Northern Ireland Drug Tariff

Contents

General Notes
Zero Discount List

Part I	List of Drugs and Preparations with Tariff Prices
Part I (b)	Everyday Health Conditions
Part II	Approved List of Chemical Reagents
Part III	List of Appliances
Part III (b)	Bandages
Part III (c)	Catheters
Part III (d)	Dressings / Wound Management Dressings
Part III (e)	Lymphoedema Garments
Part III (f)	Tracheostomy & Laryngectomy
Part IV	Domiciliary Oxygen Therapy Service
Part V	Containers
Part VI	Net Ingredient Cost Scale for Chemist Contractors
Part VII	List of Drugs and Threshold above, which an additional fee will be, paid
Part VIII	List of Technical Specifications
Part IX	Drugs Which May Be Ordered By Dental Practitioners, Nurses or Independent Prescribers
Part X	Borderline Substances
Part XI (a)	Drugs and other substances not to be prescribed under Health Service Pharmaceutical Services
Part XI (b)	Drugs to be prescribed in certain circumstances under health service pharmaceutical services

Health And Personal Social Services - Northern Ireland
Drug Tariff

General Notes

Standards of drugs and appliances

1. All drugs, preparations and appliances supplied by chemists must, where a standard or formula is specified in the British Pharmacopoeia, the British Pharmaceutical Codex, the British National Formulary, or the Drug Tariff, conform to the standard of formula so specified, and in any other case must be of a grade or quality not lower than the grade or quality ordinarily used for medical purposes. All appliances supplied by chemists must, where a specification is included in the Drug Tariff, conform to that specification or be of a grade or quality not inferior thereto, and in any case must conform to the ordinarily recognised standards of good quality.

Scheduled Drug (see also Part XI)

2. The Health and Personal Social Services (General Medical Services Contracts) (Prescription of Drugs Etc) Regulations (Northern Ireland) 2004 make provision as to the drugs, medicines or other substance that may be ordered for patients in the provision of medical services under a general medical services contract within the meaning of Article 57 of the Health and Personal Social Services (Northern Ireland) Order 1972.

   Schedule 1 to the Regulations lists the drugs and substances that are **not** to be prescribed under a general medical services contract. Schedule 2 lists the drugs, medicines and other substances that **may be ordered** under a general medical services contract **only in certain circumstances** and sets out those circumstances.

   Chemist contractors are under no obligation to supply a scheduled drug that may be ordered erroneously on a prescription form by a doctor or dentist, or on a stock order form by a dentist, and can have no claim against the BSO in respect thereof.

List Prices

3. References to the list prices shall be construed as references to net cost prices in the price lists of such manufacturing or wholesale firms as may be selected by the Department after consultation with the Local Pharmaceutical Committee.

Containers (see also Part V)

4. Paragraph 16 of the Terms of Service [Schedule 2 to the Health and Personal Social Services (Pharmaceutical Services) Regulations (Northern Ireland) 1997] requires the chemist to supply all drugs in suitable containers, which include a 5ml spoon where appropriate.

Questions

5. Any questions arising as to the price or dispensing fee to be allowed in a particular case shall be determined by the Department after consultation with the Pharmaceutical Contractor's Committee.

Prices Of Drugs And Preparations Included In Part I And Chemical Reagents Included In Part II

Tariff Prices

6. The tariff prices are generally net cost prices calculated from the agreed wholesale price lists.

Concessionary Prices

6a. In Northern Ireland, the policy is that all concessionary prices which are set by the Department of Health and Social Care are applied in Northern Ireland. A definition of this process is detailed at NHS Electronic Drug Tariff (nhsbsa.nhs.uk).
Since April 2024, this process has included a retrospective top-up payment; this will also apply in Northern Ireland and details of the products and payment schedules are available on the BSO website at Concessionary Prices - Business Services Organisation (BSO) Website (hscni.net)

Payment for Water

7. Payment for water will be made only (a) where purified water has been prescribed, or (b) where its use is implied, e.g., where the Business Services Organisation (hereinafter called "the BSO") after consultation with the Department is satisfied that the water ordinarily available is unsuitable for dispensing purposes and purified water is used.

Revision of Prices

8. The prices of drugs and preparations included in Part I and Chemical Reagents included in Part II will be revised monthly in accordance with current list prices.

