NHS Prescription Services provided by ...

NHS **Business Services Authority**

Hints & **Tips Dispensing Contractors**



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Welcome to the April 2016 issue of Hints & Tips, your regular newsletter full of ideas and advice!

In this issue you'll find information on how to report NHS fraud and exactly what you need to submit to NHS Prescription Services at the end of the month, as well as some information about a project on submissions. There's advice on when EPS Release 2 claims must be sent, the end of month submission process and submitting your claims for payment securely. We've also included details of how to claim out of pocket expenses and additional fees/payments for dispensing unlicensed medicines, plus changes to the NHS Prescription Services email address, how to use our online knowledge base and details of webinar sessions for dispensing contractors.

There's plenty more besides which we hope you'll find interesting, and remember if there are any topics you'd like us to cover in future issues please let us know at the email address below.

An error was made in the last issue of Hints & Tips where we said that an EPS Release 2 claim must be submitted by the 'fifth working day' of the following month. This is incorrect and should have read the 'fifth day' – we apologise for any inconvenience caused. The corrected article has been <u>republished</u> in this issue.

If you have any suggestions for topics you'd like see included in a future edition, please contact us at:

nhsbsa.communicationsteam@nhs.net

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Prescription Submissions Project – can you help?

One of the NHS Business Services Authority's key strategic goals is to improve efficiency by digitising our customer and supplier interactions. To support this, we have started work on developing an optional online alternative to three paper-based processes within NHS Prescription Services:

- **FP34 submission documents:** every month we send GP practices, pharmacies and appliance contractors a printed blank copy of the relevant document by post, which is completed by hand and submitted with the contractor's batch of prescriptions.
- **Referred back and disallowed prescriptions:** where a prescription needs to be returned to a contractor either for more information to allow payment to be made or because the prescribed item has been disallowed, a printed copy of the prescription is sent by post.
- **High volume vaccines:** GP practices are sent an appendix to their FP34 submission document, which is used to claim reimbursement for certain vaccinations.
- We will also look at possible submission for any payment claims relating to future advanced services.

Providing a secure digital platform for these transactions will leave less room for error (for both contractors and NHS Prescription Services), save time for contractors and reduce our operating costs – creating savings that can be reinvested in frontline patient care.

We're committed to developing the platform based on user needs, so we're looking for volunteers to take part in short face to face and telephone interviews. Your feedback will help us to review the current arrangements, identify where improvements can be made and help us to design a user-friendly digital solution.

We want to hear from anyone who is involved in any (or all) of the processes above, and ideally based in the Newcastle or Wakefield areas. If you're willing to help us by sharing your views, please email <u>nhsbsa.pssurvey@nhs.net.</u>

Look out for further updates in future issues of Hints & Tips!

Part VIIIA quantities/pack sizes Did you know...?

Where a Part VIIIA product is prescribed and the prescribed quantity differs from the Drug Tariff listed pack size, NHS Prescription Services will only take the Part VIIIA pack(s) into account for reimbursement purposes. For example:

Q. I have received a prescription for beclometasone 50microgram/dose nasal spray x 100 doses. Will I be paid for Beconase Hayfever Relief for Adults, as this is available as a 100 dose pack and Drug Tariff Part VIIIA only lists a 200 dose pack special container?

A. No - reimbursement will be made for the Part VIIIA item. Beclometasone 50microgram/dose nasal spray x 200 doses pack will therefore be reimbursed as this is the only pack listed in the Drug Tariff.

Changes to prescribed products in EPS

EPS has been designed to prevent ambiguity over what has been prescribed, by using a combination of categorical codified information and mandatory numeric fields. To comply with data protection regulations and other information governance principles, we will only take the fields required for reimbursement purposes into account. Reimbursement is based on the prescribed product, so if a prescriber adds information relating to, for example, the product or quantity into another field (such as the dosage instructions or additional information to pharmacy), this won't be considered during processing.



