

## Frequently Asked Questions

### **Why is it that the total number of prescription forms shown in the prescription item report, does not match the 'total forms received' shown on the Schedule of Payments?**

Sometimes the form numbers on the prescription item report do not match those shown on the Schedule of Payments. This is because some forms have been deleted during the processing of the account. Any FP10 Repeat Dispensing Authorisation Forms (RA) or ETP Tokens or FP10 Disallowed Prescription Item (DA) forms which have been re-submitted and have not been sorted separately and left at the top of the submitted batch may have been included within the main account and will be scanned with the account and numbered accordingly. However as no payment is made on these forms, no information is captured relating to the items on these forms and so do not appear on the prescription item report. These forms are deleted and therefore do not appear on the prescription item report.

### **What does each fragment ID represent?**

When the month's prescriptions are received, they are divided into sections in order depending on the type of prescription or document received. The different sections are given a "Fragment Id" which helps NHSBSA identify how a particular prescription item has been processed. For example 'A' = scanned FP10 or paper document, 'N' = Key from paper fragment (paper document unable to be scanned), and Z = EPS R2 prescription.

### **How can I identify each form type listed in the Prescription Item Report?**

Information can be found at the following link:

<http://www.nhsbsa.nhs.uk/PrescriptionServices/Documents/PrescriptionServices/Curent and Out of Date Rx Form Published 0709.pdf>

## **Why does there appear to be duplicate items, all for the same product and flavour?**

When a product is available in an assortment of flavours, and the prescriber indicates the number of flavours the patient should receive, the pharmacy contractor is entitled to a professional fee for each flavour dispensed. For certain products, individual flavours are not uniquely coded within the NHSBSA reporting database. In these cases it is necessary to input the product multiple times to ensure that all due fees are applied.

e.g. Fortisip Bottle 200ml is available in eight flavours. If all eight flavours are reimbursed, Fortisip Bottle banana will be input eight times, and will appear as eight consecutive and identical items in the data.

## **Product Description reads 'Exception Handler Unspecified Item'. What does this mean?**

This indicates that the product prescribed cannot be specified as it is not held by the Dictionary of Medicines and Devices. The term Exception Handler is used by our internal systems, indicating that the product could not be routinely processed. The product description 'Exception Handler Unspecified Item' will also appear on your Schedule of Payments, if the item has a basic price of £100 or more.

## **Product Description reads 'Exception Handler Discount Not Deducted Item'. What does this mean?**

This indicates that the product prescribed cannot be specified as it is not held by the Dictionary of Medicines and Devices. The term Exception Handler is used by our internal systems, indicating that the product could not be routinely processed. Discount Not Deducted is recognition that this is a product for which discount is not deducted. The product description 'Exception Handler Discount Not Deducted Item' will also appear on your Schedule of Payments, if the item has a basic price of £100 or more.

**I know that a particular product has been dispensed but cannot find it within the Prescription Item Report.**

This is likely to be because the product dispensed is not held by the Dictionary of Medicines and devices and cannot therefore be specified here. If it has been dispensed and the patient number is known, you can filter within Product Description for 'Exception Handler' and then examine the patient number information displayed.

**A particular product is appearing on my Schedule of Payments under 'Details of items which have a basic price equal to or over £100'. However, when I search for this value in the Prescription Item Report I can't find an item with that basic price.**

It could be that the item is made up of more than one pack, or element. If this is the case, the elements of the item will appear on separate lines underneath each other in the data. To verify the basic price and the quantity, the individual elements should be added together. As the item has a basic price of over £100, the expensive item fee applies. This will be shown in column BN – Expensive Item Fee Value against the last element of the item.

**A particular product over £100 is appearing in my Prescription Item Report. However, I can't find this item with that basic price on the Schedule of Payments under 'Details of items which have a basic price equal to or over £100'.**

This is due to the fact that any information in the Expensive Item List on the Schedule of Payments is reported at drug code level. The basic price values in this list do not take into account any broken bulk adjustments credited/debited in the total basic prices listed in the Prescription Item Report. Therefore, for example where a broken bulk claim has been made for a product with a pack size of 28 and the value of the pack is £120; the item will show on the Prescription Item Report with this value. However as the cost of the prescribed quantity will not be of this value, this product will not show on the Expensive item list on the Schedule of Payments if the prescribed quantity has fallen below £100.

## **An item is showing with a negative amount for Basic Price**

This is a result of a claim for Broken Bulk for that item and pack size. The claim is indicating that the reimbursement quantity may make it difficult to dispense the remainder of the pack within the next six months. The dispenser is therefore reimbursed for the full pack initially. Any items subsequently dispensed during the next six months will be deemed to have been supplied from the remainder of the pack and no further payments will be made. If a quantity of the item from the pack for which Broken Bulk was allowed is dispensed again in the same month as the original claim, an adjustment is made so that the dispenser is only paid for the amount dispensed in that month. The second instance could therefore be a negative amount i.e. NHSBSA reclaim the payment for the part of the pack that was not dispensed that month.

## **Can I check whether particular scripts have paid charge status because I count a different total to BSA?**

To determine how many items have been deducted a charge you will need to do the following –

- Filter charge status 2 in column J (Charge Status)
- Sum column K (Charges Payable)

The figure should match your Schedule of Payment.

If it does not match your Schedule of Payment check to see if there are any payment values next to the line 'Collected Elastic Hosiery'. If there is a value stated for elastic hosiery then divide the total value by £8.20 to determine the number of charges deducted. Then add this number to the total of deducted charges. This should now match the totals on the prescription item report.

## **How can I identify the Tagged /Red separator items in the detailed prescription item report?**

Any prescription form submitted in the red separator will be found at the end of each of the exempt and chargeable groups. This will include items for the following: Broken Bulk, Expensive Items, Out of Pocket Expenses, Specials, Additional Product Information, Handwritten amendments, Prescriber's signature encroaching prescribed items.

In order to locate the exempt or chargeable items contained in the red separator please carry out the following process:

- Filter fragment A in column C (Fragment ID)
- Filter group type declared 1 or 2 in column I (Group Type Declared)

Scroll to the bottom of the spreadsheet and to identify the prescription items which will have been included in the red separator group. You will be able to identify your expensive items in column R (Basic Price); where a Broken Bulk claim has been paid in Column U and where an Out of Pocket Expense claim has been paid in Column Z.