

Dispensing Factsheet: Prescription Switching

Here our Dispensing and Supply team will take you through the common reasons for prescription switching.

How to complete the reverse of a prescription correctly

The reverse of the current paper FP10 form contains three parts: Part 1 (exemption), Part 2 (charges paid) and Part 3 (signature). It is important to ensure that relevant parts are correctly completed by the patient/representative as either exempt or paid. The table below shows parts to complete for each patient status.

Patient status	Parts of the form which MUST be completed
Exempt	Part 1 & Part 3
Paid (Chargeable)	Part 2 & Part 3

The declaration on the reverse of paper prescription forms must be completed on all occasions except where:

- the patient is under 16 or 60 or over and a computer-generated date of birth is printed on the prescription
- the patient is a prisoner on release who presents an FP10 or FP10(MDA) with the letters 'HMP' **computer printed** in the practice address box
- the prescription is a 'Bulk' Prescription (i.e. for two or more patients, see Drug Tariff Part VIII A, Note 9)

What is switching?

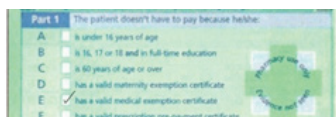
Once the correct parts on the reverse of the prescription form have been completed by the patient/representative, pharmacy teams are required to sort paper prescriptions into the correct exempt or chargeable group bundles for their end of month submission. Switching occurs when a prescription is moved from the group it was submitted in to the other (for example, moved from exempt to chargeable or vice-versa). When your account is processed by the NHS Business Services Authority (NHS BSA), the reverse of each paper prescription is assessed to determine if it has been filed in the correct group and has been completed correctly by the patient/representative.

1. A prescription is switched from Exempt (Group One) to Chargeable (Group Two) when:

- Part 3 is unsigned** - the most common reason for switching from exempt to chargeable group is where the patient has ticked an exemption but not signed Part 3 on the reverse of a prescription (excluding age exempt patients where the date of birth is computer generated).
- Part 2 contains a charge rate** - when a paid prescription has been incorrectly filed with the exempt prescriptions bundle prior to submission.

To prevent exempt paper prescriptions being switched to chargeable, ensure that:

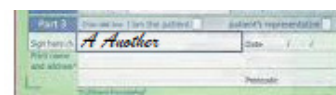
Part 1 of the declaration has been clearly marked with a tick or a cross



Part 2 (the 'amount paid' box) has not been obscured/marked for, e.g. with a signature



Part 3 (the 'signature box') has been signed; a pharmacy stamp is **NOT** acceptable as a signature



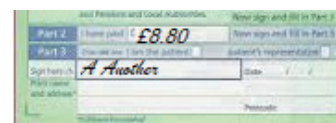
When prescription forms are switched from Exempt to Chargeable, a prescription charge is deducted for each item dispensed on the prescription. This can have huge financial consequences for contractors, as money can be lost through not correctly checking and completing the reverse of an exempt prescription. For example, if an exempt prescription with three items is switched to chargeable, NHS BSA would deduct three patient charges from the pharmacy account costing the pharmacy £8.80 x 3 charges = £26.40.

2. A prescription is switched from Chargeable (Group Two) to Exempt (Group One) when:

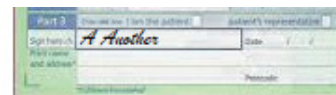
- Part 1 and Part 3 have been completed** - a prescription is switched from chargeable to exempt when a form with a completed exempt declaration has been incorrectly filed with the paid prescriptions bundle prior to submission, or where the patient is age exempt with a computer-generated date of birth or age on the prescription.

To prevent chargeable paper prescriptions being switched to exempt, ensure that:

Part 2 (the 'amount paid' box) has been completed correctly and is clear and legible



Part 3 (the 'signature box') has been signed; a pharmacy stamp is **NOT** acceptable as a signature