Pricing of Other Drugs and Preparations

9. Drugs and preparations not included in Parts I II and IX and not being scheduled drugs will normally be priced on the basis of the most cost-effective price rate derived from list prices for the pack sizes generally available to chemist contractors. Where a chemist contractor's throughput of drugs and preparations does not justify supply from the pack size from which the most cost-effective price rate is derived, the chemist contractor may endorse the prescription with the pack size from which the supply is made. Payment will be based on the list price for the pack size so endorsed but in any doubtful case the BSO will, before pricing, satisfy itself that the pack sizes used were reasonable in relation to the contractor's throughput of drugs and preparations. If the BSO is not satisfied that the pack sizes used were reasonable - or if the prescriptions are incompletely or incorrectly coded by the chemist contractor, the standard price convention set out above will be applied.

Oncost Allowances for Chemist Contractors

10. Oncost allowances payable on gross or net ingredient cost are detailed below. In special circumstances an additional oncost is payable for trusses and elastic hosiery.

i. HS prescriptions for oxygen and oxygen therapy equipment

The oncost allowance payable for these items is 10%.

ii. Stock orders

The oncost allowance payable for items ordered by doctors on a stock order form is 17½% of the net ingredient cost of these items calculated in accordance with paragraph 9.

iii. HS prescriptions for trusses and elastic hosiery

An additional oncost allowance of 15% based on the gross ingredient cost is payable when the measuring and fitting of trusses or elastic hosiery has been carried out by a chemist and the prescription has been endorsed "measured and fitted" or has been coded as such according to the Prescription Code issued by the BSO.

Appliances

11. Part III contains the list of appliances that may be ordered by medical practitioners on the Medical List.

12. Appliances not included in Part III may not be ordered and suppliers of appliances are under no obligation to supply any such appliance and can have no claim against the BSO in that respect thereof.

13. Part III gives the specifications and tariff prices of such appliances. All appliances must conform to the specifications and sizes shown in Part III.

Prices of Appliances

14. Prescriptions for elastic hosiery and trusses supplied by chemist contractors will be reckoned along with those for drugs and will consequently qualify for the appropriate oncost allowance as set out in paragraph 10. Where measuring and fitting have been carried out, an appropriate fitting oncost (15%) will be paid by the BSO, where claimed.
The prices of other appliances given in Part III will be the prices so stated (subject to alteration monthly, in accordance with variations in list prices). Where a price is not shown in the tariff for an appliance the price will be the list price, or in the case of appliances not included in a price list, the invoiced wholesale net cost price. Provided that if in any case the Department approves a special price different from that ascertained as aforesaid, such price shall apply in lieu thereof.

Payment to Appliance Contractors

15. Suppliers of appliances only will receive the cost of the appliance as detailed in paragraph 14 above, 25% oncost allowance and a 15% measuring and fitting fee where appropriate and where claimed. No dispensing fee is payable in respect of the supply of an appliance.

Dispensing Fees For Chemist Contractors

16. In accordance with the terms of Regulation 9(2) of the Pharmaceutical Services Regulations (NI) 1997 (Standards of, and payments for drugs and appliances), and, in relation to dispensing or other fees payable in respect of the supply of drugs and appliances and of the provision of supplemental services and of additional professional services or any other fee, allowance or other remuneration in respect of the provision of pharmaceutical services by chemists, the determining authority is the Department of Health.

17. In addition to the payment of ingredient costs, the oncost allowances (see para 10), and the payment for coding prescriptions (see para 18), dispensing fees will be paid at the rate shown in the table below. These dispensing fees are not payable on stock orders or on prescriptions for oxygen or oxygen equipment.

Fee per Prescription

(1). All medicaments (including proprietaries) not requiring extemporaneous preparation and all liquids for internal and external use prepared by addition of water or by simple dilution for extemporaneous dispensing £1.51

(2). All medicaments requiring extemporaneous dispensing:

a. All liquids for internal and external use prepared to a special formula, e.g.mixtures, lotions, nasal drops £4.53

b. i. Ointments, creams, pastes prepared by dilution or a mixture of standard or proprietary ointments, creams or pastes

Quantity (a) not exceeding 200g £3.79
(b) 201g-500g £7.56
(c) over 500g - per 500g or part thereof £7.56

ii. Ointments, creams, pastes prepared to a special formula

Quantity (a) not exceeding 200g £7.73
(b) 201g-500g £15.49
(c) over 500g - per 500g or part thereof £15.49

c. Special formula bulk powders £7.56

d. Individual powders, capsules, etc.:
(a) first 10 ..... £3.10
(b) per powder, capsule etc. thereafter £0.32

e. Liquids prepared by aseptic technique, e.g. eye drops £13.78

f. Liquids prepared by a BP sterilisation process £15.39

Dispensing Fees For Chemist Contractors cont.

