FAQ - Participating in ePSI

How does my pharmacy qualify for the ePSI?

To qualify for the ePSI, your pharmacy will need to:

1. Be eligible for the Pharmacy Practice Incentive (PPI) Community Services Support priority area, and
2. Meet (or exceed) specified Electronic Transfer of Prescription (ETP) Scan Rates over two review periods. The target for the first review period is an ETP Scan Rate of 15% of all original prescriptions, and your pharmacy should be aiming to achieve this rate of scanning, or higher, by March 2014.

What if my pharmacy is not registered for PPI, can I still access ePSI?

No. Your pharmacy must be registered and eligible for the PPI Community Services Support priority area in accordance with the PPI Program Specific Guidelines.

Do I need to do anything if my pharmacy is already eligible for the PPI Community Services Support priority area?

No. However, your pharmacy does need to maintain its PPI eligibility to access the ePSI.

- To check your pharmacy’s PPI registration status contact the 5CPA Help Line on 1300 555 262 or email: support@5cpa.com.au
- To check your pharmacy’s PPI eligibility status contact the QCPP Administration Help Line on 1300 363 340 or email: help@qcpp.com
- For further information about the PPI Program visit www.5cpa.com.au/ppi

Are there any new forms or claiming arrangements?

No. The information required to assess your eligibility for the ePSI payment is already transferred to the Department of Human Services (DHS/Medicare) as part of your pharmacy’s PBS Online claim. The annual payment process for the PPI Community Services Support priority area remains unchanged. The ePSI payment is separate and in addition to the existing PPI incentives.

What are the ETP Scan Rate targets and when are the ePSI payments made?

The following table outlines the details of the ePSI schedule:

<table>
<thead>
<tr>
<th>Review Period 1</th>
<th>Review Period 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicable minimum ETP Scan Rate</td>
<td>15%</td>
</tr>
<tr>
<td>Scan Rate Review Period</td>
<td>March 2014</td>
</tr>
<tr>
<td>Payment Value</td>
<td>At least $800 (confirmed after Review Period 1)</td>
</tr>
<tr>
<td>Payment Period</td>
<td>August 2014 (approx.)</td>
</tr>
</tbody>
</table>

How does my pharmacy become ‘ETP active’ and meet (or exceed) the ETP Scan Rates?

In order to maximise your pharmacy’s ability to achieve the specified ETP Scan Rate and access this incentive, your pharmacy needs to:

1. Register for ETP with a Prescription Exchange Service (PES) – the eRx Script Exchange at www.erx.com.au and/or the MediSecure service at www.medisecure.com.au
2. Encourage all your pharmacy assistants and pharmacists to present all original prescriptions to the dispensary with the barcoded side up
3. Scan every barcoded script that enters your pharmacy (including repeats as best practice)
4. Report any recurring issues to your dispensary software vendor and ehealth@guild.org.au so that these issues can be investigated and improvements made to the software.

Are there any new forms or claiming arrangements?

No. The information required to assess your eligibility for the ePSI payment is already transferred to the Department of Human Services (DHS/Medicare) as part of your pharmacy’s PBS Online claim. The annual payment process for the PPI Community Services Support priority area remains unchanged. The ePSI payment is separate and in addition to the existing PPI incentives.
**What formula is used for the ETP Scan Rate?**

The formula for the ETP Scan Rate is as follows:

\[
\frac{\text{Total ETP barcoded Originals Scanned}}{\text{Total Original Prescriptions Dispensed}}
\]

*(in the review period)*

**NOTE:** the ETP Scan Rate calculation excludes private prescriptions and repeat prescriptions.

**How do I monitor my pharmacy’s ETP Scan Rate?**

A number of pharmacy software vendors are now providing a scan rate report facility. You should contact your dispense vendor for information on what is currently available.

**What can my pharmacy do to maximise the chance of getting the ePSI?**

Once your pharmacy is registered with a PES and is eligible for the PPI Community Services Support priority area, ensure that:

- All prescriptions are presented to the dispensary barcode side up
- All your pharmacists and pharmacy assistants working in the dispensary scan all prescriptions that contain barcodes.
- All your pharmacy’s PBS claims are complete within the statutory time frames. Failure to do so may result in your ETP Scan Rate being assessed lower than it actually is.

To be truly ‘ETP Active’ a pharmacy should aim to change its workflow in order to ingrain the scanning of barcodes on all available electronic prescriptions, whether they are originals or repeats.

**GP’s in my area aren’t using ETP, what should I do?**

Notify the Guild by emailing ehealth@guild.org.au and provide contact details of your local GPs who are not ‘ETP active’. This will enable us to follow the issue up with the Medicare Local in your area who will make contact with the GP to discuss getting ‘ETP active’ with them.

**The barcode won’t scan what should I do?**

This may be an interoperability issue so contact your PES (eRx, Medisecure):

**eRx Script Exchange**

Phone: 1300 700 921
Email: support@erx.com.au
Web: www.erx.com.au

**MediSecure**

Phone: 1800 472 747
Email: helpdesk@medisecure.com.au
Web: www.medisecure.com.au

Also, email the Guild at ehealth@guild.org.au and provide details of (1) your PES and, (2) the type of dispensing software your pharmacy is using. This will enable us to follow-up the issue on your pharmacy’s behalf.

**All obligations and requirements of the Electronic Prescription Scanning Incentive (ePSI) are detailed in the Pharmacy Practice Incentive (PPI) Program Specific Guidelines available at:**

www.5cpa.com.au/resources

---

**Official 5CPA resources and support**

Website: www.5cpa.com.au/resources
SCPA Help Line: 1300 555 262
Email: support@5cpa.com.au

**QCPP tools, resources and support**

Website: www.qcpp.com
QCPP Help Line: 1300 363 340
Email: help@qcpp.com
QCPP State Managers in each State