As a dispensing contractor, you should not dispense based on this extra information. You should contact the prescriber and where appropriate return the prescription to the Spine. The GP can then cancel the prescription and issue a new EPS R2 prescription with the correct product or quantity stated in the correct field. This will also ensure that any future repeat prescriptions will reflect the prescriber's intention.

Change to the NHS Prescription Services email address

Our main email address for customer enquiries recently changed to: *nhsbsa.prescriptionservices@nhsbsa.nhs.uk*

The old address (*nhsbsa.prescriptionservices@nhs.net*) is no longer being monitored, so if you do accidentally send an email to the old address you'll receive an automated reply asking you to re-send your enquiry to the new address.

Our letters and publications are currently being updated. Thank you for your patience while we work through them.

Medicines Use Reviews

The Medicines Use Review (MUR) service is an Advanced Service within the NHS community pharmacy contractual framework. It's a structured review undertaken by pharmacists to help patients to manage their medicines more effectively.

Payment is made for a maximum of 400 MURs per pharmacy from 1 April to 31 March in any year, except for pharmacies who have not made arrangements before 1 October. In that case, payment will be made for a maximum of 200 MURs per pharmacy, as stated in the Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013.

The NHS Business Services Authority has been asked to monitor MUR activity for each pharmacy on behalf of NHS England and to recover payment for any claims in excess of 400 in each financial year. If you have claimed more than 400 MURs, you'll receive a letter from us advising you of your cumulative number of MUR claims to date, the value of the payment to be recovered and advance notice of the recovery date.

To help you to monitor the number of claims you have made during a financial year, your monthly Schedule of Payments will include a 'year to date total' of MUR claims from April 2016.





Increase to the NHS prescription charge

Remember that the NHS prescription charge in England increased on 1 April 2016. The charge payable has increased by 20p from £8.20 to £8.40 for each quantity of a drug or appliance.

A charge is payable for each drug or appliance supplied, including each piece of elastic hosiery, unless:

- the prescribed item has been personally administered by the prescriber, or
- the patient is considered age exempt (ref. Drug Tariff Part XVI, Paragraph 5), or
- the patient has completed a declaration of entitlement to exemption or remission on the prescription form.

The cost of a prescription prepayment certificate (PPC) will remain at £29.10 for a 3-month certificate. The cost of the annual certificate will remain at £104. The PPC can help save your patients money on their prescription costs. You can register your pharmacy to sell the PPC here:

https://apps.nhsbsa.nhs.uk/ppcwebsales/PharmacyRegPage.do

To help you with the change in prescription charge, we've produced this quick-reference table so you can see at a glance how the change will affect your patients where multiple charges are payable:

| Number of charges | Prescription charge payable |
|-------------------|-----------------------------|
| 1 | £8.40 |
| 2 | £16.80 |
| 3 | £25.20 |
| 4 | £33.60 |
| 5 | £42.00 |
| 6 | £50.40 |
| 7 | £58.80 |
| 8 | £67.20 |
| 9 | £75.60 |

Got a question? Ask Us!



'Ask Us' is the NHSBSA's online knowledge base that puts answers at your fingertips 24 hours a day – just go to <u>www.nhsbsa.nhs.uk/AskUs</u>, click on the Prescription Services link and type in your question. 'Ask Us' answers thousands of questions for dispensing contractors every month, with some of the most popular subjects including prescription prepayment certificates, exemption from prescription charges (e.g. medical exemption, maternity exemption), items which can be claimed as personally administered and using the dm+d browser.

Please remember to tell us whether 'Ask Us' answered your question using the links at the bottom of the page – this helps us to continually improve 'Ask Us' for our customers.

EPS exemption/charge paid status

Top tips:

- Make sure all patient information regarding exemption or prescription charge is set up before you send the dispense notification and claim.
- Remember, some systems may default to chargeable status.
- Contact your supplier to find out the most efficient way to deal with non-age exempt patients.