(3). Appliances:

a. All appliances except for ostomy / urinary equipment..... £0.20
b. Ostomy / urinary equipment..... £1.65
c. Wound Management Formulation £1.11

(4). Additional fee for dispensing prescriptions for:
a. Schedule 2 Controlled Drugs..... £1.74
b. Schedule 3 Controlled Drugs..... £0.54

(5). Dispensing fee related to period of treatment
Supplementary fee payable when quantity of preparation prescribed and dispensed exceeds the threshold listed in Part VII for that preparation..... £0.63

(6) Instalment Dispensing Fee £1.40

NB: This supplementary fee may be claimed only for preparations listed in Part VII of the Tariff where the quantity of the preparation prescribed and dispensed exceeds the threshold listed for that preparation.

(7) Everyday Health Conditions Consultation Fee

Consultation fees for the Everyday Health Conditions Scheme are paid under a tiered structure. The payment due within the structure is based on the number of cumulative consultation fees from 1 January 2024.

Payment Due	Lower Limit	Upper Limit
£8.50	1	500
£7.50	501	1000
£6.50	1001	2000
£5.00	2001	2950
£0.00	2951	

For all prescriptions dispensed extemporaneously, ingredient costs will be reimbursed in accordance with the provisions of the Tariff and the relevant dispensing fee at paragraph 2 above will be paid. Where a chemist contractor for some reason cannot dispense the prescription extemporaneously or elects to have it made up as a "special", the chemist contractor must provide to the BSO the reasons why a "special" was necessary. In any doubtful cases the BSO, before pricing, may refer matters to the Pharmaceutical Committee of the BSO to ascertain if the additional costs involved through use of a "special" were necessarily incurred and were reasonable. Only in circumstances where the Pharmaceutical Committee is satisfied that the use of "special" was necessary, will the invoiced "special" price be reimbursed and the dispensing fee at paragraph 1 above be paid. In other cases, payment of ingredient costs and dispensing fees will be made on the basis that the prescription had been dispensed extemporaneously.

Chemist contractors are required to endorse CD prescriptions for drugs included in Schedule 2 and 3 to the Misuse of Drugs (Northern Ireland) Regulations 1986 (as amended) with the letters "CD" unless a Code has been assigned in The Prescription Code issued by the BSO. These prescriptions should be coded as far as possible and included in the appropriate section of the prescription bundle when submitting the forms to the BSO. Provided these requirements are met the additional fee at paragraph 4 above will be paid.

Serious Shortage Protocol

Reimbursement for any product supplied under a Serious Shortage Protocol (SSP) will be as if the product had been dispensed against a prescription. The prescription should be endorsed with the annotation “Supply in line with SSP [Insert number]” to indicate that a supply was made in line with an SSP and also any other usual endorsements as appropriate for the product. Details on necessary endorsements will also be detailed on the BSO website (www.hscbusiness.hscni.net/services/3063.htm). Contractors should submit their prescriptions that have an SSP endorsement at the top of their amended bundle, with the second submission clearly separated from other prescriptions in the amended bundle. The number of prescriptions submitted with a SSP endorsement should be noted at the bottom of the second submission (HS30).

Payment For Coding Prescriptions

18. For the purpose of payment prescriptions should be coded and, where necessary, endorsed as indicated in the Prescription Code issued by the BSO.
An allowance at the rate of 4.43p per prescription (including stock orders and prescriptions for oxygen gas) is payable to chemists for the work of coding prescriptions and payment will be made by the BSO in respect of prescriptions furnished by a chemist to the BSO each month. If however it is found that the standard of accuracy of coding for the month for which the allowance has been paid was not at least 95% and that within the 12 months prior to the month for which the allowance was paid the chemist had on two or more occasions been notified that his standard of accuracy of coding had fallen below 95% recovery of the allowance for that month will be effected by deduction from subsequent payments due by the BSO to the chemist.

