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impact

Welcome to a **special edition** of Impact detailing the new PPD systems used to process prescriptions.

The PPD have introduced technology to manage the continuing growth in prescription volume to replace systems coming to the end of life and to meet the requirements for the Electronic Prescription Service.

In this edition we've put together what we hope will be some useful information covering things like how your batch is processed by the new system, how we identify switched items and how we send back items we need more information on.

The PPD have introduced high speed scanners and intelligent character recognition software to capture prescriber and product information. Data is then processed through a 'rules engine' which applies and validates reimbursement rules as set out in the Drug Tariff. The process is not totally automated and the majority of items are still handled by the large teams in the three processing centres. Anything that either the ICR can't capture or that needs further checking, such as broken bulk items or patient exemption checking gets sent to an operator who will manually complete the process. The flow chart on page 2 will give you an idea of how your batch gets processed.

But before your batch gets into the new system you need to send it to us.

In the April 2008 edition of impact we published information on how to prepare your prescriptions for submission to us. A copy is on our website: http://www.ppa.org.uk/ppa/download_pdf.htm#impact

In order to ensure accurate payment we need a little bit of extra sorting, namely:

- **Any prescriptions where broken bulk is claimed.**
- **Any prescriptions where the dispensed quantity differs from the nearest pack size or sub-pack for items packaged in calendar packs.**

This is because these items cannot be processed by our rules engine and they have to be processed by an operator. Sorting them separately ensures that they are processed correctly and that you receive the correct payment.

Broken Bulk claims are readily identifiable but if you are unsure as to whether a product is a calendar pack, there are a number of resources available to help where you are not sure:

- a) NHS dictionary of medicines and devices (dm+d) www.dmd.nhs.uk and access the dm+d browser. Search for the product via AMP. From the results select the supplier you are dispensing and 'view' the AMPP information for the product pack; calendar pack status can be found under reimbursement information.
- b) Drug Tariff Part VIII
For commonly prescribed generic products the calendar pack is indicated with a ♦ symbol.
- c) Your pharmacy IT system may provide this information on screen during the dispensing process.

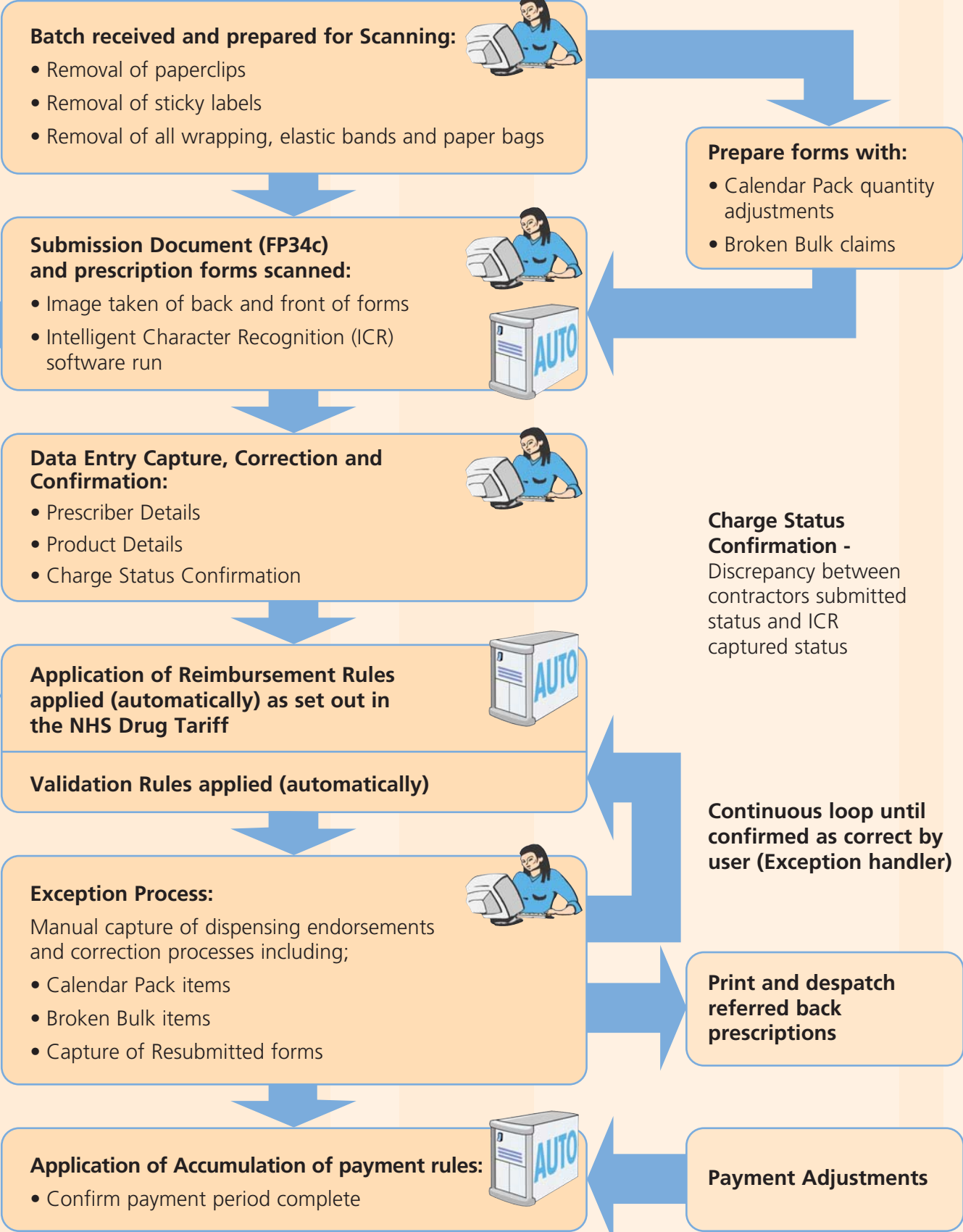
Feedback from contractors suggests that it may be easier to sort these prescriptions at the point of dispensing rather than at the end of month.

