



Community
Pharmacy
Agreement

CLINICAL INTERVENTIONS

Effective from 1 July 2017

PROGRAM RULES



Australian Government
Department of Health



The Pharmacy
Guild of Australia

TABLE OF CONTENTS

1. INTRODUCTION	3
2. ELIGIBILITY CRITERIA	3
3. PHARMACY ACCREDITATION	3
4. AUDIT REQUIREMENTS	3
5. REGISTRATION	3
6. PAYMENTS	4
7. THE CLINICAL INTERVENTIONS PROCESS	4
8. CLAIM AND PAYMENT CRITERIA	4
9. CHANGE IN APPROVED CI SERVICE PROVIDER CIRCUMSTANCES	5
10. RESOURCES	5
11. CONTACT	5

PROGRAM RULES

This document outlines the Program Rules governing the Clinical Interventions (CI) Program. This document must be read in conjunction with Sixth Community Pharmacy Agreement (6CPA) General Terms and Conditions and the “Standard and guidelines for pharmacists performing clinical interventions” by the PSA (PSA Standards). Definitions in the 6CPA General Terms and Conditions apply in these Program Rules.

1. INTRODUCTION

The CI Program is funded under the Sixth Community Pharmacy Agreement.

Under the CI Program, incentive payments are made to identify, resolve and document drug-related issues that are identified within community pharmacy. The Program seeks to improve patient health outcomes and improve quality use of medicines.

2. ELIGIBILITY CRITERIA

To be eligible to become an Approved CI Service Provider and participate in the CI Program, a pharmacy must:

- a) be approved to dispense pharmaceutical benefits as part of the Pharmaceutical Benefits Scheme (PBS) defined in Section 90 of the National Health Act 1953 (Cth) (Section 90 pharmacy);
- b) be accredited by an approved Pharmacy Accreditation Program or be in the process of attaining Accreditation within six (6) months of lodging the application to become registered to participate in the Program;
- c) agree to publicly display and comply with the Community Pharmacy Service Charter and Customer Service Statement. A sample Customer Service Statement and a template are available online at www.6cpa.com.au; and
- d) register via the 6CPA Registration and Claiming Portal available at www.6cpa.com.au and continue to meet the above Eligibility Criteria while participating in the CI Program.

The Approved CI Service Provider must notify the 6CPA Administrator immediately when it becomes aware of any circumstance, event or fact which may affect the Approved CI Service Provider’s eligibility to participate in the CI Program.

Failure to maintain compliance with any or all of the above Eligibility Criteria may result in the Approved CI Service Provider being ineligible to participate in the CI Program.

3. PHARMACY ACCREDITATION

Approved CI Service Providers registered for the CI Program must have a current accreditation status and meet the accreditation requirements of an approved Pharmacy Accreditation Program for the CI Program in order to be eligible to receive ongoing incentive payments.

If an Approved CI Service Provider’s accreditation status lapses during the claiming period, the Community Pharmacy will not be eligible to participate in the CI Program or receive incentive payments until reaccreditation occurs.

4. AUDIT REQUIREMENTS

The Approved CI Service Provider must retain records for seven years from the date of submitting a Claim to substantiate the data contained in the Claim.

Eligible Community Pharmacies participating in the CI Program will be subject to random audits by the Australian Government to ensure the Services are provided in accordance with 6CPA General Terms and Conditions and these Program Rules. Eligible Community Pharmacies that do not provide Services in accordance with the 6CPA General Terms and Conditions and these Program Rules may no longer be able to participate in the CI Program or be eligible to receive CI Program payments and repayment may be required.

5. REGISTRATION

Approved CI Service Provider Registration is available via the 6CPA Registration and Claiming Portal available at www.6cpa.com.au.

An Approved CI Service Provider will not be registered until the Approved CI Service Provider receives email notification from the 6CPA Registration and Claiming Portal confirming the registration has been successful.

It is the responsibility of the owner/pharmacist manager of the Approved CI Service Provider to ensure that the pharmacy’s registration is up to date at all times including pharmacy’s current Section 90 approval number.

If an Approved CI Service Provider’s registration is not up to date as outlined above, payments may be delayed or rejected.

PROGRAM RULES

6. PAYMENTS

The Approved CI Service Provider will be eligible for payment following written notification confirming successful registration and subject to meeting 6CPA General Terms and Conditions.

All claims for payment must be supported with the required information. Requests for clarification and/or further substantiation must be met within the requested timeframe. Failure to provide a satisfactory response may lead to rejection of the claim for payment.

If an Approved CI Service Provider fails to comply with the 6CPA General Terms and Conditions and/or these Program Rules, clause 5 of the 6CPA General Terms and Conditions will apply and the 6CPA Administrator and the Australian Government may at their discretion pursue debt recovery.

Approved CI Service Providers may not apply additional consumer charges for Clinical Interventions.

7. THE CLINICAL INTERVENTIONS PROCESS

A CI is a professional activity undertaken by a Registered Pharmacist directed towards improving quality use of medicines and resulting in a recommendation for a change in a patient's medication therapy, means of administration or medication-taking behaviour.

It does not include generic medicine substitution, routine prescription-related counselling, provision of emergency supply medicine under State or Territory law, CMI provision or professional activities directed towards improving QUM undertaken during HMR, RMMR, MedsCheck or Diabetes MedsCheck services.