The facility to amend a claim within the reimbursement period is now available, but it does need to be developed and tested by your system supplier. One system supplier has already been accredited and others have now started to engage in the accreditation process.

The claim amend functionality allows you to 'correct' a claim that has accidently been submitted as paid instead of exempt or vice versa as long as it's within the 'reimbursement period', i.e. before the end of the fifth day of the month after it was dispensed (dispense notification sent). You can also correct your claim by adding or removing dispenser endorsements and/or amending the product or quantity in the dispenser endorsement.

Did you know...?

Part IX csv and Excel files



In response to requests from our customers, we have published .csv and Excel files of all the products listed in Part IX of the NHS England and Wales Drug Tariff.

These files represent a comprehensive list of all the medical devices that can be prescribed in primary care. They're published on the NHSBSA website

at <u>http://www.nhsbsa.nhs.uk/924.aspx</u> in line with the electronic Drug Tariff on the third last working day of each month. There's also a glossary of terms to explain the column headings.

We'd like to hear about how you use this data and how useful you find it. Please send any feedback to *nhsbsa.pixie@nhs.net*.

Claiming out of pocket expenses

If you have incurred out of pocket expenses exceeding 50p in exceptional circumstances, you can make a claim for reimbursement but the expenses must have been incurred in obtaining certain drugs, appliances or chemical reagents not required to be frequently supplied by your pharmacy or practice. You will need to give full details on the appropriate prescription form/EPS message (see Drug Tariff Part II, Clause 12).

To indicate that you have taken all reasonable steps to avoid incurring expenses, you must also endorse:

- 'XP' (EPS messages)
- 'XP' or 'OOP' (paper prescriptions)

Your system supplier will be able to help if you need any support with using the 'XP' endorsement or adding details of the claim to the message in EPS.

Out of pocket expenses can't be claimed for:

- Part IXA and IXR appliances
- Part VIIIA drugs which are category A or M
- Part VIIIB drugs
- All other specials/unlicensed medicines and imports

However, although you can't claim out of pocket expenses for Part VIIIB drugs or other specials/ unlicensed medicines and imports, fees/payments are available to cover the costs of obtaining them. For pharmacy contractors, Drug Tariff Part IIIA details the Additional Fees which may be claimed for unlicensed medicines and how to make a claim. For preparations manufactured under an MHRA specials licence or sourced under an MHRA importer's licence, you can claim a fee of £20.00 by endorsing 'SP'. For preparations prepared under the Section 10 exemption from the Medicines Act 1968, you can claim a fee of £20.00 by endorsing 'ED'.

For dispensing doctors and personally administered accounts, paragraph 23.3 of the NHS General Medical Services Statement of Fees and Allowances provides for you to claim a payment of up to £20.00 when supplying unlicensed medicines covered by the Part VIIIB arrangements. You need to endorse the prescribed item 'XP' and give details of the amount claimed.

National Community Pharmacy Flu Vaccination Service

Please remember that the national community pharmacy flu vaccination service 2015/16 ended on 29 February 2016.

This means that payment claims for flu vaccinations administered after that date can't be submitted.



Webinar sessions for dispensing contractors now available

We have recently introduced webinars (online seminars) to help answer any questions you might have on topics that can sometimes cause confusion.

The sessions are interactive with plenty of opportunities to ask questions. To fit around dispensary opening hours, sessions are available on a range of dates and at various times, and will only last around 30 minutes.

The webinars are presented by NHS Prescription Services staff and you can find details on our website at: <u>http://www.nhsbsa.nhs.uk/PrescriptionServices/5479.aspx.</u>

How do I report suspected NHS fraud?

The NHS Business Services Authority administers around £32 billion of public money a year and we're committed to ensuring that the money intended for patient care and other NHS functions is used legitimately. When fraud against the NHS occurs, it's important that it's reported so those responsible can be held to account. If you suspect NHS fraud has occurred or is occurring, you can report it to NHS Protect.

