



PROGRAM RULES

Clinical Interventions

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Australian Government
Department of Health

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CLINICAL INTERVENTIONS

TABLE OF CONTENTS

| | | |
|----------|-----------------------------------|----------|
| 1 | INTRODUCTION | 1 |
| 2 | BACKGROUND | 1 |
| 3 | ELIGIBILITY CRITERIA | 1 |
| | 3.1 Pharmacy Accreditation | 2 |
| 4 | REGISTRATION | 2 |
| | 4.1 Change of Circumstances..... | 2 |
| 5 | CLAIMS | 3 |
| | 5.1 Eligible Interventions | 3 |
| | 5.2 Data Required | 3 |
| 6 | PAYMENTS | 4 |
| | 6.1 Payment Calculations | 4 |
| 7 | AUDIT REQUIREMENTS | 5 |
| 8 | RESOURCES | 5 |

LIST OF TABLES

| | |
|---------------------------------------------------|----------|
| Table 1-1: Eligible Claiming Periods | 4 |
|---------------------------------------------------|----------|

CLINICAL INTERVENTIONS

1 INTRODUCTION

This document outlines the Program Rules governing the Clinical Interventions (CI) Program. This document must be read in conjunction with the *Pharmacy Programs Administrator General Terms and Conditions* (General Terms) and the *Standard and Guidelines for Pharmacists Performing Clinical Interventions* by the Pharmaceutical Society of Australia (PSA Standards). Definitions in the General Terms apply in these Program Rules.

2 BACKGROUND

A CI is a professional activity undertaken by a Registered Pharmacist directed towards improving Quality Use of Medicines (QUM), which results in a recommendation for a change in a Patient's medication therapy, means of administration or medication-taking behaviour.

A CI must relate to a medicine and must be recorded using the D.O.C.U.M.E.N.T. classification system. It does not include generic medicine substitution, routine prescription-related counselling, provision of emergency supply medicine under state or territory law, Consumer Medicines Information (CMI) provision or professional activities directed towards improving QUM undertaken during Home Medicines Review (HMR), Residential Medication Management Review (RMMR), MedsCheck or Diabetes MedsCheck services. Under the CI Program, incentive payments are made to identify, resolve and document drug-related issues that are identified by a Community Pharmacy. The Program seeks to improve Patient health outcomes and improve Quality Use of Medicines.

The CI Program is funded under the Sixth Community Pharmacy Agreement (6CPA).

3 ELIGIBILITY CRITERIA

To be eligible to become an Approved CI Service Provider and participate in the CI Program, a Pharmacy must:

- a. Be approved to dispense pharmaceutical benefits as part of the Pharmaceutical Benefits Scheme (PBS) defined in Section 90 of the *National Health Act 1953* (Section 90 Pharmacy)
- b. Be accredited by an approved Pharmacy Accreditation Program or be in the process of attaining Accreditation within six months of lodging the application to become registered to participate in the Program
- c. Agree to publicly display and comply with the *Community Pharmacy Service Charter and Customer Service Statement*. A sample Customer Service Statement and a template are available online at www.ppaonline.com.au
- d. Register via the Pharmacy Programs Administrator [Portal](#) and continue to meet the above Eligibility Criteria while participating in the CI Program.

An Approved CI Service Provider must notify the Pharmacy Programs Administrator immediately when it becomes aware of any circumstance, event or fact that may affect the Approved CI Service Provider's eligibility to participate in the CI Program, including where their accreditation status lapses during the claiming period.

Failure to maintain compliance with any or all of the above Eligibility Criteria may result in the Approved CI Service Provider being ineligible to participate in the CI Program.

CLINICAL INTERVENTIONS

3.1 Pharmacy Accreditation

Approved CI Service Providers registered for the CI Program must have a current accreditation status and meet the accreditation requirements of an approved Pharmacy Accreditation Program for the CI Program in order to be eligible to receive ongoing incentive payments.

If an Approved CI Service Provider's accreditation status lapses during the claiming period, the Community Pharmacy will not be eligible to participate in the CI Program or receive incentive payments until reaccreditation occurs.

4 REGISTRATION

To register as an Approved CI Service Provider, a Community Pharmacy must register via the [Portal](#).

An Approved CI Service Provider will not be registered until the Approved CI Service Provider receives email notification from the Pharmacy Programs Administrator confirming that registration has been successful.

4.1 Change of Circumstances

It is the responsibility of the owner/Pharmacist Manager of the Approved CI Service Provider to ensure that the Pharmacy's registration is up to date at all times. Approved CI Service Providers must notify the Pharmacy Programs Administrator within 14 days of the following changes:

- a. Change of ownership
- b. Change of Section 90 approval number.

If the Pharmacy Programs Administrator is not notified of the changes above within 14 days then the following may apply:

- a. Duplicate or multiple claims submitted by Approved CI Service Providers for the same Eligible Claiming Period will be rejected
- b. A delay in payment may occur.

If an Approved CI Service Provider changes ownership the Pharmacy can only submit a single Claim and receive payment under the Section 90 approval number that is current at the time the Claim is submitted.

It is the responsibility of the owners of the Approved CI Service Provider to negotiate the payment claimed as part of the sale of the business. This means that a former and current owner cannot submit separate Claims for portions of the same eligible Claim Period or receive portions of the payment. Claims and payments can only be accepted and paid under the current Section 90 approval number.