Urgent Prescriptions

19. Urgent fees may be paid on prescriptions (including stock orders and those for oxygen and oxygen equipment) for which the chemist is required to re-open his pharmacy outside both contracted hours of service and agreed rota opening hours.

a. prescriptions endorsed "Urgent" by prescriber.

The following fees may be claimed: **Fee per call out**

i. Prescriptions dispensed between the time the premises close for dispensing and 11.00pm on days other than Sundays and Public Holidays £30.00
ii. Prescriptions dispensed between 11.00pm and the time the premises open for dispensing on days other than Sundays and Public Holidays £50.00
iii. Prescriptions dispensed at all eligible hours on Sundays and Public Holidays . £50.00

The prescription forms must be endorsed by the pharmacist with the hour and date of dispensing.

b. Other prescriptions dispensed urgently.

Where the prescription form has NOT been endorsed "Urgent" by the prescriber but where, in order to meet the urgent needs of the patient, the prescription has been dispensed urgently between 11.00pm and 8.30am, or on Sundays and Public Holidays, the urgent fee of £50.00 may be claimed provided that: -

i. a. In the case of prescriptions dispensed between 11.00pm and midnight, the prescription was dispensed on the day it was written; or
b. In the case of prescriptions dispensed between midnight and 8.30am, the prescription was dispensed on the day or on the day following that on which it was written.

ii. The prescription form is endorsed "Dispensed urgently at..... p.m./a.m. on .....(date)" by the pharmacist and is signed by the patient or his representative.

Broken Bulk

20. Payment for broken bulk can be claimed in respect of:

i. Drugs and preparations not listed in Part II; and
ii. Incontinence and Ostomy appliances - Part III

When in relation to i and ii, such drugs and appliances are prescribed in a quantity other than the quantity stated in Part III or when, in relation to i, such drugs and preparations are prescribed in a quantity other than the minimum quantity the manufacturer or wholesaler is prepared to supply and when, in relation to I or ii, the chemist contractor would not expect to be able readily to dispense the remainder, payment may be made additionally for the remainder in each case subject to the discretion of the BSO in any doubtful cases. Broken bulk should be claimed by endorsing the prescription and indicating the date of dispensing. **Subsequent prescriptions for the same drug preparation or appliance dispensed within 6 months will be taken to have been dispensed from the remainder until it has been used and such subsequent prescriptions should not be coded but must be endorsed N/C to indicate that no claim is being made for the ingredients.**

Instalment Dispensing

21a. Instalment dispensing is the supply, by a pharmacist, of part of the total quantity of a prescription-only-medicine, at set intervals (e.g. daily, weekly, twice-weekly) as requested in writing by the GP or other authorised prescriber. Instalment dispensing is an “exception” facility for use where the prescriber considers that it is essential to protect the well-being of the patient (to prevent abuse or misuse of specific drugs as defined in paragraph 21b) that instalments of the drugs prescribed should be supplied to the patient at stated intervals. The prescriber may endorse the prescription to that effect in those circumstances. It must be clearly indicated on the prescription which item(s) require instalment dispensing and which are for normal dispensing. Prescribers should exercise caution with computer-generated and repeat prescriptions.

21b. The drugs which may be prescribed in instalments will normally be categorised as:
Analgesics including opioids
Antidepressants
Antiepileptics including gabapentinoids
Antipsychotics
Barbiturates
Benzodiazepines
CNS depressants
Sedative antihistamines
Skeletal muscle relaxants
Stimulants including drugs to treat ADHD
Triptans
Z drugs

Note: this list may change as new drugs become available or others are discontinued.

The prescriber may, in exceptional circumstances, prescribe other medicines in instalments if essential to protect patient safety.

21c. Where a prescription item is endorsed by the prescriber as requiring instalment dispensing, the pharmacist may dispense doses for the patient to take away when the pharmacy is closed.

21d. Instalment dispensing fees are not payable in respect of patients in care homes or in other settings where staff administer medicines to patients.

