

Improved 6CPA Community Pharmacy Programs PROGRAM CHANGES FROM 1 JULY 2017

The Government will provide \$825 million over three years, from 2017-18, to community pharmacies to support and improve Australians' access to medicines, under the *Improving Access to Medicines – support for community pharmacies* measure. This includes \$600 million through the Sixth Community Pharmacy Agreement (6CPA) to continue existing community pharmacy programs and enable pharmacists to deliver new and expanded medication management services for Australians who need additional assistance to manage their medications.

The following pharmacy programs have been redesigned to support the collection of information to assist with assessment of the effectiveness of these services. From 1 July 2017, the following changes will occur:

Dose Administration Aids

The current Pharmacy Practice Incentive payment for Dose Administration Aids (DAAs) will end on 30 June 2017, however claims for DAAs provided in June may be submitted between 1 July and 14 July 2017.

From 1 July 2017, community pharmacies participating in the DAA program will receive a fee of \$6 per patient per week as a contribution towards the cost of providing the service to patients that meet the eligibility criteria. Community pharmacies may apply an additional consumer charge for the DAA service at their own discretion.

In addition, to support the collection of information and monitor the DAA program's delivery of health outcomes for patients, community pharmacies will be required to collect data for five patients that receive services. Pharmacies will be paid a fee to provide the data at the following points:

| Fee (per patient) | Description |
|----------------------|--|
| \$6.00 | Provision of weekly DAA Service for all eligible patients who receive a DAA Service. |
| \$31.90 | Collection of data at Patient Registration (for five patients) |
| \$31.90 | Collection of data at six month follow up (for five patients) |

To be eligible for a DAA Service funded under the 6CPA, patients must hold a current government issued concession card and live at home in a community setting **and**

- have difficulties managing their medications due to literacy or language issues, physical disability or cognitive difficulties; **or**
- is taking five or more prescription medicines and is experiencing difficulties with medication management.

The DAA Program Rules that govern the operation of the program will be available from the Australian Government shortly. A copy will be made available at www.6CPA.com.au

Further information on 'how to claim' and templates for the collection of data will also be available at www.6CPA.com.au

Staged Supply

The current Pharmacy Practice Incentive payment of \$1,300 per annum for Staged Supply (SS) will end on 30 June 2017.

From 1 July 2017, community pharmacies participating in the SS program will receive a new weekly fee-for-service per patient for up to **four** eligible patients per pharmacy. In addition, to support the collection of information and monitor the SS program's delivery of health outcomes for patients, community pharmacies will be required to collect data for the patients funded under this service.

The new fee structure will include a fee to provide the data at the following points:

| Fee (per patient) | Description |
|----------------------|---|
| \$7.90 | Initial patient set up and day 1 visit (per week) |
| \$4.00 | Fee per visit for days 2-7 (per week) |
| \$31.90 | Collection of data at Patient Registration |
| \$31.90 | Collection of data at six month follow up |

To be eligible for a SS Service funded under the 6CPA, patients must hold a current government issued concession card and be referred by a prescriber **and** be prescribed a medicine from the following categories:

- No2A – opioid analgesics
- No5A – antipsychotics
- No5B – anxiolytics
- No5C – hypnotics and sedatives
- No6A – antidepressants
- No6B – psychostimulants

The SS Program Rules that govern the operation of the program will be available from the Australian Government shortly. A copy will be made available at www.6CPA.com.au

Further information on 'how to claim' and templates for the collection of data will also be available at www.6CPA.com.au

MedsChecks & Diabetes MedsChecks

From 1 July 2017, the number of MedsCheck and Diabetes MedsChecks that can be conducted and claimed by community pharmacies will be increased from a total of ten per calendar month to a total of 20 per calendar month.

In addition, to support the collection of information and monitor the program's delivery of health outcomes for patients, community pharmacies will be required to collect data for the patients funded under this service.

The new fee structure will include a fee to provide the data at the following points:

| Fee (per patient) | Description |
|-------------------|---|
| \$64.70 | MedsCheck service fee |
| \$97.05 | Diabetes MedsCheck service fee |
| \$31.90 | Collection of patient data at time of service |
| \$31.90 | Collection of patient data at six month follow up |

The patient eligibility criteria will remain the same with the addition of the following criterion to the MedsCheck service:

- Patient is taking a medication associated with a high risk of adverse events

The MedsCheck and Diabetes MedsCheck Rules that govern the operation of the program will be available

from the Australian Government shortly. A copy will be made available at www.6CPA.com.au

Further information on 'how to claim' and templates for the collection of data will also be available at www.6CPA.com.au

Home Medicines Review Program

The Home Medicines Review (HMR) Program will continue unchanged from 1 July 2017 while a review of the current MBS item 900 eligibility criteria is undertaken. Potential changes to patient eligibility criteria, the inclusion of two new in-pharmacy follow-up services, and criteria to increase access to the service for Aboriginal and Torres Strait Islander patients are anticipated to commence in early 2018.

The two new in-pharmacy services are:

- Implementation of the Medication Management Plan (MMP) within 4 weeks of the MMP being received by the Community Pharmacy. This will include meeting with the patient in the community pharmacy to ensure the patient understands any recommendations and new activities.
- A Post-review follow-up by the patient's community pharmacy approximately six months after implementing the MMP. This will include the provision of a report to the patient's GP.

Further information on the HMR program is available at www.6CPA.com.au

Pharmacy Trial Program

\$50 million was provided under the 6CPA for the Pharmacy Trial Program (PTP). The PTP tranche 2 Approach to Market closed on 15 December 2016 and the assessment process has commenced. In order to maintain the integrity of the assessment process, the Department of Health cannot provide any further detail at this time.

Other 6CPA Programs

All other 6CPA Programs will continue from 1 July 2017 in their current format pending the outcomes of program assessments/evaluations.

CONTACT

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