



March 2021

PSNC Briefing 040/20: Requirement to sign prescriptions suspended: dispensing and submission guidance

As part of the social distancing measures to limit the spread of the coronavirus and to assist in the management of the serious risk or potentially serious risk to human health in response to the ongoing Covid-19 pandemic, Ministers in England agreed to temporarily suspend the need for patient signatures on prescription forms/EPS tokens. This change came into effect on the 1 November 2020 and was initially expected to end on 31 March 2021. Following representations made by PSNC to the Department of Health and Social Care (DHSC), Ministers in England have agreed to extend the temporary suspension for a further three months until 30 June 2021.

During this period, patients (or their representatives) may continue to sign the reverse of prescriptions forms and EPS tokens but are not expected to do so. However, as per the usual dispensing process, patients should continue to be asked to pay any relevant prescription charges, and evidence of their entitlement provisions apply in the usual way.

Where patients would normally sign the FP10 paper prescription form or EPS token, contractors can act as the patient's representative and sign on their behalf (recommended) or may choose to leave the signature box blank. Note: During this period, NHSBSA will NOT SWITCH any unsigned paper prescription forms between exempt and chargeable groups, but instead, will process prescriptions according to the group in which they are submitted in. To avoid any inappropriate charge deductions, pharmacy staff should ensure that FP10 paper prescriptions forms are sorted into their correct charge groups (exempt, paid or paid at old charge rate) for the end of month submission process.

The changes will be kept under review and further extensions may be granted if there continues to be a cross infection risk. The temporary suspension will be lifted once it is deemed safe for patients to resume signing of forms.

Whilst the suspension remains active, pharmacy teams should ensure the following steps are in place for:

The dispensing process: Changes:

• If a patient or their representative has not already signed the prescription form or token, contractors may act as the patient's representative and sign on their behalf (recommended), as many have done since the start of the outbreak; or contractors may choose to leave the signature box blank.

Note: patients and their representatives are not required to make a declaration or sign the reverse of an EPS token if Real Time Exemption Checking (RTEC) has been used by the pharmacy to confirm the patient's exemption. For further information on RTEC please <u>click here</u>.

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Continue to:

- Ask patients who do not have a current exemption to pay any relevant prescription charge(s); or where a
 patient claims to be exempt from prescription charges, pharmacy teams should ask for evidence of their
 entitlement to free prescriptions
- Mark the relevant exempt category or amount paid on the reverse of the paper FP10 form on behalf of the patient
- Mark the "Evidence Not Seen" box on the back of the form with an 'X' if patients claiming exemption from prescription charges cannot provide any evidence of entitlement to free prescriptions, or where there is doubt over whether the evidence provided is valid
- EPS patient charge (or exemption) declarations are made via the electronic message. It is
 important to transfer the correct paid or exempt declaration made on the EPS token to the electronic
 message before it is submitted for payment to the NHSBSA (deduction of the prescription charge is made
 against the electronic message submitted to the NHSBSA)

The end of month submission process:

Changes:

From December 2020, EPS tokens (other than those used for SSP claims) are <u>NOT</u> required to be submitted
to the NHSBSA whilst the suspension of signature requirements remains in place. Please note: Pharmacy
contractors will be required to submit relevant tokens to the NHSBSA once the temporary suspension on the
requirement to sign prescriptions is lifted.

The table below shows the changes to EPS token submission from December 2020 until the suspension remains in place:

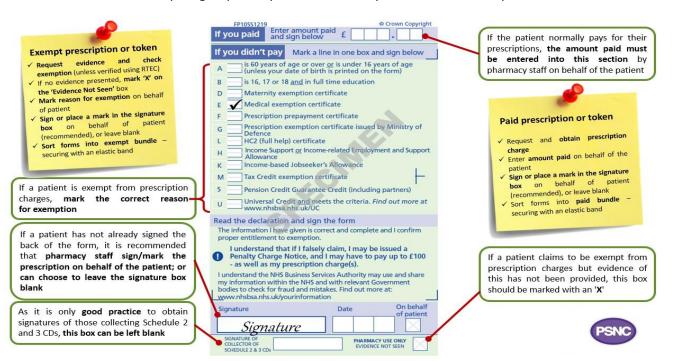
place:		
Tokens to continue to be submitted to the NHSBSA during suspension period	Tokens (for non- payment) <u>NOT</u> required to be submitted to the NHSBSA during the period of suspension only	Tokens (for non- payment) <u>NOT</u> required to be submitted to the NHSBSA
1. Tokens used to claim payment for supplies made against Serious Shortage Protocols (SSPs). When using 'NCSO' endorsed tokens to submit SSP claims, the tokens must be placed in the red separator on top of the relevant paid/exempt prescription bundle in a secure manner (for example, by securing the red separator to the main prescription bundle with an elastic band/clip to avoid any tokens and paper prescriptions from slipping out of the separator during transit) for end of month submission. The NHSBSA require any tokens with SSP claims to be placed securely in the red separator. If tokens with SSP claims are not placed in the red separator, these may not be processed for payment by the NHSBSA	 Tokens with an exemption declaration (including where the patient is age exempt) Tokens with a paid declaration indicating that a patient has paid for their prescription(s) Tokens which may have a signature of collector of Schedule 2 and 3 Controlled Drugs 	 Tokens for age exempt patients (60 and over or under 16), where the exemption is automatically captured through the patient's date of birth on the electronic prescription Tokens with an exemption declaration where a patients' exemption has been verified through Real Time Exemption Checking (RTEC) Tokens for contraceptive-only items

