



Fifth Community Pharmacy Agreement: Frequently Asked Questions - Programmes

What programmes are managed through the 5CPA Registration and Claiming Portal?

The Pharmacy Guild of Australia now receives all claims and undertakes all payments for the following Fifth Agreement programmes, which were previously managed by the Department of Human Services:

- Home Medicines Review (HMR) Programme
- Residential Medication Management Review (RMMR) and Quality Use of Medicines (QUM) Programmes
- MedsCheck and Diabetes MedsCheck Programmes
- Pharmacy Practice Incentive (PPI) Programme
- Section 100 Pharmacy Support Allowance
- Rural Pharmacy Maintenance Allowance (RPMA).

Why have changes been made to the programme administration arrangements?

Changes to previous programme administration arrangements implemented on 1 March 2014 aim to streamline and improve how pharmacies and pharmacists receive remuneration for the valuable services they provide to the Australian community.

The Pharmacy Guild, through a contractual arrangement with the Australian Government, has delivered an electronic based claiming system – the **5CPA Registration and Claiming Portal** – that makes it more convenient for pharmacies and pharmacists to lodge claims. The **5CPA Registration and Claiming Portal** will reduce red tape and deliver greater efficiencies over the previous paper-based system.

What programme changes have been brought in since 1 March 2014?

Since 1 March 2014, a number of changes to 5CPA programmes have been implemented:

1. A cap on the number of HMRs that can be delivered, either by an HMR service provider or an accredited pharmacist, of 20 per calendar month;
2. A limit of 90 days from the date of the referral from a General Practitioner to when an HMR or RMMR service may be conducted;
3. A timeframe of 24 months (2 years) between repeat/additional HMR and RMMR for a single patient; and
4. A cap on the number of MedsCheck/Diabetes MedsCheck services that can be delivered by a community pharmacy, to a combined total of 10 per calendar month.
5. A timeframe of 30 days from the date of service (patient interview) applies when claiming MedsCheck/Diabetes MedsCheck, HMR and RMMR services.

In addition to the above changes, the Department of Health and the Pharmacy Guild have agreed to continue to explore changes to MBS referral criteria for Item 900 (HMR) and Item 903 (RMMR) to ensure these services are appropriately targeted to people who would most benefit from the service.

Note: *No changes have been made to the QUM programme rules.*

Why have caps on the number of HMR and MedsCheck/Diabetes MedsCheck services provided been introduced?

HMR and MedsCheck/Diabetes MedsCheck services have been capped to ensure the overall sustainability of all Fifth Agreement programmes and services to ensure that those patients who are most in need can continue to benefit from these and other important primary health care services and initiatives made available under the Agreement.

Since announcing the cap would apply to service providers – (the entities claiming for the HMR services), it has become apparent that arrangements are being considered that could circumvent the cap thereby undermining the sustainability of the programme. The Government and the Guild have taken the responsible approach to ensure the HMR programme continues to be available for Australian consumers and the cap will apply across all service providers and accredited pharmacists regardless of whether they operate independently or in association. This change is expected to affect only the small number of accredited pharmacists who currently perform more than 20 HMRs per month.

Why has the frequency of HMR and RMMR services been restricted for repeat/additional patients?

The provision of HMR and RMMR services are not intended for annual or bi-annual review. Subsequent reviews should generally only be conducted when there is a significant change to a patient's condition and/or medicine regimen. These services are not a substitute for the ongoing advice and value a primary health care professional (General Practitioner, Allied Health Professional and/or a community pharmacist) can provide.

The Fifth Agreement provides for a number of other medication management services which pharmacists and patients can utilise to meet patient needs.



Why are referrals for HMR and RMMR services now restricted to 90 days?

A key priority of HMR and RMMR services is to ensure that people receive timely service. These services are aimed towards people at significant risk of medication misadventure, which can lead to poor health outcomes and avoidable hospitalisation. The decision to restrict referrals to 90 days is a responsible decision that ensures people who are referred for this important service receive assistance as soon as possible, in order to manage and address the concerns that have been identified by their referring General Practitioner.

If I receive an HMR or RMMR referral dated prior to 1 March, but provide the service post 1 March, will the service be subject to the programme changes?

Yes. All services conducted from 1 March onwards must comply with the relevant *Programme Specific Guidelines* that are effective from 1 March 2014.

Do I have to register as an approved service provider to participate in medication management programmes?

Yes. If you previously held an Approved Service Provider status issued by the Department of Human Services (Medicare), this expired on 28 February 2014. Any pharmacies or pharmacists wishing to participate in medication management programmes will need to register online via the [5CPA Registration and Claiming Portal](#).

Have the Prior Approval processes for HMR and RMMR continued?

Yes. Prior Approval process details are outlined in the relevant *Programme Specific Guidelines*:

- *HMR Programme Specific Guidelines*
- *RMMR and QUM Programme Specific Guidelines*.

Prior Approval forms are available for download from the [Forms](#) section on the 5CPA website.

How can Residential Aged Care Facilities meet their accreditation requirements for medication reviews now that RMMRs can only be conducted every 2 years?

An annual RMMR is not a requirement for Residential Aged Care Facility accreditation. The facility needs to demonstrate that there are systems in place for appropriate management of medicines.

For more information visit www.accreditation.org.au

Do I need an ABN to participate in HMR or RMMR as a sole trader or business entity?

Yes. As outlined in the relevant *Programme Specific Guidelines*, a HMR and/or RMMR Service Provider means any of the following who have been approved to provide HMR/RMMR Services in accordance with the relevant *Programme Specific Guidelines* and the [5CPA General Terms and Conditions](#):

- an owner of an approved Section 90 Community Pharmacy; or
- a business entity with an Australian Business Number (ABN), this includes an Accredited Pharmacist operating as a sole trader;

and for RMMR have executed a RMMR Service Agreement with an eligible Residential Aged Care Facility.

A business entity does not include:

- any organisation that is able to initiate a referral for the HMR/RMMR Service;
- a Section 94 Pharmacy; or
- a public or private hospital.

Please refer to the relevant *Programme Specific Guidelines* for more information:

- [RMMR and QUM Programme Specific Guidelines](#)
- [HMR Programme Specific Guidelines](#)

Do I need to sign new agreements with all Residential Aged Care Facilities that I provide RMMR services to?

As per clause 5.1 of the *RMMR and QUM Programme Specific Guidelines*:

To become an approved RMMR Service Provider, an RMMR Service Agreement must be in place. The Service Provider is responsible for ensuring the Agreement entered into with the Facility is consistent with these Programme Specific Guidelines and current, prior to undertaking any reviews.

Do I need to get patient consent before I can provide 5CPA services?

As per the relevant *Programme Specific Guidelines*, it is the HMR, RMMR/QUM and/or MedsCheck/Diabetes MedsCheck service provider's responsibility to ensure that appropriate patient consent has been granted prior to conducting the service. For further information, refer to the relevant *Programme Specific Guidelines*.

The [5CPA Patient Privacy Notification](#) (*Australian Privacy Principles Notification*) form is available for download from [Resources](#) tab of the 5CPA website to assist you in obtaining appropriate patient consent. Please keep the signed copy of this form on file, you do not need to submit this form when claiming for services provided.