It is the responsibility of the owner/manager of each Approved CI Service Provider to ensure all pharmacists, performing and recording CIs on behalf of an Approved CI Service Provider, abide by the definition of a CI as detailed in the PSA Standards.

A CI must relate to a medicine and must be recorded using the D.O.C.U.M.E.N.T. classification system.

8. CLAIM AND PAYMENT CRITERIA

An Approved CI Service Provider is entitled to claim incentive payments four times per year for performing and recording Clinical Interventions using the D.O.C.U.M.E.N.T. classification system in accordance with the PSA Standards. Incentive payments will not be made for interventions delivered under the M.E.N. components of the classification system.

The Approved CI Service Provider must record the following data for each Clinical Intervention delivered under the D.O.C.U.T. components of the classification system.

- a) date
- b) Registered Pharmacist
- c) patient identifier (does not need to be patient name)
- d) patient age range (not specific age)
- e) patient gender
- f) medicines involved
- g) clinical notes detailing the intervention and any relevant medical history
- h) classification of the intervention
- i) recommendations/follow-up actions
- j) any communications with other health care professionals or the consumer/agent, and
- k) any other relevant information.

Note: Only de-identified information is required for audit purposes.

Either an electronic or paper based system may be used to record CIs. A paper based template is available in the PSA Standard available at www.6cpa.com.au.

Eligible Community Pharmacies must provide the total number of CIs recorded under D.O.C.U.T. on their Claim for the eligible Claiming Period. This number is calculated by:

- a) adding together the number of CIs delivered in the pharmacy under the D.O.C.U.T. components of the D.O.C.U.M.E.N.T. classification system, during each eligible Claiming Period; and
- b) it should be noted that when using the D.O.C.U.M.E.N.T. classification system, CIs under the M.E.N. components cannot be claimed and should not be included on the Claim.

Approved CI Service Providers must submit claims via the 6CPA Registration and Claiming Portal available at www.6cpa.com.au

PROGRAM RULES

Claims must be submitted in accordance with the following time frames:

Eligible Claiming Periods	Claim Due Date
1 January to 31 March	1-14 April
1 April to 30 June	1-14 July
1 July to 30 September	1-14 October
1 October to 31 December	1-14 January

Note: Claims received by the 6CPA Administrator after the Claim Due Dates for the corresponding eligible Claiming Periods in the table above will be rejected.

Amendments to a submitted Claim can be requested by contacting the 6CPA Administrator on 1300 555 262 or email support@6cpa.com.au. Amendments to a Claim will not be accepted after the Claim Due Date.

Under section 137.1 of the Criminal Code Act 1995, giving false and misleading information to the Commonwealth is a serious offence.

The 6CPA Administrator and the Australian Government will jointly assess the payment amount the Approved CI Service Provider is entitled to receive based on the number of CI services and pharmacy size (e.g. prescription volume). The Approved CI Service Provider claimable prescription volume will be sourced from the Department of Human Services.

CI claims will be capped at the rate of 3.5% of prescription volume.

The claimable PBS prescriptions dispensed during the eligible Claiming Period will be counted jointly by the 6CPA Administrator and the Australian Government across multiple Section 90 approval numbers associated with the claiming Approved CI Service Provider for the corresponding eligible Claiming Period.

If an Approved CI Service Provider meets the Eligibility Criteria outlined in clause 3 for only a portion of a full claiming period, then the Approved CI Service Provider can submit a single Claim showing the number of CIs delivered from the first day of the following month after eligibility has been achieved.

Payment for this Program is retrospective and the Approved CI Service Provider must retain evidence for seven years as specified in clause 5 to substantiate that the pharmacy met the Program requirements and are accredited under a Pharmacy Accreditation Program when providing a CI service.

9. CHANGE IN APPROVED CI SERVICE PROVIDER CIRCUMSTANCES

Eligible Community Pharmacies must notify the 6CPA Administrator within fourteen days of the following changes:

- a) change of ownership; or
- b) change of Section 90 approval number.

If the 6CPA Administrator is not notified of the changes above within fourteen days then the following may apply:

- a) Duplicate or multiple claims submitted by Eligible Community Pharmacies for the same Eligible Claiming Period will be rejected.
- b) A delay in payment may occur.

If an Approved CI Service Provider changes ownership the pharmacy can only submit a single Claim and receive payment under the Section 90 approval number that is current at the time the Claim is submitted.

It is the responsibility of the owners of the Approved CI Service Provider to negotiate the payment claimed as part of the sale of the business. This means that a former and current owner cannot submit separate Claims for portions of the same eligible Claim Period or receive portions of the payment. Claims and payments can only be accepted and paid under the current Section 90 approval number.

If an Approved CI Service Provider changes Section 90 approval number during an eligible Claiming Period, the pharmacy can only submit a single Claim under its current Section 90 approval number. The Claim should include services provided as specified in these Program Rules across the whole eligible Claiming Period.

10. RESOURCES

CI Program resources are available for download at www.6cpa.com.au

For further information regarding pharmacy accreditation visit www.qcpp.com

11. CONTACT

6CPA Support Team
6CPA Administrator
PO Box 310
Fyshwick ACT 2609

Phone: 1300 555 262

Email: support@6cpa.com.au