

Pharmacy Claims Electronic Submission Arrangements, January 2009

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Claim Submission Process for 2nd Generation Pharmacies

The turnaround times set out are intended to be the minimum standard that can be expected with effect from December 2008. Careful attention should be paid to references to deadlines listed below. Unless "working day" is specified then the reference is the date.

Summary

- **Early Pay Requires Successful Submission by Midnight on 3rd Working Day**
- **Electronic Normal Pay Requires Successful Submission by C.O.B. 7th Day**
- **Manual Submission Only Thereafter**

(1): Submission of Electronic Claim Files

Files must be received in PCRS no later than midnight on the 3rd working day of the month to qualify for early payment. Working days are defined as Monday to Friday, excluding bank/public holidays. As you submit your file, your software should confirm immediately that your file has been received by PCRS. For the fastest processing turnaround, avoid peak time queues during working hours, e.g. 10am etc.

N.B. In order to minimise the impact of unforeseen technical difficulties, either with telephone connections or technical problems with files or transmission issues, Pharmacists are urged to submit their initial claim file on the **first** day of the month. Where a pharmacist leaves the transmission of their file until the last available day they run the risk of unforeseen transmission issues that may result in their file not being received in PCRS on time. PCRS take no responsibility for such risk taking and cannot accept files after the deadline for receipt has passed. In such an event the claims will not be processed in the early pay cycle. The following will occur:

- Claims submitted electronically and received at PCRS after the 3rd working day and before the 7th day of month will be processed electronically and paid in the normal pay cycle, i.e. the following month.
- Claims received electronically after the 7th day of the month will not be processed electronically, i.e. the Pharmacist will be required to submit their coded GMS copies for manual processing.

Technical issues outside of the control of PCRS are a matter for either the Software vendor or the Pharmacist. PCRS cannot be held responsible for any technical issues that arise outside of our direct control. Pharmacy businesses should build a contingency into their submission schedule to deal with such unforeseeable technical problems that may arise from time to time. In addition, normal financial contingency arrangements are a matter for the pharmacist.

Where there is a central technical issue at PCRS, then an SMS notification (to registered pharmacies) direct to your phone will inform you of this as soon as possible. If you are registered and have not received such a notification then you should operate on the basis that there is a technical issue outside of the control of PCRS.

(2): Download Exceptions

Exception files confirm details about the quality of the contents of the file you submitted e.g. if your file could not be loaded and processed this will ONLY be communicated in this file.

Exception files are available for download no later than 4 working days from receipt and in most cases are available within 24 hours.

(3): Re-Submit Claims

There is no limit on the number of download and re-submission cycles. However, the final submission must be received in PCRS no later than midnight on the 8th working day of the month.

(4): Download Final Exceptions

The final exception file contains “the final result” of paid, unpaid claims and difference in items etc. Pharmacy payments for electronic submitters who qualify for early pay are paid every month on the 14th working day. Final exception files are available to download no later than the 18th working day.

(5): Duplicate File Submission

If a file is submitted with two months claims, one of which has already been paid, the file will be deemed invalid and the pharmacy will be required to code the GMS claims manually.

(6): Change of Vendor

Where a pharmacy changes vendor mid month e.g. **15th January**, on agreement with PCRS, we will accept claims from the 16th January to 28th February for payment along with the February claims submitted for payment in **March**, i.e. the month **after** the normal submission month. Supporting paperwork must match separate submissions.

The last file produced by the old software in this case, e.g. 1st to 14th January must be submitted at the end of January in the normal way.

You should select the changeover date carefully with your vendor to minimise the impact on cash flow.

(7): Software Upgrade

Where a pharmacy upgrades from 1st Gen to 2nd Gen mid month e.g. **15th January**, on agreement with PCRS, we will accept claims from the 16th January to 28th February for payment along with the February claims submitted for payment in **March**, i.e. the month **after** the normal submission month. Supporting paperwork must match separate submissions.

The last file produced by the old software in this case, e.g. 1st to 14th January must be submitted at the end of January in the normal way.