STOP NHS FRAUD www.reportnhsfraud.nhs.uk 0800 028 4060

NHS Protect leads on work to tackle crime against the NHS. They have recently updated the online fraud reporting tool at *www.reportnhsfraud.nhs.uk*. You can use this online form to report any concerns about fraud, bribery or corruption affecting the NHS. The form is designed to make it easy for you to make your report and to enable NHS Protect to get a good understanding of your concerns so appropriate action can be taken.

All information is treated confidentially and you can choose to report anonymously. Before making a referral it's important to have as much information to hand as possible - this will allow NHS Protect to assess the information and progress it accordingly. If you prefer, you can also make your report using the free phone line 0800 028 40 60 (available Monday to Friday, 8am to 5pm).



Excessive quantities in EPS Release 2

We have noticed a recent increase in EPS Release 2 prescriptions where excessive quantities have been prescribed and dispensed. On further investigation however, these quantities are not what was intended. For example:

- Salbutamol 100micrograms/dose inhaler CFC free x 40,000 dose 200 x 200 dose inhalers were prescribed and dispensed
- Glyceryl trinitrate 400micrograms/dose pump sublingual spray x 32,400 dose 180 x 180 dose GTN sprays were prescribed and dispensed
- Juvela gluten free fibre loaf sliced (Hero UK Ltd) x 160,000 gram 400 x 400 gram loaves were prescribed and dispensed

These prescriptions were highlighted to our staff as expensive items due to the extremely large quantities. We contacted the contractors, who were able to confirm that they had only dispensed one 200 dose inhaler, one 180 dose GTN spray and one 400 gram loaf.

If you receive a prescription for an excessively large quantity:

- You should contact the GP practice to alert them to the prescribed quantity so that they can ensure any 'repeats' are correctly authored.
- The GP practice may want to cancel an EPS Release 2 prescription and issue a new one with the correct quantity, in which case you should return that prescription to the Spine.
- If the practice doesn't cancel the prescription but confirms that the prescription should have been (for example) for 1 x 200 dose inhaler, you must clearly endorse/return your EPS dispense notification and claim messages with the quantity you supplied. Failure to do so and to 'default' to the prescribed quantity may result in an investigation for a fraudulent claim.

Safer Management of Controlled Drugs

The Misuse of Drugs Regulations 2001 were amended on 30 November 2015 and healthcare professionals must now use the new mandatory FP10CDF form for the requisitioning of Schedule 2 and 3 controlled drugs in the community.

More information, including a copy of the FP10CDF form to download, is available on our website at: <u>http://www.nhsbsa.nhs.uk/PrescriptionServices/1120.aspx</u>

Please also remember that all private prescriptions issued for controlled drugs in Schedule 2 and 3 of the Misuse of Drugs Regulations 2001 must be ordered on the FP10PCD prescription form designed for this purpose. Following dispensing, you must submit the original FP10PCD prescription forms to the NHS Business Services Authority for audit purposes.

The sorting requirements for privately dispensed FP10PCD prescription forms and requisitions are shown on the FP34PCD submission document, which you should download each month from: <u>http://www.nhsbsa.nhs.uk/PrescriptionServices/2473.aspx</u>

These instructions include:

- Private CD forms and CD requisitions must be sorted separately.
- Sort all FP10PCD forms and requisitions alphabetically by prescriber surname, (only applicable where there are more than 20 forms per individual prescriber).
- Do not enclose any documents not related to the submission of CD requisitions or Schedule 2 and 3 private controlled drug prescription forms.
- Dispatch to NHS Prescription Services no later than the fifth day of the month following that in which they were dispensed.
- Make sure that you submit any NHS prescriptions separately from any private CD prescriptions you have dispensed.

You must not use FP10PCD forms for submitting any private prescription items other than Schedule 2 and 3 controlled drugs.

