

## **User Guide for Electronic Claiming Workbook (ECW) for GGC Community Pharmacy Local Claims**

The Community Pharmacy Development Team has moved to an electronic method of claiming in order to reduce paper use, increase our audit trail and allow easier submission. The Team now accepts claims by submission of a completed excel workbook (Electronic Claiming Workbook) which follows the same format as previous paper forms.

Contractors should ensure they hold the most recent copy of the excel document and update your records accordingly.

A copy of the most up to date document will always appear on the front page of the CPDT website: [here](#).

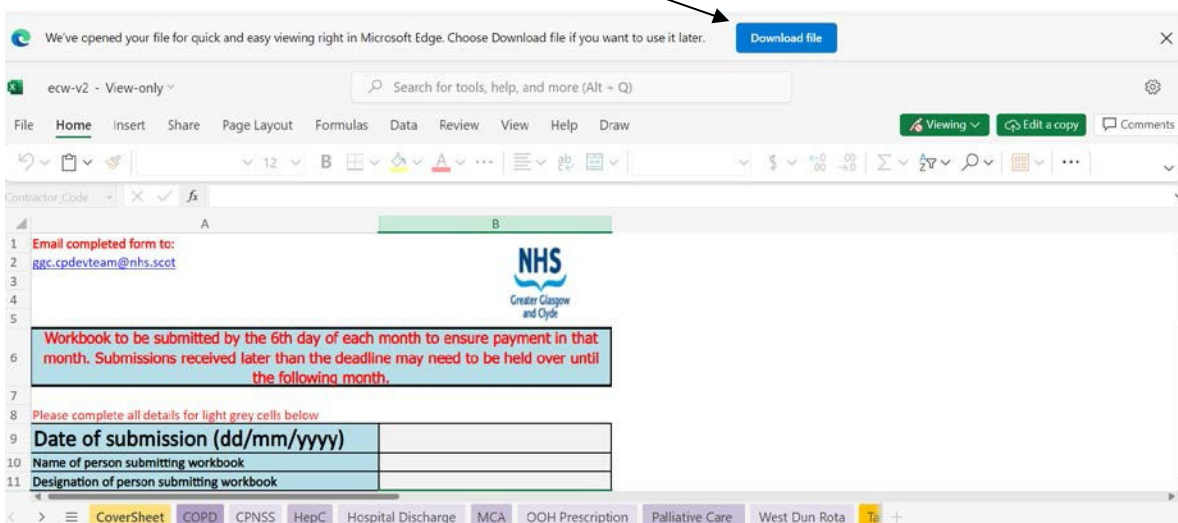
### **Scope**

We have not yet included HSCP specific services, or services which are subject to “test of change” status. You should continue to use the paper claim forms provided for these services until further notice.

### **Opening and Saving a Workbook**

A copy of the most up to date document will always appear on the front page of the CPDT website: [here](#).

1. Open the ECW, and select “download file”



2. Open the downloaded file.
3. Click, File, Save as, and then chose the “download a copy” option.

**Please note that we are unable to accept files sent as a ODS file. Receipt of these type of files will delay processing of any claims as they will need to be returned to the contractor with a request to resubmit in a more suitable format**

## Cover Sheet

The cover sheet shown below can be used to navigate between each claim form. Click on the name of the relevant claim, but only after you have completed all information required on Cover Sheet.

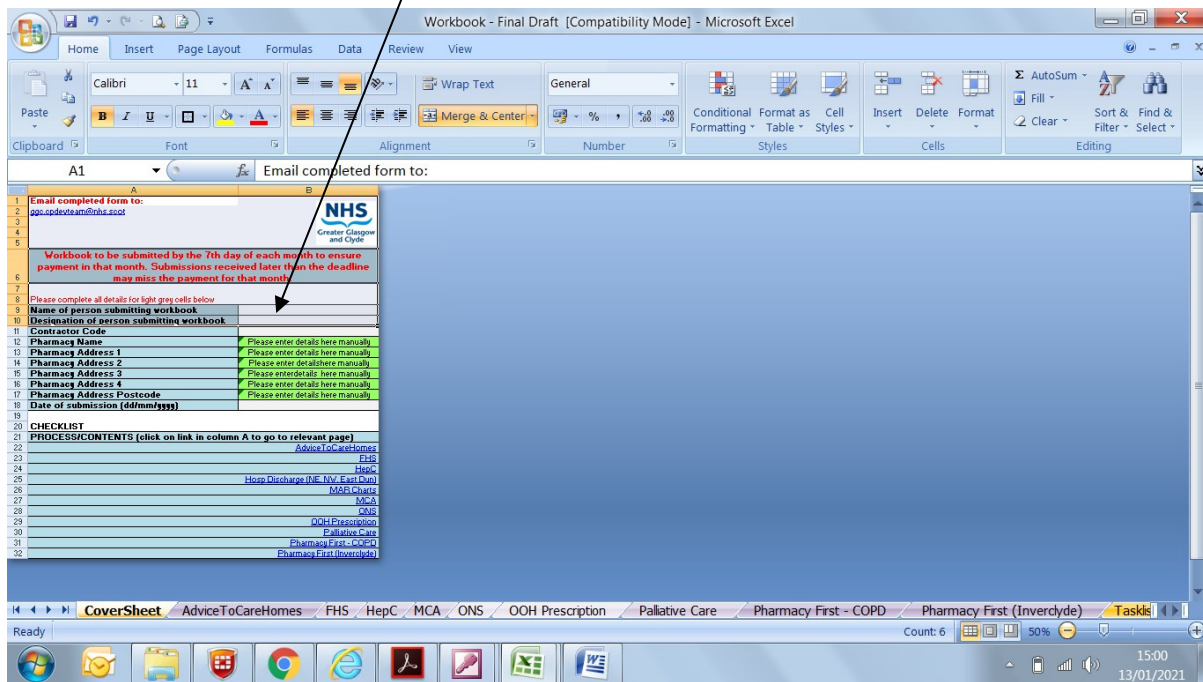
The pharmacy details, once entered in the **grey** area to the top right, will automatically populate all of the claim forms.