If an Approved CI Service Provider changes Section 90 approval number during an eligible Claiming Period, the pharmacy can only submit a single Claim under its current Section 90 approval number. The Claim should include services provided as specified in these Program Rules across the whole eligible Claiming Period.

If an Approved CI Service Provider's registration is not up to date as outlined above, payments may be delayed or rejected.

CLINICAL INTERVENTIONS

5 CLAIMS

5.1 Eligible Interventions

An Approved CI Service Provider is entitled to claim incentive payments four times per year for performing and recording Clinical Interventions using the D.O.C.U.M.E.N.T. classification system in accordance with the PSA Standards. Incentive payments will not be made for interventions delivered under the M.E.N. components of the classification system.

The Approved CI Service Provider must record the following data for each Clinical Intervention delivered under the D.O.C.U.T. components of the classification system.

- a. Date
- b. Registered Pharmacist
- c. Patient's identifier (does not need to be Patient name)
- d. Patient's age range (not specific age)
- e. Patient's gender
- f. Medicines involved
- g. Clinical notes detailing the intervention and any relevant medical history
- h. Classification of the intervention
- i. Recommendations/follow-up actions
- j. Any communications with other health care professionals or the consumer/agent
- k. Any other relevant information.

Note: Only de-identified information is required for audit purposes.

Either an electronic or paper-based system may be used to record CIs. A paper-based template is available in the PSA Standard available at www.ppaonline.com.au

It is the responsibility of the owner/manager of each Approved CI Service Provider to ensure all Pharmacists, performing and recording CIs on behalf of an Approved CI Service Provider, abide by the definition of a CI as detailed in the PSA Standards.

5.2 Data Required

Approved CI Service Providers must provide the total number of CIs recorded under D.O.C.U.T. on their Claim for the eligible Claiming Period. CIs under the M.E.N. components cannot be claimed and should not be included on the Claim. This number is calculated by adding together the number of CIs delivered in the Pharmacy under the D.O.C.U.T. component of the D.O.C.U.M.E.N.T. classification system, during each eligible Claiming Period.

Approved CI Service Providers must submit claims via the [Portal](#).

CLINICAL INTERVENTIONS

Claims must be submitted in accordance with the following time frames:

Table 5-1: Eligible Claiming Periods

| Eligible Claiming Periods | Claiming Period |
|---------------------------|-----------------|
| 1 January to 31 March | 1-14 April |
| 1 April to 30 June | 1-14 July |
| 1 July to 30 September | 1-14 October |
| 1 October to 31 December | 1-14 January |

Note: Claims received by the Pharmacy Programs Administrator after the Claim Due Dates for the corresponding eligible Claiming Period will be rejected.

Amendments to a submitted Claim can be requested by contacting the Pharmacy Programs Administrator on 1800 951 285 or emailing support@ppaonline.com.au. Amendments will not be accepted after the Claim Due Date.

6 PAYMENTS

The Approved CI Service Provider will be eligible for payment following written notification confirming successful registration and subject to meeting the General Terms.

All claims for payment must be supported with the required information. Requests for clarification and/or further substantiation must be met within the requested timeframe. Failure to provide a satisfactory response may lead to rejection of the claim for payment.

If an Approved CI Service Provider fails to comply with the General Terms and/or these Program Rules, clause 5 of the General Terms will apply and the Pharmacy Programs Administrator and the Australian Government may at their discretion pursue debt recovery.

Approved CI Service Providers may not apply additional consumer charges for Clinical Interventions.

6.1 Payment Calculations

The Pharmacy Programs Administrator and the Australian Government will jointly assess the payment amount that the Approved CI Service Provider is entitled to receive based on the number of CI services and Pharmacy size (i.e. prescription volume). The Approved CI Service Provider claimable prescription volume will be sourced from the Department of Human Services.

CI claims will be capped at the rate of 3.5% of prescription volume.

The claimable PBS prescriptions dispensed during the eligible Claiming Period will be counted jointly by the Pharmacy Programs Administrator and the Australian Government across multiple Section 90 approval numbers associated with claiming an Approved CI Service Provider for the corresponding eligible Claiming Period.

If an Approved CI Service Provider meets the Eligibility Criteria outlined in clause 3 for only a portion of a full claiming period, then the Approved CI Service Provider can submit a single Claim showing

CLINICAL INTERVENTIONS

the number of CIs delivered from the first day of the following month after eligibility has been achieved.

Payment for this Program is retrospective and the Approved CI Service Provider must retain evidence for seven years (as specified in clause 7) to substantiate that the Pharmacy met the Program requirements and was accredited under a Pharmacy Accreditation Program when providing the CI services.

7 AUDIT REQUIREMENTS

The Approved CI Service Provider must retain records for seven years from the date of submitting a Claim to substantiate the data contained in the Claim.

Approved CI Service Providers participating in the CI Program will be subject to audits by the Pharmacy Programs Administrator to ensure the Services are provided in accordance with the General Terms and these Program Rules. Eligible Community Pharmacies that do not provide Services in accordance with the General Terms and these Program Rules may no longer be able to participate in the CI Program or be eligible to receive CI Program payments, and repayment may be required. Under section 137.1 of the *Criminal Code Act 1995*, giving false and misleading information is a serious offence.

8 RESOURCES

CI Program resources are available for download [from www.ppaonline.com.au](http://www.ppaonline.com.au).



CONTACT THE SUPPORT CENTRE: 1800 951 285 | support@ppaonline.com.au