



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

Feidhmeannacht na Seirbhíse Sláinte  
Seirbhís Aisíoca Príomhchúraim  
Bealach amach 5 an M50  
An Bóthar Thuaidh  
Fionnghlas  
Baile Átha Cliath 11

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**Circular No. 002/10**

**22<sup>nd</sup> January 2010**

Dear Pharmacist,

I would like to update you on the reorganisation within the Health Service Executive (HSE), which will revise the way pharmacists submit claims for reimbursement. The HSE is progressing within a short timeframe the centralisation of all payments to contractors including pharmacy contractors, and this process has commenced.

**Arrangements for the supply of Drugs by Local Health Offices (LHOs)  
(‘Hardship’ Arrangements).**

As the HSE progresses this reorganisation, discretionary arrangements approved by LHOs will no longer be reimbursed at local level. Reimbursement for all services provided by pharmacists to eligible Medical Cardholders will be in line with the Health Professionals (Reduction of Payments to Community Pharmacy Contractors) Regulations 2009 (SI No. 246 of 2009), a copy of which was sent to each Community Pharmacist on 6<sup>th</sup> July 2009. Reimbursement will be through the PCRS on the basis of ingredient cost and a dispensing fee. Where pharmacists have submitted (‘Hardship’) claims to LHOs, these claims are being transmitted to the PCRS with payments being made by the PCRS since October 2009. I am advised by Local Health Managers that these arrangements are well in hand and all areas are now passing claims to PCRS with payments being made as normal in the third week of each month. These claims will be reported in detail to pharmacists directly from PCRS commencing January 2010.

Pharmacists should continue to submit claims previously approved by the LHO under the ‘Hardship’ arrangements to their LHO until further notice. With effect from January 2010 only claims submitted as set out below will be accepted for reimbursement:

- a) Pharmacy number
- b) Patient Forename, Surname
- c) Medical Card Number, Patient Code Letter
- d) Product Description
- e) Quantity dispensed
- f) Date dispensed
- g) Ingredient Cost
- h) Copy of Invoice of Unlicensed Medicines
- i) VAT
- j) Dispensing Fee

The HSE also intends to streamline internal processes so that pharmacists are enabled to deal with prescriptions for Unlicensed Medicines more efficiently by making claims directly to the PCRS through the online channels available and used by Pharmacists for Scheme claims. A list of the Unlicensed Medicines which satisfy the Department of Health & Children’s protocol for dispensing of Unlicensed Medicines will be published on the HSE website on a monthly basis from February 2010. A copy of the Unlicensed Medicines Protocol is attached as Appendix 1, for your information.

## **Drugs Payment (DP) Scheme Refund Claims**

Claims for refund under the Drugs Payment Scheme continue to be presented by clients to Local Health Offices e.g. where a client has used two or more pharmacies in the same month. For all transactions from 1<sup>st</sup> July 2009, client refunds are being calculated on the basis of the drug prices set by the new Health Regulations (S.I. 246 of 2009) referred to above. Pharmacy contractors should ensure that the drug prices quoted on Unified Claim Forms, which are produced for clients registered under the DP Scheme, are in line with the new Regulations i.e. drug prices should reflect the reduced ingredient cost, the agreed retail mark-up where relevant and the correct fee. A copy of these rates is attached as Appendix 2, for your information.

Where clients hold receipts, which they have received from pharmacists, which do not state the drug price determined by the Minister for Health & Children under the regulations, clients may seek to recover any shortfall arising from the pharmacy. This is a matter between the pharmacist and the client.

Clients will be encouraged to present their DPS card when giving in their prescriptions to their local pharmacist to ensure that they can avail of the reduced drug prices determined by the Minister for Health & Children in July 2009.

## **HSE (Unified Claim Form) Receipts**

Pharmacy Contractors are specifically requested to ensure that the prices quoted on Unified Claim Forms are in line with the new Regulations i.e. reflecting the reduced drug costs and the agreed retail mark-up, where relevant, and the correct fee.

Thank you for your co-operation in these matters,

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Patrick Burke', with a long horizontal stroke extending to the right.

**Patrick Burke**  
**HSE Primary Care Reimbursement Service**

## Appendix 1

### Supply of Unauthorised Medicinal Products under the Scheme

It is recognised that in certain exceptional circumstances the supply of unauthorised medicinal products will be necessary under the Scheme. The circumstances in which payment for such medicinal products will be made are as follows:

- (a) The medicinal product concerned should be an 'allopathic' medicinal product which has been industrially produced and which is appropriate for use in the community;
- (b) The medicinal product concerned should be such that no authorised medicinal product of essential similarity is available for prescription and supply under the Community Drug Scheme concerned;
- (c) The prescription concerned should be written or initiated by a medical consultant who is aware of the unauthorised status of the medicinal product concerned and who has informed the patient of the situation;
- (d) The dispensing pharmacist has also informed the patient of the unauthorised status of the medicinal product prescribed and that its quality, safety and efficacy has not been established in this country;
- (e) The medicinal product concerned is not being advertised or promoted in the State either as such or in any trade catalogue or price list in circulation in the State;
- (f) The application made for reimbursement is accompanied by a copy of the invoice relating to the supply of the medicinal product to the pharmacist concerned and, if necessary, is supported by an explanation of the special circumstances which required the supply of the unauthorised medicinal product;
- (g) The medicinal product concerned has been written on a prescription form as the only item on the form;
- (h) The cost of the medicinal product concerned should be reasonable in the context of medicinal products ordinarily supplied and used in the community and be of a category which, if it were authorised, it would be eligible for reimbursement in the Community Drug Scheme concerned;
- (i) The original prescription or a copy thereof, together with appropriate records of supply, are being retained in the pharmacy and kept available for inspection as required.

## Appendix 2

### **APPLICATION OF MARKUP TO ITEMS REIMBURSED BY THE HSE UNDER THE DRUGS SCHEMES.**

<b>Category</b>	<b>Wholesale Markup</b>	<b>Retail Markup</b>
<b><u>GMS (Medical card)</u></b>		
GMS Reimbursable List of Medicines	10%	0%
Fridge Items	17.66%	0%
Controlled Drugs	17.66%	0%
Unlicensed Medicines	17.66%	0%
Supplementary Medicines	10%	0%
Non Drug Items	17.66%	0%
<b><u>Drugs Payment Scheme</u></b>		
GMS Reimbursable List of Medicines	10%	20%
Fridge Items	17.66%	20%
Controlled Drugs	17.66%	20%
Unlicensed Medicines	17.66%	20%
Supplementary Medicines	10%	20%
Non Drug Items (excluding Dressings and Inco)	17.66%	50%
Dressings and Inco	17.66%	20%
<b><u>LTI (where applicable) +HAA</u></b>		
GMS Reimbursable List of Medicines	10%	20%
Fridge Items	17.66%	20%
Controlled Drugs	17.66%	20%
Unlicensed Medicines	17.66%	20%
Supplementary Medicines	10%	20%
Non Drug Items	17.66%	50%

**There is no change in fees or arrangements for Methadone supply or High Tech Medicines**

1<sup>st</sup> July 2009