

# DOSE ADMINISTRATION AIDS

- **How will my cap work? For example, if a pharmacy does 250 DAA's does that mean their cap will be 200?**

Pharmacies approved to participate in the DAA Program will be allocated an individual cap based on the previous DAA service volumes recorded and claimed under the Pharmacy Practice Incentive Programs for the most recent 12 month period (June 2016 – May 2017). Those providers who have previously claimed greater than 200 DAA patients per week will be capped at the upper limit of 200 DAAs per week.

There will be special capping arrangements put in place for those pharmacies who have previously recorded and claimed for greater than 400 DAA patients per week. A cap of no more than 60% of previous DAA service volumes will apply.

- **When will we know the DAA patient cap per week for our pharmacy, and can we appeal them?**

Caps are available to view on the 6CPA Registration and Claiming Portal. Please log onto the system using your pharmacies unique log on and password and you will be able to view the cap for that pharmacy under the "Update Details" tab.

As the recent correspondence and the Dose Administration Aids Program Rules have outlined, the DAA caps for 2017/18 have been calculated based on the number of DAA services that were recorded and claimed under the PPI Program for the most recent 12 month period (June 2016 – May 2017). As a part of that process in submitting a PPI claim, pharmacies agree to a declaration that states, in part, that the information provided in the claim is complete and correct.

It is important that the approved method for the calculation of the caps is applied consistently across all of those pharmacies who have participated in the PPI program over the last 12 months. In light of this the DAA figures that you have supplied as a part of the PPI process will be used to calculate the cap for your pharmacy.

- **Do we need to re-register on the 6CPA claiming portal to participate in the DAA program?**

If you are currently registered on the 6CPA Registration and Claiming portal for the provision of DAAs under the PPI program, you are not required to submit a new registration form. If you would like to check any of your details, please call the 6CPA Support Team (contact details at the end of this document).

- **How do we claim for DAAs?**

Claiming for the DAA program will be in monthly periods. You will need to submit your claim by the end of the following month (e.g. services provided in July must be claimed by the end of August).

Claims for DAA services will be submitted the same way they are now. Log onto the 6CPA Registration and Claiming Portal, choose DAA as the program and enter "the number of eligible DAAs packed" in the month you are claiming for.

There is a "How to Claim for DAAs" guide available on the 6CPA website – go to [www.6cpa.com.au](http://www.6cpa.com.au) and then to the Resources section – Guides and Factsheets.

- **Does the patient have to be a concession card holder?**

Yes, the patient must hold a government issued concession card.

- **Is the DVA Gold card a government issued concession card?**

Yes they DVA card is a government issued concession card.

The following applies to the DVA issued cards:

- Gold Card – Government issued concession card for all pharmaceutical benefits
- Orange Card – Government issued concession card for all pharmaceutical benefits

- White Card – Government issued concession card for specific health conditions. A white card holder is eligible for a program service for a pharmaceutical benefit that is dispensed at the concessional rate.

- **Do patients that have reached the PBS safety net qualify as having a concession card?**

A Safety Net Concession Card is not a 'government issued concession card' and patients who are current holders of a pharmacy issued "CN" card once they reach safety net are not eligible for the 6CPA DAA Pharmacy Program.

- **Does a general patient who, under the Closing the Gap (CTG) PBS scheme, has concessional status for all medicine to be included in the DAA met the eligibility criteria of having a "government issued concession card"?**

No. The patient needs to be eligible for a "government issued concession card."

- **How do I record the patient data? What information will be required for the DAA data collection?**

Data collection will not be implemented until February 2018. More information on the data collection for this program will be available later in the year.

- **Do I need to record the data for the same 5 patients or different patients? And do I need to submit the spreadsheet every time?**

Data collection will not be implemented until February 2018. More information on the data collection for this program will be available later in the year.

- **Are patients who live in Group homes eligible under this DAA program?**

If a patient is living in a self-funded group home and not receiving a DAA funded through another State/Territory or Federally funded program, this would satisfy the "living in the community" eligibility criteria. "Self-funded" would include such circumstances as a patient receiving benefits, such as a disability pension, and using those funds to pay rent/board in a group home.

- **Does 'prescription medicine' include prescribed over the counter medicines?**

Yes, for the purposes of the DAA Program in which patient eligibility refers to a defined number of prescription medicines, the intent of this is to cover medicines ordered by the patient's prescriber. This may include Schedule 4 and Schedule 8 medicines as well as OTC and complementary medicines being used for treatment and/or prevention of chronic conditions such as paracetamol, aspirin, calcium and vitamin D. While the patient may not need a prescription for re-supply of non-prescription medicines, the original order should be from a prescriber with a record in the pharmacy's dispensing history for the patient.

- **How does a combination medicine contribute to a patient's eligibility for a subsidised DAA?**

As the intent of the DAA Program is to assist eligible patients to better manage their medicines in order to avoid medication misadventure and improve medication adherence, the component medicines of a combination product may be counted as individual medicines, except for medicines that are almost invariably used together in fixed-dose combinations for clinical reasons (such as oral contraceptives, hormone replacement therapy and Helicobacter pylori eradication regimens).

- **Do we have to obtain a DAA consent form for every patient?**

Yes, for every eligible patient you wish to claim the \$6 per week fee for (after 1 July) must sign the DAA consent form.

## CONTACT

6CPA Support Team

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