Presentation to Pharmaceutical Managers Institute

Primary Care Reimbursement Service / National Medical Card Unit
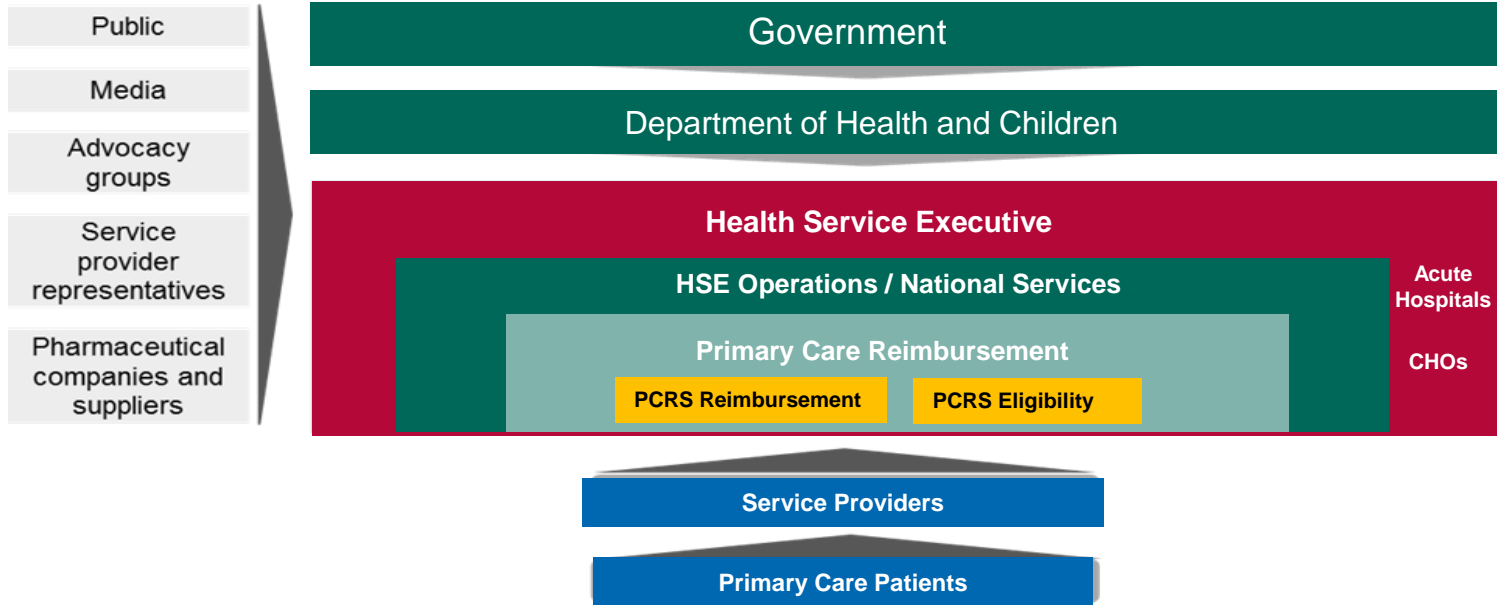
Anne Marie Hoey
Carmel Burke
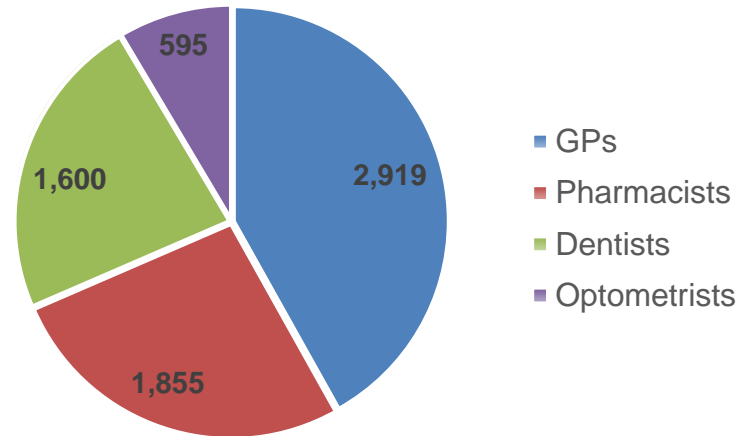
28th June 2018

Information and Background

PCRS's position in the Health Sector

Public

Media

Advocacy groups

Service provider representatives

Pharmaceutical companies and suppliers

Government

Department of Health and Children

Health Service Executive

HSE Operations / National Services

Acute Hospitals

Primary Care Reimbursement

CHOs

PCRS Reimbursement	PCRS Eligibility

Service Providers

Primary Care Patients

About PCRS:

- ➢ PCRS reimburses primary care contractors - GPs, Dentists, Pharmacists, Optometrists and other professionals - for the provision of free or reduced-cost health services to the public

- ➢ PCRS is responsible for the administration of the High Tech Arrangement, and related spend of €637m per annum.