Don't forget to include details for out of pocket expense claims on the FP34C (claim for payment) submission document. These totals are used to determine the payment for out of pocket expenses through the new system.

We send the FP34C (claim for payment) submission document to pharmacy contractors each month. The FP34C has a bar-coded contractor's name and address label; it is very important that you send this in with your prescription form bundle. If this form is not submitted then this may delay the processing of your account and may affect the advance payment which is based on the information on the submission document.

For any queries regarding preparing and submitting your pharmacy account, please feel free to contact our prescription processing helpdesk on 0845 6101171.

The route of a contractor's submission



Accuracy improvement activities

The PPD is committed to improving the accuracy of processing and has commissioned an Accuracy Improvement group in February 2008 to establish opportunities for improvement and to deliver effective solutions.

The net cash variance measures the accuracy of the total payment made to pharmacy contractors. The accuracy target achieved by the PPD is that the total payment is between 99.8% and 100.2% of the 'true' payment based on a statistical analysis.

Activities are focussing on the following areas:

- **Review of the intelligent character recognition application**

Ongoing review of ICR is undertaken to ensure accuracy levels are continually improved. The application is scheduled for a further release to be deployed for May 2008 dispensed prescriptions.

- **System updates**

Relevant changes to product look-up information have been fast tracked to help operators process as accurately as possible by providing them with more information where an error has previously occurred.

- **Staff training**

Significant resource is being used to provide additional workshops, training and awareness of the specific issues to improve the accuracy of data capture.

- **Ongoing checking process**

A statistical sample of batches is checked routinely. Checks are carried out on individual operators and immediate feedback is provided so that issues can be resolved as quickly as possible.

- **Profiling contractors**

Specialist statistical support from Newcastle University is being provided to create a model to investigate trends in payments to proactively identify potential issues in contractor payments.

- **Customer service team**

On 14th April 2008 a specific team was set up to manage all customer complaints at a central point to improve communication with contractors and other stakeholders and resolve issues more quickly.

Patient exemption declaration checking

As part of preparing your batch to send to us we ask you to sort into two separate bundles exempt and chargeable forms. In the new PPD system the intelligent character recognition software identifies when a prescription form may have been submitted in the incorrect bundle. The system sends every identified form to an operator who manually verifies whether the prescription should be moved between the 'exempt' and 'patient charge paid' groups.

