnwl@nhs.net) | * Require completed CMR1 form along with a copy of the proposal e.g. HOT / draft lease if leased, just CMR1 if owner occupied and rent review due * Submit to the email account: [nhsnwl.gprrnwl@nhs.net](mailto:nhsnwl.gprrnwl@nhs.net) * NHS NWL Estates team then arrange District Valuer valuation * Notification of valuation to practice * Practice accept or dispute the valuation * Once agreed this forms the basis of the reimbursement of rent that will be reimbursed on an automatic monthly basis if an owner occupied notional valuation or following submission of a claim for leased premises |