Licensed equivalents now available



| Generic description | Licensed equivalent |
|--|--|
| Morphine sulfate 1mg/1ml solution for | Torbay Pharmaceuticals |
| injection ampoules | |
| Colecalciferol 1,000unit tablets | Stexerol-D3 1,000unit tablets - ProStrakan Ltd |
| Nitrazepam 2.5mg/5ml suspension sugar free | Nitrazepam 2.5mg/5ml suspension |
| | (Essential Pharma Ltd) |

Morphine sulfate 1mg/1ml solution for injection ampoules have recently been licensed by Torbay Pharmaceuticals and should ideally be dispensed in preference to Morphine sulfate 1mg/1ml solution for injection ampoules (Special Order). The Special Order product has now been discontinued.

Stexerol-D3 1,000unit tablets have recently been licensed by ProStrakan Ltd and they should ideally be dispensed in preference to Colecalciferol 1,000unit tablets (Special Order). The Special Order product has now been discontinued.

Instead of dispensing Nitrazepam 2.5mg/5ml suspension sugar free (Special Order) which is unlicensed, you can now obtain Nitrazepam 2.5mg/5ml suspension (Essential Pharma Ltd) which is a licensed product and is available through both AAH Pharmaceuticals Ltd and Alliance Healthcare (Distribution) Ltd.



What do I need to submit to NHS Prescription Services (at the end of the month?

Over recent months, we have identified that sometimes contractors enclose paperwork in with their monthly batch that should not be submitted. From April 2016 we will no longer be able to return these items to you, so please make sure you only include what we need when you submit your batch.

What should be included?

- ✓ Completed FP34 submission document
- ✓ Sorted FP10 paper prescriptions
- EPS Release 2 prescribing and dispensing tokens that capture charge paid and non-age exempt exemptions (as a separate bundle to FP10s)
- \checkmark RA forms (as a separate bundle to FP10s)
- ✓ Any referred-back resubmissions

What should <u>not</u> be included?

× Certificates of Conformity or Certificates of Analysis

Certificates of Conformity or Certificates of Analysis must be stamped, dated, initialed and endorsed with the invoice price (less discount) and prescriber details. A copy of the certificate should be sent to the NHS Commissioning Board (NHSCB) of the prescriber, so that the NHSCB can match expenditure to the special supplied. The pharmacy must also keep a record for five years, which is available for inspection by the Licensing Authority. Certificates must not be sent to the NHSBSA.

Vouchers or other paperwork where the pharmacy has supplied items under a locally commissioned service (for example, nicotine replacement therapy)
We are receiving an increasing number of vouchers claiming payment for the supply of nicotine replacement therapy products. These forms should have been submitted to the address on the form to claim payment, as we don't have the authority to pay for items supplied as part of locally commissioned services.

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The end of month submission process

At the end of each month you need to complete one FP34 claim form to cover both your paper and electronic prescriptions and submit it to NHS Prescription Services. On the form, indicate the total number of prescriptions and items you're submitting (i.e. number of electronic and paper prescriptions and items combined).

Although there are no separate boxes for EPS messages, you may also find it useful to note on the submission document the number of EPS claims you are including in your totals. This will also help NHS Prescription Services to determine at the scanning stage whether any discrepancy between the totals declared and actual number of paper forms scanned is due to EPS claims; remember, NHS Prescription Services do not scan any EPS tokens. This will prevent the need for telephone calls to determine the reason for any discrepancy.