- ➢ PCRS compiles data, statistics and trend analyses which are provided to other areas within the HSE, the Government, customers, stakeholders and to members of the public.

Contractor Agreements as of 1st April 2018

Pie chart values:
- GPs: 2,919
- Pharmacists: 1,855
- Dentists: 1,600
- Optometrists: 595

Legend:
- ■ GPs
- ■ Pharmacists
- ■ Dentists
- ■ Optometrists

In 2017 we made payments of €2.565bn in respect of services provided to 3.6m people registered for Community Health Services

**In 2018 our budget is €2.582bn
or 17.9% of the Health Budget**

Eligibility

National Medical Card Unit

Primary Care Reimbursement Service / National Medical Card Unit

Eligibility

MEDICAL CARD

HSE Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

NAME

GMS NUMBER

PPSN   GENDER   VALID TO   DOB

DOCTOR NAME   PANEL No. TYPE

➢ Assess eligibility for Primary Care Schemes

➢ National Operational Responsibility for all National Primary Care Community Schemes including Medical Card Scheme, GP Visit Card Scheme, Drugs Payment Scheme, Long Term Illness Scheme, Primary Childhood Immunisation, High Tech Drugs Arrangement, etc.

➢ Provide Services for 3.6m (75%) of the Population

➢ 1,587,447 Medical Card holders

➢ 496,583 GP Visit Card holders

GP Visit Card
Under 6s
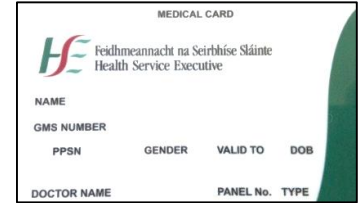
Reimbursement

Reimbursement

➢ Payments to approx. 7,000 Primary Care Contractors

➢ Reimburse GPs, Pharmacists, Dentists and Optometrists for services provided

➢ Reimburse suppliers for High Tech Medications under the High Tech Arrangement

➢ Reimburse acute hospitals for certain drugs including Oncology, MS, Hep.C

➢ 80m prescription items reimbursed in 2017
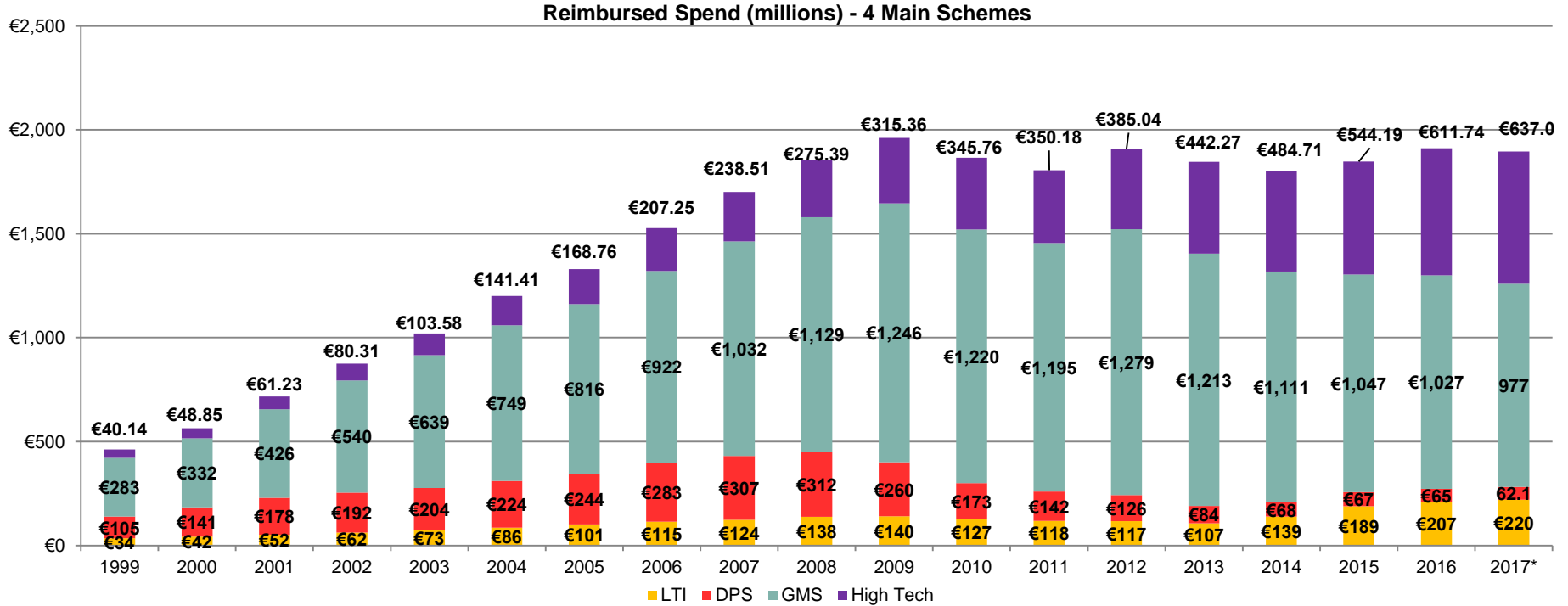
Volume of Claims and Payments

