

# **Community Pharmacy Lanarkshire Payment/Claims Schedule September 2023**

National Services – No Local Claim Required

All items claimed on UCF forms, including all Pharmacy First sub-services, CPUS, EHC, GFF, HSV, MVP and NRT are paid nationally and not via local submission

# **Pharmacy First**

No local submission required; Universal Claims Framework (UCF) electronic claiming

#### **Pharmacy First Plus**

No local submission required; Rx submitted to PSD as normal & \*must email NSS when starting service\*

#### EHC

No local submission required; Universal Claims Framework (UCF) electronic claiming

#### **Bridging Contraception**

No local submission required; Universal Claims Framework (UCF) electronic claiming

## Community Pharmacy Urgent Supply (CPUS)

No local submission required; Universal Claims Framework (UCF) electronic claiming

## **Gluten Free Foods**

No local submission required; Universal Claims Framework (UCF) electronic claiming

#### MCR

No submission required; Rx submitted to PSD as normal Universal Claims Framework (UCF) electronic claiming

| Local Monthly Claims             |                                                                                                                                                                                                                                                                                                                                |                                                                                                                                               |  |
|----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|--|
| Service                          | Claim Form                                                                                                                                                                                                                                                                                                                     | Submit to & date by & contact                                                                                                                 |  |
| Opiate Replacement<br>Treatment  | No claim form, claimed by NEO system                                                                                                                                                                                                                                                                                           | Cut-off date for submission = 15 <sup>th</sup> of month<br>Late submissions are checked for<br>Contact is Duncan.hill@lanarkshire.scot.nhs.uk |  |
| Injecting Equipment<br>Provision | No claim form, claimed by NEO system                                                                                                                                                                                                                                                                                           | Cut-off date for submission = 15 <sup>th</sup> of month<br>Contact is Leon.Wylie@lanarkshire.scot.nhs.uk                                      |  |
| Hepatitis C Service              | You will be contacted by the service<br>directly when setting up a new patient-<br>Lan.LanarkshireBBVPharmacy@nhs.scot /<br>01698 753528<br>Due to the high cost of these medications,<br>an advance payment for the cost of these<br>medications can be paid along with a one<br>off professional fee listed in your schedule | Contact is: <u>Lan.LanarkshireBBVPharmacy@nhs.scot</u> / 01698 753528                                                                         |  |

|                          |                                                                           | [                                                         |
|--------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------|
|                          | as DAA ADVANCE/RECLAIM, HEP C                                             |                                                           |
|                          | (professional fee).                                                       |                                                           |
|                          | The advance payment will then be                                          |                                                           |
|                          | recouped at the end of treatment.                                         |                                                           |
|                          |                                                                           |                                                           |
|                          | No claim form is needed- all details in                                   |                                                           |
|                          | correspondence with the service.                                          |                                                           |
| Smoking Cossetion        | No Claim form via DCD. The novements to                                   | Manual payments can be processed if submission missed     |
| Smoking Cessation        | No Claim form, via PCR- The payments to                                   | due to annual leave/sickness etc and this is sent monthly |
|                          | pharmacies are generated when they accurately record the data on the PCR. | to <u>vvonne.colquhoun@lanarkshire.scot.nhs.uk</u>        |
|                          |                                                                           | to <u>wome.colunoun@lanarksmre.scot.mis.uk</u>            |
|                          | PCR entries must be submitted at week 1,                                  |                                                           |
|                          | 4 and 12 but no later than weeks 1, 5 and                                 |                                                           |
|                          | 14 to qualify.                                                            |                                                           |
|                          |                                                                           |                                                           |
| Compliance Aids          | Claim form on NHS Lanarkshire                                             | Claim forms gets sent to                                  |
|                          | Community Pharmacy Website                                                | Lynne.Stewart@lanarkshire.scot.nhs.uk &                   |
|                          |                                                                           | Ewa.Kargul@lanarkshire.scot.nhs.uk                        |
|                          |                                                                           | Cut-off date for submission = End of Month                |
|                          |                                                                           |                                                           |
| MAR Chart Service        | Claim form on NHS Lanarkshire                                             | Gets sent to Lynne.Stewart@lanarkshire.scot.nhs.uk &      |
|                          | Community Pharmacy Website                                                | Ewa.Kargul@lanarkshire.scot.nhs.uk                        |
|                          |                                                                           | Cut-off date for submission = End of Month                |
|                          |                                                                           |                                                           |
| SACT- Prostate Cancer    | No claim form, hospital SATC pharmacy                                     | adele.pessina@lanarkshire.scot.nhs.uk                     |
| Dispensing               | technician will email the pharmacy                                        |                                                           |
|                          | notification and she will arrange payment                                 | Paid annually, same month each year, arranged at set up   |
|                          |                                                                           | Pharmacy do not need to send claim                        |
|                          | adele.pessina@lanarkshire.scot.nhs.uk                                     |                                                           |
| Palliative Care Network  | Claim form on NHS Lanarkshire                                             | Paid quarterly                                            |
|                          | Community Pharmacy Website                                                | Q1 (April - June) Submit end of June                      |
|                          |                                                                           | Q2 (July - Sept) Submit end of Sept                       |
|                          |                                                                           | Q3 (Oct - Dec) Submit end of Dec                          |
|                          |                                                                           | Q4 (Jan - Mar) Submit end of March                        |
|                          |                                                                           | Claim form gets sent to                                   |
|                          |                                                                           | Lynne.Stewart@lanarkshire.scot.nhs.uk &                   |
|                          |                                                                           | Ewa.Kargul@lanarkshire.scot.nhs.uk                        |
|                          |                                                                           |                                                           |
| Pharmacy Champions Claim | Champions given claim form directly                                       | Gets sent to Lynne.Stewart@lanarkshire.scot.nhs.uk &      |
|                          |                                                                           | Ewa.Kargul@lanarkshire.scot.nhs.uk                        |
|                          |                                                                           | lauren.gibson@lanarkshire.scot.nhs.uk                     |
|                          |                                                                           | Cut-off date for submission = End of Month                |
|                          |                                                                           |                                                           |