Endorse and submit your paper prescriptions in the usual way and at the usual time, along with the FP34 claim form:

- Include relevant EPS tokens and Repeat Authorisation (RA) forms.
- Only submit EPS tokens for patients who are not automatically age exempt.
- Make sure you don't include Repeat Dispensing (RD) forms within the RA form bundle, as RD forms need to be scanned. If you include them in the RA bundle, which is not scanned, they may be missed and you may not receive payment for them.
- Secure your EPS tokens and RA forms separately from the main prescription bundle at the top of the exempt and chargeable groups, and tick the relevant boxes on your submission document. You don't need to sort them into prescriber order, though.
- You will have included the number of prescriptions and items for EPS Release 2 messages and RD forms in the declaration totals on your submission document so don't 'double count' and include the number of EPS tokens and/or RA forms as well. They are only used for information purposes and aren't scanned, so including these in your declaration totals will falsely inflate these figures which will in turn affect your advance payment. A proportion of the advance payment may then need to be recovered after processing is completed.

Electronic claim messages don't need to be sent all together at the end of the month, and you will need to consider when to send yours. For example, you can send them in real time, at the end of each day, in batches or weekly. They must be received by NHS Prescription Services before midnight on the fifth of the month following that of dispensing (sending the dispense notification) to secure payment for that month's submission. For example, if an item is dispensed in August and the electronic claim message is received on 5 September, payment will be made for August. However, if an item is dispensed in August but the electronic claim message is not received until 6 September, payment will be made for September.

| August | September (| Dispense notification sent on 29th August | | |
|-------------|-------------|---|---------------------|--|
| 28 29 30 31 | | Electronic claim message received before nidnight on 5th September | = August Payment | |
| August | September | Dispense notification sent on 29th August | = September Payment | |
| 28 29 30 31 | 1 2 3 4 5 | Electronic claim message received after midnight on 5th September | - September Payment | |
| August | September | Dispense notification sent on 1st September | = September Payment | |
| 28 29 30 31 | | Electronic claim message received before nidnight on 5th September | | |

Items dispensed at the beginning of a month for which the electronic claim message is sent on or before the fifth of that same month will not result in earlier payment. For example, if an item is dispensed on 1 September the dispense notification must also be sent on 1 September. However, even if the corresponding electronic claim message is sent to NHS Prescription Services on or before 5 September, payment will be made for September and not for August. Electronic claim messages must be sent no later than 180 days after the dispense notification. Ask your system supplier how your system alerts you to any unclaimed prescriptions that are nearing the end of this period.

Submitting claims for payment securely

When making claims for payments for providing pharmaceutical services, the Drug Tariff outlines that each month you need to despatch your prescription forms to NHS Prescription Services with the appropriate FP34 claim form. The prescriptions must be sorted as appropriate and you must send them no later than the fifth day of the month following that in which the supply was made. Pharmacy contractors in England who are enrolled in the Pharmacy Earlier Payment Scheme need to secure delivery to NHS Prescription Services by the third or eighth day of the month to be able to access funds early.

You can choose which delivery service you use, but the forms must be sent to us in a way that enables tracking and tracing at all times. The integrity of the highly sensitive, personal and confidential data and information must be secure.

When should an EPS Release 2 claim be sent?

When a prescription has been dispensed, you must submit your claim by the fifth day of the following month. This is the same for both paper FP10 prescriptions and EPS Release 2 prescriptions.

- For EPS Release 2 prescriptions where you have an owing, you can't submit your claim until it's complete. Remember to regularly monitor your owings, because after 180 days the Spine will remove the prescription and you'll be unable to claim.
- Your system supplier has developed a report that allows you to check for prescriptions that are nearing the 180 day expiry. If you don't know how to access this functionality, please contact your system supplier.

Useful links on our website

NHS England and Wales Drug Tariff <u>www.nhsbsa.nhs.uk/prescriptions/drugtariff</u>

Information about sending in your reimbursement and remuneration claims <u>http://www.nhsbsa.nhs.uk/2473.aspx</u>

NHS Prescription Services open days <u>www.nhsbsa.nhs.uk/prescriptions/opendays</u>



More information

For more information you can access our online knowledge base <u>'Ask Us'</u> at



or contact us at nhsbsa.prescriptionservices@nhsbsa.nhs.uk

You can also call us on 0300 330 1349. Our opening hours are 8am to 6pm, Monday to Friday