

Reimbursement of Prescription Charges for Anti-Tuberculosis Drugs in NHS North East North Cumbria Integrated Care Board – County Durham and Tees Valley Place (Darlington only)

Introduction

Tuberculosis (TB) is a curable airborne infectious disease which can be passed from an infectious person to anyone with whom they are in long-term close contact, such as a family member of a work colleague. Although a course of modern anti-TB drugs is extremely effective they have to be taken for at least six months.

Patients who do not complete a full course of treatment run a high risk of a relapse or developing drug-resistant disease, which is more difficult and slower to cure and therefore much more costly to the NHS.

NHS NENC ICB – County Durham have about 18-20 patients annually to treat for TB. After the first treatment regimen the patients usually go on to two drugs for maintenance therapy. The bulk of prescribing at this stage is done by GPS TB Nursing Service and dispensed at local community pharmacies. This means that under normal circumstances patients would have to pay (unless already exempt from prescription charges).

Patients on low incomes are likely to be entitled to free prescriptions already, but those who are not may see prescription charges as a barrier to seeking or completing treatment.

This service enables pharmacies across NHS NENC ICB – County Durham and Tees Valley Place (Darlington) to provide anti-TB drugs prescribed by the specialist TB nursing service free of charge to patients who would usually be required to pay for prescriptions.

1. Service Description

- 1.1 This service is aimed at ensuring the continued supply of anti-TB medicines, the demand for which may be urgent and/or unpredictable.
- 1.2 The pharmacy will provide information and advice to the user, carer and clinician. They may also refer to specialist centres, support groups or other health and social care professionals where appropriate
- 1.3 Prior to the patient attending the pharmacy, the TB team will telephone the pharmacy to explain the process.
- 1.4 The pharmacy will dispense the medication prescribed and will not charge a prescription fee for the anti-TB medication items.
- 1.5 The pharmacy will invoice the Commissioners for the relevant prescription charges by completing the invoice form included in appendix 1.
- 1.6 The TB team and community pharmacy will liaise as necessary regarding the continued supply of anti-TB medication.
- 1.7 This scheme only applies to those patients diagnosed with TB and only applies to anti-TB drugs prescribed by the TB team. It does not apply to any other medicines that the patient may be prescribed. If in doubt, please contact the TB team.

2. Aims and Intended Service Outcomes

- 2.1 To ensure access to essential anti-TB drugs medicines by removing the prescription charge associated with these medicines.
- 2.2 To support people, carers and clinicians by providing them with up to date information and advice, and referral where appropriate.

3. Service Outline

- 3.1 This scheme only applies to those patients diagnosed with TB and only applies to anti-TB drugs prescribed by the TB team. It does not apply to any other medicines that the patient may be prescribed. If in doubt, please contact the TB team.
- 3.2 The pharmacy contractor has a duty to ensure that pharmacists and staff involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service.
- 3.3 The pharmacy should maintain appropriate records to ensure effective on going service delivery and audit.
- 3.4 Claims for the prescription charges under the scheme must be via the claim form within appendix 1.
- 3.5 The ICB agrees to reimburse the dispensing pharmacy for the standard prescription charge that has not been collected. This will be those set out by the Department of Health.
- 3.6 Please submit all claims via email to necsu.minorailments@nhs.net .

Appendix 1 – Community Pharmacy Invoice for Reimbursement of Anti-TB Medication Prescription Charges

Please do not include copies of prescriptions or patient identifiable information with invoices.

Please return this form via email to necsu.minorailments@nhs.net

Name of Pharmacy	
Pharmacy address:	
Information provided by (Print Name)	

Details of goods/ service provided

Number of prescription charges	NHS prescription charge	Total claim

Pharmacy account details

Sort code	Account number	Bank address

Pharmacist Signature	
Date	