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Continue to:

- It is important that contractors check that the reverse of every prescription form is marked with a reason for exemption, or the amount paid (unless the prescription is only for a contraceptive or endorsed 'FS' by the prescriber for items used to treat a sexually transmitted infection) before a prescription bundle is submitted for payment
- Check signature boxes and if unsigned, pharmacy staff can place a mark in the signature box on behalf of the patient (recommended)
- **Remove** all pins, staples, labels, or invoices from forms as these will have to be manually removed by NHSBSA staff which could lead to delays in processing of prescription forms for payment
- Ensure that FP10 paper prescriptions forms (including those submitted using red separators) are sorted into the correct patient charge groups (exempt, paid, or paid at old charge rate), taking extra care that exempt prescriptions are NOT inadvertently submitted with the paid bundle or vice-versa. This step is particularly important whilst the suspension of signature requirements is active because any unsigned prescriptions marked with a reason for exemption but inadvertently filed in the paid bundle will be treated as paid by the NHSBSA and the relevant number of prescription charges will be deducted from the contractor's account
- To avoid any movement or mixing of prescriptions between patient charge groups during transit, **elastic bands should be used to secure prescriptions** in their relevant group for submission. If you are submitting a **small** number of forms, a **paper clip** may be used to secure the prescriptions in their relevant group
- If there is any mixing of forms between paid and exempt groups during transit, the NHSBSA will move any signed prescription forms back into their respective groups i.e. any exempt prescriptions inadvertently mixed in with the paid bundle will be moved back to exempt group as long as an exemption category is selected **AND** a mark is placed in the signature box (by the pharmacy signing on behalf of the patient). Likewise, any signed for paid prescriptions will be moved back into the paid group if they are inadvertently mixed in with exempt bundle



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FAQs

Q. Do collectors of Schedule 2 and 3 Controlled Drugs (CDs) need to continue signing the reverse of the prescription forms and tokens when they collect CDs?

A. While it is normally **good practice** to ask individuals, at the point that Schedule 2 or 3 CDs are handed to them, to sign the back of the prescription form (or EPS token reverse) as confirmation of collection, at this time however, to try and minimise any potential risks of Covid-19 transmission from paper handling, it may not be appropriate to follow this recommendation. Pharmacists will need apply their professional judgement to determine if it is appropriate to supply the CDs if the identity of the person collecting the CDs cannot be clearly ascertained.

Q. Do I still need to submit EPS tokens (for non-payment) to the NHSBSA whilst the suspension of signature requirements remains in place?

A. No. PSNC has received confirmation from the DHSC that it is no longer necessary for contractors to submit EPS tokens (other than those used for SSP claims) to the NHSBSA whilst the suspension of signature requirements remains in place. The change to token submission affects prescriptions dispensed from December 2020 onwards and is provisionally set to last until 30 June 2021. The changes will be kept under review and the suspension date may be brought forward or extended further if there continues to be a cross infection risk. The temporary suspension will be lifted once it is deemed safe for patients to resume signing of forms at which point pharmacy contractors will be required to submit relevant tokens to the NHSBSA, as before.

Q. Will FP10 paper prescription forms be switched between exempt and chargeable groups if they are left unsigned by patients or their representatives (including by pharmacy staff)?

A. Whilst the suspension of signature requirements is active (from 1st November 2020 until 30 June 2021), the NHSBSA **will NOT SWITCH** any unsigned paper prescription forms between exempt and chargeable groups, but instead, will process prescriptions according to the group in which they are submitted in. To avoid any inappropriate charge deductions, pharmacy staff should ensure that FP10 paper prescriptions forms (including those submitted using red separators) are sorted into the correct patient charge groups (exempt, paid, or paid at old charge rate), taking extra care that exempt prescriptions are NOT inadvertently submitted with the paid bundle or vice-versa. This step is particularly important because any unsigned prescriptions marked with a reason for exemption but inadvertently filed in the paid bundle will be treated as paid by the NHSBSA and the relevant number of prescription charges will be deducted from the contractor's account.

Q. Do I still need to ask patients to provide evidence of their exemption?

A. Pharmacy teams should continue to ask patients to provide evidence of their entitlement to free NHS prescriptions and mark the relevant exemption category on the reverse of the paper FP10 forms or EPS tokens on behalf of the patient. If the patient is unable to provide evidence of their entitlement to free NHS prescriptions or where there is doubt over whether the evidence provided is valid pharmacy teams should mark the "Evidence Not Seen" box on the back of the form with an 'X'.

Q. Do the NHSBSA use the declaration made on tokens (for non-payment) to calculate any charge deductions?

A. No. For EPS, the NHSBSA use the paid or exempt category information submitted in the electronic message to determine if any charge deductions apply. Therefore, it is important to transfer the correct paid or exempt declaration made on the tokens to the electronic message before it is submitted for payment to the NHSBSA.

Additional information

For guidance on how to prepare your prescription bundle for end of month submission see here
For information on prescription switching see our page here
For information on Real Time Exemption Checking (RTEC) see our page here

If you have queries on this PSNC Briefing or require more information, please contact the Dispensing and Supply team info@psnc.org.uk 0203 1220 810.

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