Detailed information on the number of prescriptions that have been transferred from 'exempt' to 'patient charge paid' status (and vice versa) in a given month can be found on page 2 or 3 of the Schedule of Payments.

The NHS Drug Tariff states that provided that the appropriate exemption declaration is received, a charge is not payable to the pharmacist, appliance contractor or dispensing doctor for drugs or appliances, including elastic hosiery, supplied.

To ensure correct payment, pharmacy staff should ensure that the reverse of each prescription form is completed correctly and in full, except where:

- *the patient is age exempt (when the age or date of birth is computer generated on the front of the prescription form),*
or
- *has just been released from prison (with HMP printed on the prescription form).*

If the declaration has not been completed when necessary, then the prescription form will be treated as 'patient charge paid' and patient charges maybe deducted for that prescription during the payment process.

Investigation has shown that in many cases, prescription forms have been correctly switched from the 'exempt' to 'patient charge paid' group because patients had not completed the exemption declaration, where required, on the reverse of prescription forms.

Pharmacy contractors should ensure that pharmacy staff closely follow these instructions. Particular attention should be paid to prescriptions where the patient is not age exempt and the age/date of birth should be computer generated on the front of the form.

Referred back items have been reduced by the new system

Prescription items are now processed using scanned images of the prescription form, and if we need clarification on an item it is this image, rather than the actual prescription form, that we send back to you. If more than one item on a form has been referred back then you will have a copy of the form for each item.

This means that with the new system only those prescription items requiring clarification are returned unpaid. This is a positive change and benefits the contractor as no delay to payments is experienced for those items not requiring further clarification.

“We only withhold payment for an item that’s queried, not for the whole form.”

Contractors should annotate the additional information requested in the box at the foot of the form and submit this back to the NHSBSA PPD along with the normal monthly submission of prescriptions.

Pharmacy contractors should note that changes to the process of dispatching returns from NHSBSA PPD means referred back prescriptions may be received at a different time in the month than previously expected.

Many prescriptions referred back are for generic products that are not listed in Drug Tariff Part VIII; these require an endorsement of brand or supplier to enable payment to be made. Where these products are modified release it would further help us if the endorsement was for the brand name and supplier. Sometimes these products are made available through arrangements with more than one supplier so an endorsement of brand only may not be sufficient e.g. Dicloflex (marketed by Dexcel-Pharma, Almus, Kent and Teva).

“We send you your returned prescription items in blue polythene A4 size envelopes with the NHS Business Services Authority logo on the front.”

Items may be referred back because the prescriber has used product descriptions that are non standard or synonymous or where no pharmaceutical form is stated in the original order. We are working closely with GP system suppliers to standardise the product descriptions in line with those in the NHS Dictionary of Medicines and Devices (dm+d) and through further staff awareness training to help prevent these items being sent back to you.

For any queries regarding your referred back prescriptions, please feel free to contact our prescription processing helpdesk on 0845 6101171.

Contact details for the NHSBSA

For general enquires relating to the NHSBSA, contact the Head Office:

Bridge House, 152 Pilgrim Street, Newcastle upon Tyne, NE1 6SN

0191 232 5371

For all queries relating to the NHS Low Income Scheme, contact Patient Services:

0845 850 1166

For general queries, prior to applying for Prescription Pre-payment, Medical and Maternity Exemption Certificates:

0845 850 0030

For specific queries, after applying for/receiving Prescription Pre-payment, Medical and Maternity Certificates:

0845 601 8076

For queries about NHS Tax Credit Exemption Certificate:

0845 609 9299

For enquiries relating to Pharmacy Processing, Prescription Searches, Personal Administration, Dispensing Doctors and Contractor Payment Information contact the new Prescription Pricing Help Desk on:

0845 610 1171

This number should be used with immediate effect and replaces any existing numbers you currently use.

For enquiries relating to applications for the European Health Insurance Card (EHIC):

0845 605 0707

0191 203 5555 (from outside UK)

Ehicenquiries@ppa.nhs.uk

Enquiries on all NHSBSA Electronic Systems (EPACT, ePACT.net and Prescribing Toolkit) and on the availability and content of reports produced by the NHSBSA:

0191 203 5050

help@ppa.nhs.uk