Where a pharmacist switches from 1st Generation to 2nd Generation and a problem occurs with the first transmission, once the pharmacist has notified the system vendor of the problem, on agreement, PCRS will afford the pharmacy system vendor an opportunity to correct the error on the 4th working day of the month. To avoid any confusion the file submission in this case must be complete no later than **midnight on the 4th working day** of the month to qualify for early payment.

You should select the changeover date carefully with your vendor to minimise the impact on cash flow.

(8): Software Downgrade

A pharmacy which has switched to newer technology, (e.g. 2nd Generation electronic submissions) cannot switch back to older technology unless by prior arrangement with PCRS. Such a switch can result in a missed / delayed payment to the pharmacy for which PCRS cannot be responsible.

(9): Change of Contract

Where a pharmacy changes contract mid month PCRS will accept one file per month per contract agreement. The PCRS system will validate claim dates and only pay where the contract is valid.

(10): Supporting Claim Paperwork

Supporting claims paperwork **must** be received in PCRS by the 5th day of the month for the pharmacy to be considered for early pay, and by the 7th day of the month for the pharmacy to be considered for the normal pay cycle.

(11): Failure to Submit Supporting Claim Paperwork

Where a pharmacy fails to submit supporting claim paperwork on time for either pay cycle in a given month, i.e. before the 5th working day of the month (early pay) or 7th working day of the month (normal pay), the claim processing in respect of the relevant months claims can only be manual, i.e. A full submission of two months claims will not be accepted electronically. Such files will be deemed invalid.

(12): Error Notification

Where a pharmacy submits an incomplete file (e.g. all / most claims for the DP or GMS scheme missing or damaged) and notifies PCRS within the initial three working days PCRS will work with the pharmacy by deleting the claim submission to enable another electronic submission. In such an event the pharmacist should telephone 1800 35 37 39 during office hours. After office hours, please leave a message on the answering machine with all of the appropriate details, including the pharmacy contract number. In such an event the deadline for early pay is still midnight on the 3rd working day.

Where a pharmacy submits an incomplete file and notifies PCRS after the 7th day the file will be deemed invalid and the pharmacy will be required to submit coded GMS copies.

(13) Duplicate Claiming

It has occurred that pharmacists migrating to electronic claiming have submitted batches of claims electronically that have already been submitted and paid by manual processing. PCRS have controls in place to identify these, and are obliged to recoup any resulting overpayment from future payments as a matter of urgency and cannot commit to staged recoupment in such cases. Pharmacists must only submit current claims, with the exception of previously rejected claims returned on their exception files.

(14) New installations (after 31st March 2008)

With effect from 1st April 2008 all new installations must comply with the agreed standard (2nd Generation or later) in order to be accepted for electronic claims processing i.e. where a pharmacy is moving to electronic claiming for the first time.

N.B. We would like to point out that while we address technical problems in this leaflet, it is fair to say that they occur very rarely. The vast majority of electronic claiming pharmacists transmit their files early and without a problem every month. We highlight these issues because, while rare, the impact on cash flow etc. for a pharmacist should they experience a technical problem outside of PCRS's control, can be significant.

Notes for 1st Generation Pharmacies

As you submit your file, your software should confirm immediately that your file has been submitted successfully to Helix Health. The deadlines and other rules for early pay and normal pay cycles are as specified for 2nd generation.

Unlike 2nd generation technology, there is no notification to the pharmacy regarding successful receipt of these files for processing or payment.

Unlike 2nd generation there is no notification regarding the quality of the contents of the file for processing or payment.

Notification regarding payment in respect of valid files is detailed in the itemised listing dispatched after the payment has been issued.

Notes for 3rd Generation Pharmacies

When this technology is available from your vendor then the submission process will be enhanced in many ways including,

- (1) Prevention of delayed payment with Multiple File submission, e.g. daily / weekly files
- (2) Simplification by removal of file types, all files contain claims and corrections
- (3) Reduction to a single monthly deadline at which point all claims received will be processed
- (4) Automatic scheduled submission of claims and retrieval of exceptions
- (5) “Real Time” feedback on quality of the file contents
- (6) Backup claim file submission mechanism
- (7) Integrated file status information, “received”, “loaded” etc.
- (8) Customisable event driven notifications by email
- (9) Online contacts and customisations maintenance

Requests for delivery dates for the technology to include these features should be made to pharmacy software vendors.