## Name/Signature

A name and/or signature is required for completion of each claim form. This is pre populated from information input to the Cover Sheet.

**Any workbooks submitted without this information will be returned to the contractor, and will not be processed for payment.**

The Board can only make payments on receipt of a proactive claim. Including a signature ensures that the claim fulfils this criteria. It also provides confirmation that someone in the pharmacy has taken responsibility for the counter fraud declaration.



## Colour Coding

The colour codes used for the cells within each claim form are highlighted below. The light grey cells may require information, as guided by the information/text within the light blue cells.

	<b>To be completed by entering required information</b>
	<b>Information/guidance</b>
	<b>Populated automatically</b>
	<b>Link back to cover sheet</b>

## Service Tabs

The templated excel workbook covers most service claims with separate tabs for each service.

15	Pharmacy Address 2	Auto Populates
16	Pharmacy Address 3	Auto Populates
17	Pharmacy Address Postcode	Auto Populates
18	Phone Number	Auto Populates

Excel interface showing tabs: CoverSheet, COPD, CPNSS, HepC, OOH Prescription, Palliative Care, MCA, West Dun Rota

Excel service tabs

## Drop Down Lists

Drop down lists appear on several sheets i.e. COPD, CPNSS. Please use these where they appear.

3		
4	Pharmacy Name	Auto Populates
5	Contractor Code	0
6	Date of Submission	00/01/1960
7	Claim Month	▼
8		Aug-2024
9		Sep-2024
10	CHI Number	Registration/Monitoring (please choose from drop down list)
11		Oct-2024
12		Nov-2024
13		Dec-2024
		Jan-2025
		Feb-2025
		Mar-2025

## Task List

**Please do not input any information to this tab. This is for CPDT use only.**

## Submission

Forms should be submitted on a monthly basis to: [ggc.cpdevteam@nhs.scot](mailto:ggc.cpdevteam@nhs.scot). Forms submitted by 6<sup>th</sup> of the month will be processed and payments made in the same month. Forms received after 6<sup>th</sup> might not be processed until the following month.

You should ensure that the subject line of your covering e-mail includes:

- Contractor Code;
- ECW (so that the e-mail follows the internal rule set up); and
- Claiming month

e.g. 1234 – ECW – May 2023

**Please note: Failure to include the relevant information could result in a delay to your payment**

### **Saved Template**

Contractors may wish to save their own copy of the template spreadsheet which has been pre-populated with identifiers. This will greatly reduce associated administration time however please ensure to refer to recent updates which may overwrite previous versions.

### **Multiple Claims**

In the unlikely event that a contractor needs to submit multiple claims, please ensure that separate worksheets are completed for each month required. **Please do not try and add additional tabs to a single worksheet.**

### **Queries/Feedback**

Any queries or feedback regarding the ECW or this User Guide should be directed to: [ggc.cpdevteam@nhs.scot](mailto:ggc.cpdevteam@nhs.scot)

Please ensure you include your Contractor Code in the 'Subject' of the e-mail to ensure a response.

<b>Version</b>	<b>4.</b>
<b>Name/Department of Originator/author:</b>	Community Pharmacy Development Team
<b>Name/Title of responsible Committee/individual:</b>	Community Pharmacy Development Team
<b>Date issued:</b>	11 <sup>th</sup> February 2025
<b>Review date:</b>	01/04/2026
<b>Target audience:</b>	NHSGG&C Community Pharmacy

<b>Version</b>	<b>Date</b>	<b>Control Reason</b>
3	31/01/2025	<ul style="list-style-type: none"> <li>- Removed mention of Hospital Discharge Service;</li> <li>- Included requirement to enter all details on Cover Sheet before navigating to individual claiming sheets;</li> <li>- Updated screenshot of Service Tabs;</li> <li>- Inserted section relating to Drop Down Lists.</li> </ul>
2	25/06/2024	Addition of a signature to the workbook
1	03/05/2024	Addition of section explaining how to open and save the document in the correct format.