Out Of Pocket Expenses

22. Where additional expenses have been incurred in obtaining from a manufacturer or wholesaler supplies of a drug, chemical reagent or appliance (other than those items for which prices are given in Parts I Category A and M, II and III of the Tariff), which the chemist or appliance supplier does not frequently require to provide, or where out of pocket expenses have been incurred in obtaining oxygen specially for supply against a prescription, payment of the amount incurred will be made if the contractor submits a claim giving details to the BSO with the appropriate prescription form and the BSO is satisfied that the additional expenses were necessarily incurred and were reasonable.

Out Of Hours Services

23. Payments for out of hours services is determined by the Department of Health.

Grants Payable To Employers Of Foundation Training Year (FTY) students

24. A grant of £29,954 per annum is payable to chemists who provide foundation year training needed to pharmacy graduates for admission to the Pharmaceutical Society of Northern Ireland's Register of Pharmaceutical Chemists. The grant includes a protected employer allocation of £5,500 per foundation training year placement to cover training and employer on-costs associated with each placement. The remainder of the grant is for the provision of a salary of £24,454 for each foundation year trainee.
Chemists who have provided foundation year training in line with the regulatory requirements of the Pharmaceutical Society of Northern Ireland can claim payment from the BSO on a quarterly, six monthly or annual basis, or in cases where the training period was shortened by unavoidable circumstances at the end of the actual training in which case a pro-rata grant will be calculated and paid.

Drugs Which May Be Ordered By Dental Practitioners, Nurses or Independent Prescribers

25. (i) Dental practitioners on the Dental List may order any of the drugs listed in Part IX (a). Drugs not included in this list may not be ordered by dental practitioners.
(ii) District Nurses and Health Visitor prescribers who have completed the necessary training may only prescribe those drugs and appliances listed in Part IX (b). Drugs and appliances not listed in this list may not be prescribed by nurses.
(iii) Nurse Independent Prescribers and Pharmacist Independent Prescribers are able to prescribe any licensed medicine for any medical condition.
(iv) Optometrist Independent Prescribers can prescribe any licensed medicine for ocular conditions affecting the eye and surrounding tissue, but cannot prescribe any controlled drug independently.
(v) Physiotherapist Independent Prescribers can prescribe any licensed medicine for any condition within their competence within the overarching framework of human movement, performance and function. With effect from 15 November 2019 this includes specified controlled drugs. For details see Part IX (c).
(vi) Podiatrist Independent Prescribers can prescribe any licensed medicine within their competence and relevant to the treatment of disorders affecting the foot, ankle and associated structures. With effect from 15 November 2019 this includes specified controlled drugs. For details see Part IX (c).

Chemists are under no obligation to supply any such drugs or appliances not in these lists and can have no claim against the BSO in that respect thereof.

Expensive Prescription Fee

26. A fee equivalent to 2% of the ingredient cost before discount will be payable on all prescriptions over £100.

Payment For Additional Professional Services

27. Contractors who satisfy certain criteria can apply to the Department of Health for a payment of £2,272.25 in respect of additional professional services. The qualifying criteria are as follows:

i. the pharmacy must have had passed for payment 1300 prescriptions or more in the relevant month;
ii. the pharmacy must have produced a practice leaflet;
iii. the pharmacy must display up to a maximum of 8 health promotion leaflets. Contractors may display additional health promotion material if they wish, but are not required to do so to qualify for payment;
iv. the contractor must, subject to the conditions of paragraph 30, keep patient medication records.

Graduated Transitional Payment

28. Contractors who have passed for payment between 800 and 1299 prescriptions in the relevant month shall receive a graduated transitional payment rising from £1,136.13 a month at 800 prescriptions to £2,269.98 at 1299 prescriptions.

Essential Small Pharmacy Scheme

Criteria

29.1 Those pharmacies that dispense less than 1300 prescriptions per month and are more than 1 kilometre from the next nearest pharmacy, by the route most convenient to the public, will qualify for inclusion in the scheme.

29.2 Contractors will also be required to meet the qualifying conditions for the additional professional services payment, other than, of course, the volume threshold.

Payment

29.3 The rate of payment shall be £1.51 for each prescription by which the number actually dispensed per month falls short of 1300 subject to a maximum of £1,057.00 (700 x £1.51). Payment will be calculated monthly by the BSO.

