



Circular No 025/19

15<sup>th</sup> July 2019

**Re: Community Pharmacy Contractor Agreement – Changes to Claiming Arrangements**

Dear Pharmacist

I refer to your Community Pharmacy Contractor Agreement (Contract) with the HSE for the provision of services under the GMS and Community Drug Schemes and to my correspondence dated 5<sup>th</sup> May, 2016 and 5<sup>th</sup> June, 2018.

As advised the HSE is aware that pharmacies have raised and submitted claims for reimbursement when products have been entered in their pharmacy system as “owings” and never supplied nor intended for supply to patients. The HSE does not have visibility of claims submitted in such circumstances.

Following pharmacy inspections the HSE has identified that specific pharmacies:

- i. Continue to submit claims for reimbursement in circumstances where an item has neither been supplied nor intended for supply
- ii. Are preparing items for collection, submitting claims for these items, and when not collected in a short timeframe by patients are re-entering the products into pharmacy stock
- iii. Are deleting Owings which have been submitted as claims from their owings files.

In accordance with the Health Act 2004 the HSE has a statutory obligation to secure the most beneficial, effective and efficient use of the resources of the State. Paying pharmacists for medicines/products which have not been supplied to patients clearly violates this obligation. Despite direct correspondence with contractors and discussions since 2016 with the IPU, the HSE PCRS does not have visibility of claims submitted where products have not actually been supplied.

In the absence of complete transparency of owings claims, from 1<sup>st</sup> August, 2019 for a claim to be valid each item claimed must be actually supplied to the patient in totality. Dispensing or non dispensing fees should not be claimed where the patient advises that they do not require the item prescribed, or where they will collect the item at a later date. A dispensing fee is only applicable where the item has been supplied; and a non-dispensing fee is only applicable where the pharmacist has utilised their professional judgement and deemed that the provision of an item is not in the best interest of the patient.

For the avoidance of doubt from 1<sup>st</sup> August, 2019:

- i. Medicines/products awaiting collection and owed to patients should not be presented as a claim to PCRS until they have been actually supplied to the patient or the patient's representative
- ii. Claims for medicines/products should be in accordance with Contract (Clause 1 (1)) and claims only made **following** supply of the medicine/product to the patient or the patient's representative.

The claiming for products not actually supplied to the patient (or the patient's representative) are not valid claims. In circumstances where potentially fraudulent claims are identified, the HSE will pursue under contract and in addition will utilise all other recourse available to it.

I trust you will appreciate the gravity of any invalid claims being submitted in future.

Yours faithfully

Anne Marie Hoey  
Primary Care Reimbursement Service