

Your Reference:
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Department: Medicines Management
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10 December 2014

Dear Pharmacist

I am writing to advise you of a change in the way claims for the Monitored Dosage System (MDS) scheme will be made.

From 1 January 2015 we will be using an electronic system to process claims for this service provided by Webstar, the same company currently running the Minor Ailment Scheme payment system. Therefore from this date onwards all MDS scheme claims will need to be submitted electronically via Webstar and can no longer be submitted on a paper claim form to Primary Care Support Preston (formally LaSCA).

Attached is a step by step guide to accessing the system and inputting the information required to make MDS claims for your patients. For claims from 1st January you will need to complete all the information required for each patient you make a claim for. The system will automatically calculate the value of your claim for you based on the current payment structure. Once a patient is entered on the system for your pharmacy you will only need to update the information for the following months. Hopefully you will find this system more efficient than the current paper-based system.

Primary Care Support Preston (formally LaSCA) will continue to process claims they receive up to and including 31 December 2014. Any claims **received** by Primary Care Support Preston (formally LaSCA) after this date (irrespective of date sent) will be returned to the pharmacy and they will need to be submitted via Webstar. Delays in postage times due to Christmas will therefore need to be taken into account when submitting any claims to Primary Care Support Preston (formally LaSCA).

If you require further information please contact the Medicines Management Team on 01942 482838.

Yours sincerely

Anna Swift
Assistant Director of Medicines Management

Guide to Monitored Dosage Scheme Claim Submission via Webstar.

1. Sign in to the Webstar Service Pact Home Screen (same screen as Minor Ailment Screen) and choose the MDS option.
2. All claims (existing patients on paper-based system and any new patients) will need to be added by completing all the required information fields including the month that is being claimed for. Note: DDA Assessments must be completed every 12 months.

Initially adding a patient will generate a claim for that month.

Wigan Borough Monitored Dosage Service - Patients - Add New Claim

Add New Patient Claim

Search Patient By

NHS Number: Postcode:

Date of Birth (dd/mm/yyyy):

Check box to confirm that patient has GP referral letter presented to the pharmacy:

DDA Assessment Date (dd/mm/yyyy):

Date of MDS Supply (dd/mm/yyyy):

NHS Number:

Date of Birth (dd/mm/yyyy):

Postcode:

GP Practice:

Pharmacist Name:

Claim Period:

Type of Claim:

Does the patient live in nursing home or residential home? Yes No

* indicates a required field

3. Once saved, patients can be viewed in a table by clicking on "View Active Patients".

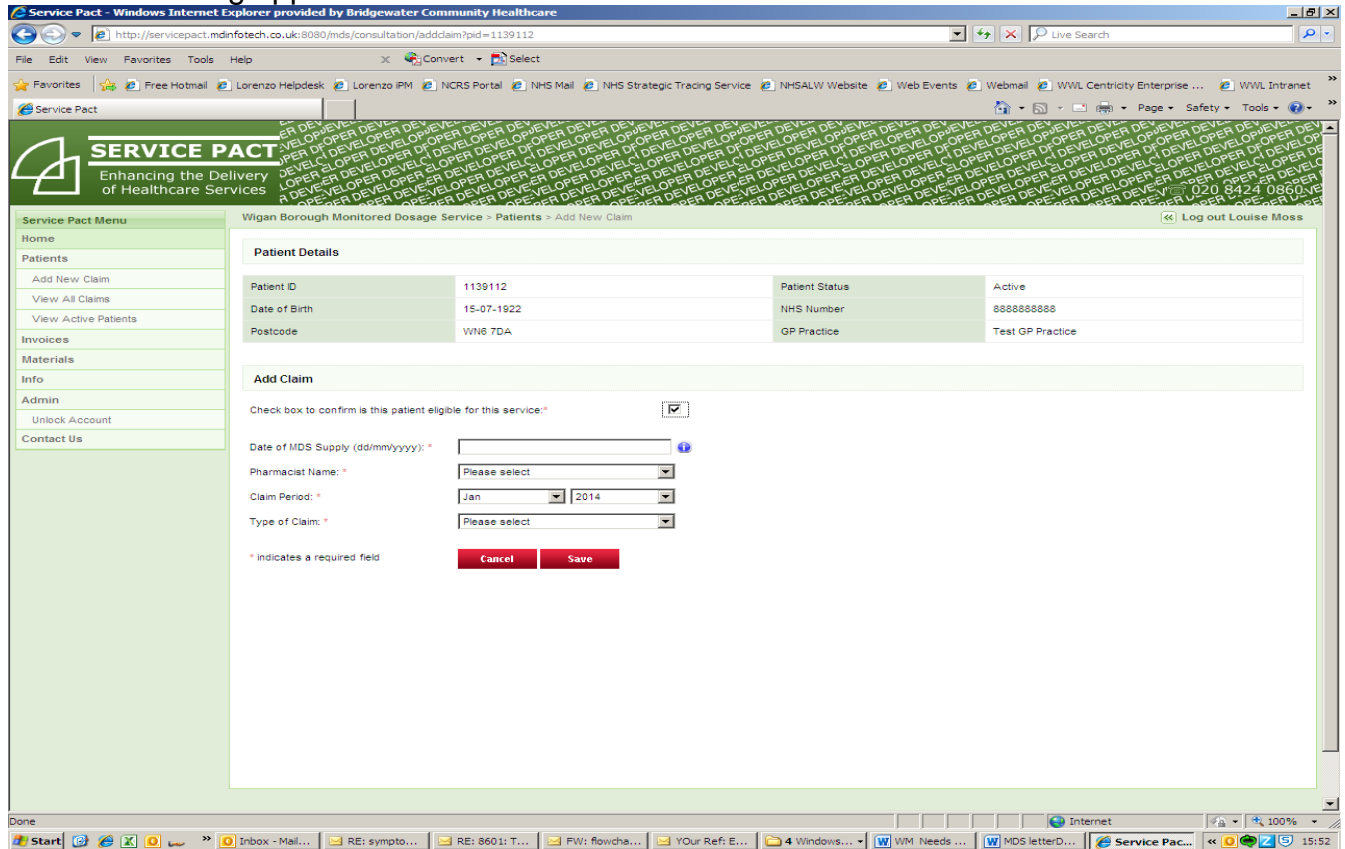
View All Active Patients

Total Patients : 43

Patient ID	NHS Number	Date of Birth	Postcode	Action
1139113	4444444444	27/05/1922	WN7 0DA	Add Claim / Close
1139112	8888888888	15/07/1922	WN6 7DA	Add Claim / Close
1139108	9999999999	15/01/1928	WN6 7JA	Add Claim / Close
1139028		09/01/1930	WG2 3ER	Add Claim / Close
1139114		09/04/1930	W32 2VE	Add Claim / Close
1139115		08/09/1930	W23 3VE	Add Claim / Close
1138716	5555555555	09/09/1940	WG4 2ER	Add Claim / Close
1139016	2222222222	22/01/1944	WN6 8JA	Add Claim / Close
1139097		09/09/1945	HA8 3LY	Add Claim / Close
1139023	4211556789	11/05/1947	WN6 7JA	Add Claim / Close
1139017		12/05/1947	WN5 6PL	Add Claim / Close
1139003	1111111111	09/09/1947	WN1 2WE	Add Claim / Close
1138665	8888888888	02/06/1954	HA5 2AJ	Add Claim / Close
1138997	6167220662	25/07/1955	WA3 2DD	Add Claim / Close
1138996	6167235333	05/12/1966	WN7 2AB	Add Claim / Close
1138666	1111111111	09/05/1967	HA5 5LX	Add Claim / Close
1138765		01/04/1970	HA5 5LX	Add Claim / Close
1138764	8888888888	01/04/1970	HA5 5LX	Add Claim / Close
1138749		19/04/1981	NV9 9BL	Add Claim / Close

4. To add a subsequent month's claim click "Add Claim" in the Action column.

The following appears:



5. The pharmacist/technician must tick the box to confirm that the patient is still eligible for the service (e.g. patient has not moved into a residential or nursing home, DDA Assessment is still valid). Failing to do this would result in the submission of a fraudulent claim.
6. The pharmacist/technician then completes the data and clicks save. Invoices will be uploaded once all claims for the month have been submitted. The invoices will be available as a PDF usually around the middle of the following month following submission.