29.4 Part-time essential small pharmacies will qualify for a proportion of the payment based on their hours of opening. The proportions shall be as follows: -

Pharmacy open	
up to 6 hours per week	60%
between 6 hours and up to 12 hours per week	70%
between 12 hours and up to and including 18 hours per week	80%

Essential Small Pharmacy Scheme cont.

Professional Allowance

29.5 Full rate professional allowance will be payable to full time essential small pharmacies without the need to dispense 1300 prescriptions, provided that the other qualifying conditions are met.

29.6 Part-time essential small pharmacies will receive a proportion of the full professional allowance calculated as above.

Applications

29.7 Contractors shall apply for payment by completing the appropriate application form and forwarding it to the Department of Health.

29.8 The Department of Health, within 4 weeks of receipt of an application, shall in respect of each pharmacy: -

(1) verify the distance from the next pharmacy, the normal hours of service provided, and the number of prescriptions dispensed. To determine qualification the number of prescriptions per month will be based on the number dispensed in the 12 months immediately preceding the application. Thereafter, payment will be based on the number actually dispensed each month;

(2) verify whether the qualifying conditions, other than volume, for receipt of the payment for additional professional services are met;

(3) notify the CPNI by sending a photocopy of side 1 of the application form. Side 2 should under no circumstances be sent, as it is important that the number of prescriptions dispensed by an applicant is not divulged;

(4) decide whether the pharmacy can be included in the scheme;

(5) enter the name of each successful applicant on an essential small pharmacy register;

(6) advise the BSO of each successful applicant and ask them to make appropriate monthly payments;

(7) inform without delay any applicant who has not been successful, setting out the reason why.

Claim forms should be retained for 6 years after the date of decision.

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Payments

30.7 The rates and frequency of payment will be determined by the Department of Health.

Patient Medication Records Scheme

31.1. These arrangements, which from 1 April 1996 formed one of the criteria for the receipt of the allowance for additional professional services, cover the keeping of records of medicines and advice supplied patients who are on long-term medication, and who are in one of the following two groups:

(a) men and women aged 60 or over;

(b) other patients who, in the opinion of the pharmacist, may have difficulty in understanding the nature and dosage of the medicine or drugs supplied, and the times at which they are to be taken.

31.2 Each record should contain the patient's name, address and date of birth, with information on the medicines supplied i.e. product, dosage, strength, presentation, quantity and date of dispensing; and, if on the prescription, the GP reference.

31.3 Contractors will be responsible for registration under, and compliance with, the Data Protection Act. Contractors are advised to ensure that they list the Department of Health as a body to whom the data they hold may be disclosed.

31.4 Contractors must undertake that the pharmacist(s) they employ or use to provide the service will comply with any necessary education/training requirements, as determined or approved by the Committee for Post Qualification Education and Training.

31.5 Contractor chemists must, within 12 months of being awarded a payment for additional professional services, be able to demonstrate that they satisfy the education and training requirements and are providing patient medication records for a minimum of 50 persons from the groups defined in paragraph 31.1. To remain eligible these criteria must continue to be maintained.

31.6 Records maintained in connection with the residential homes scheme are not reckonable under this scheme.

31.7 From 1 April 1996 payments were subsumed within the allowance for additional professional services.

31.8 Under the terms of the Health and Personal Social Services (Pharmaceutical Services) Regulations (Northern Ireland) 1997 (as amended),the Department of Health have a right of access to the records maintained by the contractor for the purposes of this scheme.

Additional Notes

Rectified Spirit

32. i. Where Alcohol (i.e. 95%) or Rectified Spirit, or any other of the Dilute Alcohols is prescribed alone or as an ingredient in a medicament for external application, it should be replaced by Industrial Methylated Spirit unless the prescriber has indicated to the contrary (e.g. by the use of the letters "NA", meaning "no alternative"). In the absence of such indication, payment will be made for the supply of Industrial Methylated Spirit.

ii. Where Alcohol (i.e. 95%) or Rectified Spirit, or any other of the Dilute Alcohols is prescribed as an ingredient of a medicine for internal use and where the chemist does not claim a rebate from the Customs and Excise, he must endorse the prescription "Rebate not claimed" when the price of the duty paid alcohol will be allowed.

Oxygen Apparatus

33. The rates of payment of professional fees for the provision of oxygen therapy equipment is determined by the Department of Health.