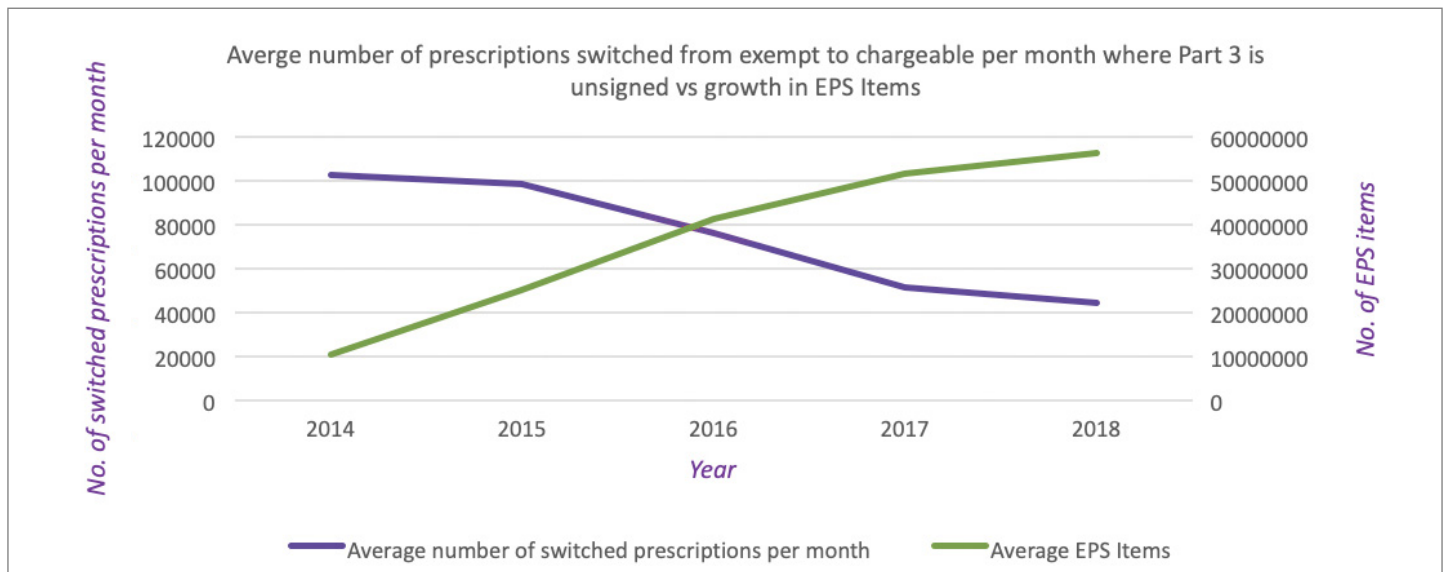
The age or date of birth printed on the front of the prescription is not obscured by a pharmacy stamp or other markings

No charge deductions are made for items on a prescription that is switched from chargeable to exempt status. Do ensure the correct number and amount of prescription charge(s) are collected and declared. This should be noted particularly during months when there has been a change to the prescription charge rate.

Switching statistics

- The average number of switched prescriptions per month where Part 3 was deemed incomplete, decreased from 102,771 (2014) prescriptions to 44,012 (up to July 2018).
- The total reduction of switching where Part 3 was deemed incomplete was 50.33%. In 2014 there was a total of 1,233,256 prescriptions switched and in 2017 there was a total of 612,568 prescriptions switched.
- The total charge deductions per year where Part 3 was deemed incomplete, went from £9.9m (2014) to £5.2m (2017). This is a 46.97% reduction.

The graph below shows information on prescriptions switched from exempt to chargeable where Part 3 is unsigned, and the corresponding increase in EPS utilisation between 2014 and July 2018.



Prescription switching statistics for your pharmacy can be found on page 2 of your FP34 Schedule of Payments. This details the number of prescriptions switched and reasons for the switches. It is important to monitor this closely as it can be useful in identifying why prescriptions are being switched in your pharmacy. This information can be used to ensure your pharmacy team are following your prescription receipt Standard Operating Procedures (SOPs), update SOPs if needed and to identify any staff training requirements.

EPS prescriptions and switching

Prescriptions submitted electronically will be processed according to the exemption status within the electronic claim message and therefore cannot be switched. It is important to note that where an exempt or paid status has not been selected on an EPS claim message, this will automatically default to paid (some EPS systems may prompt users to confirm paid/exempt status before a claim is submitted for payment).

At the end of each month, contractors are required to submit all tokens where an exemption declaration (other than age-related) is captured or where a patient charge is paid. Any EPS prescriptions for age exempt patients will be automatically switched to exempt status. EPS prescriptions will not be switched if EPS tokens (used to capture patient declarations) are incorrectly filled, incomplete or unsigned. All prescription and dispensing tokens submitted to the NHS BSA are used for audit purposes only as part of their prescription exemption checking service.

PSNC TOP TIPS: How to prevent prescriptions from being switched

- It is good practice to check that the reverse of the prescription/token has been correctly completed at the point of handing the medication over to the patient/patient’s representative.
- Ensure that each prescription/token is signed – especially where multiple prescriptions are presented at one time and where the patient is age exempt but the date of birth on a paper prescription is handwritten.
- Ensure that all prescriptions are correctly filed in the appropriate group – you may find it useful to separate these at the end of each day to avoid a build up at the end of the month.
- Double check your exempt group for misfiled paid prescriptions before submitting your bundle at the end of the month – this is also a good opportunity to check for any incorrectly completed or unsigned prescriptions.
- EPS – Before submitting a claim to NHS BSA, ensure all information regarding patient exemption/ prescription charge status is correctly recorded from the patient declaration made on the token.

For more information, see our related webpages:
psnc.org.uk/charges
psnc.org.uk/exemptions
psnc.org.uk/switching