Reward Scheme - Fraudulent Prescription Forms

34. Payments to chemists who claim a payment under regulation 10A(1) of the Health and Personal Social Services (Pharmaceutical Services) Regulations (Northern Ireland) 1997, as amended.

The Scheme allows chemists to claim a financial reward where they have identified a fraudulent prescription form, and thereby prevented fraud. A reward is payable where there is an identified saving for the Health Service and the conditions for one or both types of reward has been met.

The scheme allows the BSO to make reward payments on behalf of the Department of Health on prescription forms submitted with claims

The Basic Reward

Claims made where the chemist has not provided the drugs, medicines, or listed appliances specified on the fraudulent prescription form.

The chemist will be eligible for a payment of 10% of the basic Health Service price of the items ordered on the fraudulent prescription form, or £10, whichever is the greater, where all the conditions for payment are met.

The conditions for payment are:

i. the drugs, medicines, or listed appliances specified on the fraudulent prescription form have **not** been provided, and the Department of Health was immediately informed, in accordance with regulation 10A(1)(a);

ii. a claim is made by returning to the BSO a duly completed claim form, provided by the BSO, within 10 days of the prescription form having been presented;

iii. the form presented as a prescription form was not a genuine order for the person named on the form; an order would not be a genuine order if, for example, it had been stolen or counterfeited and not signed by an authorised prescriber; or had been altered otherwise than by the authorised prescriber by whom it was issued.

The Bonus Reward
Where the chemist has <u>either</u> not provided the drugs, medicines, or listed appliances specified on the fraudulent prescription form presented; <u>or</u> where the chemist has provided the drugs, medicines, or listed appliances specified, but subsequently came to have reason to believe that the prescription was not genuine

The chemist will be eligible for a payment of 5% of savings resulting from the information he provides, or £10,000, whichever is the less, where the conditions for payment are met.
The conditions for payment are:

i. the Department of Health was immediately informed, in accordance with regulation 10(A)(1)(a), or informed within 14 days of the prescription being presented to the chemist, in accordance with regulation 10A(1)(b) as appropriate;

ii. a claim is made by returning to the BSO a duly completed claim form, provided by the BSO, within 24 days of the form having been presented;

Reward Scheme - Fraudulent Prescription Forms cont

iii. the form presented as a prescription form was not a genuine order for the person named on the form; an order would not be a genuine order if, for example, it had been stolen or counterfeited and not signed by an authorised prescriber; or had been altered otherwise than by the authorised prescriber by whom it was issued.

iv. the BSO consider that the information on the claim form has contributed to the detection and prevention of a fraud, or the recovery for the Health Service of sums lost through a fraud, other than the cost of the drugs or listed appliances ordered on the fraudulent prescription form which is the subject of the claim; to satisfy this condition, the BSO must consider that at least one of the following criteria is fulfilled:

- the fraud would not have been detected or stopped without the information provided on the claim
- the fraud would not have been detected until a later date, or would not have been stopped until a later date, without the information provided on the claim
- the information provided on the claim was cited as evidence in criminal or civil proceedings; this is regardless of the outcome of those proceedings, provided that condition (v) below is met

v. the BSO considers that the fraud, about which the claim provided information, has been stopped subsequent to the claim being received.

The BSO will estimate savings resulting from the information provided, by the addition of (a) and (b) as follows:

(a) losses prevented will be calculated by reference to an estimate of whichever is the greater of:

- losses in the 12 months up to the stopping of the fraud, or
- losses in the financial year previous to the stopping of the fraud, or
- an annual rate of loss over an average of up to 5 previous financial years before the stopping of the fraud, if the data are available.

(b) if previous losses to the Health Service are recovered, whether or not by civil proceedings, the total sum recovered.

The level of savings will be agreed with the Policy and Accounting Unit of the Health and Social Services Executive.

If a number of claims, each of which fully meets the conditions for payment, lead to the prevention or detection of one fraud, or the recovery for the Health Service of sums lost through one fraud, a Bonus Reward of 5% of the savings or £20,000, whichever is the smaller, in total may be shared between the claims. The BSO will decide the shares for each claim according to their contributions to the saving for the Health Service, or, if this cannot be reasonably estimated, the shares will be allocated equally to each claim meeting the conditions for payment.

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