Total Budget 2016 €2.545.4bn   Total Budget 2017 €2.565bn

Community Schemes & Arrangements	Number processed	
	Total 2016	Total 2017
Long Term Illness - No. of claims	2,141,313	2,349,027
Long Term Illness - No. of items	7,543,128	8,259,643
GMS - No. of prescriptions	19,203,192	18,883,872
GMS - No. of items	58,533,213	58,129,657
Drug Payment Scheme - No. of claims	2,207,979	2,193,578
Drug Payment Scheme - No. of items	7,197,509	7,163,687
High Tech Arrangement - No. of claims	595,980	654,867
High Tech Arrangement - No. of items	677,550	741,128
EEA - No. of claims	37,905	33,580
EEA - No. of items	76,369	67,970
*Other	823,222	795,652

* Other includes – Methadone Treatment Scheme, Discretionary Hardship Arrangement, Dental Treatment Services Scheme, Health (Amendment) Act 1996 and Pharmacy Vaccinations.
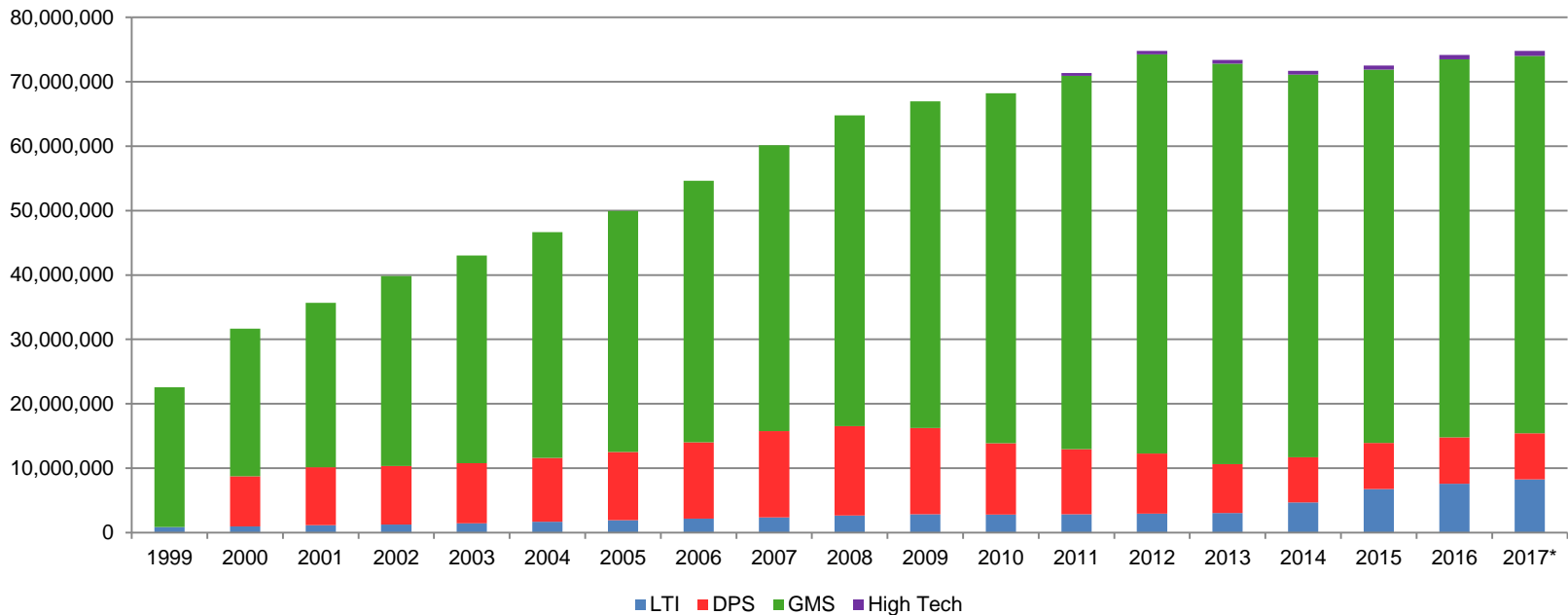
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Overall Medicines Costs

Reimbursed Spend (millions) - 4 Main Schemes

*Estimated figure
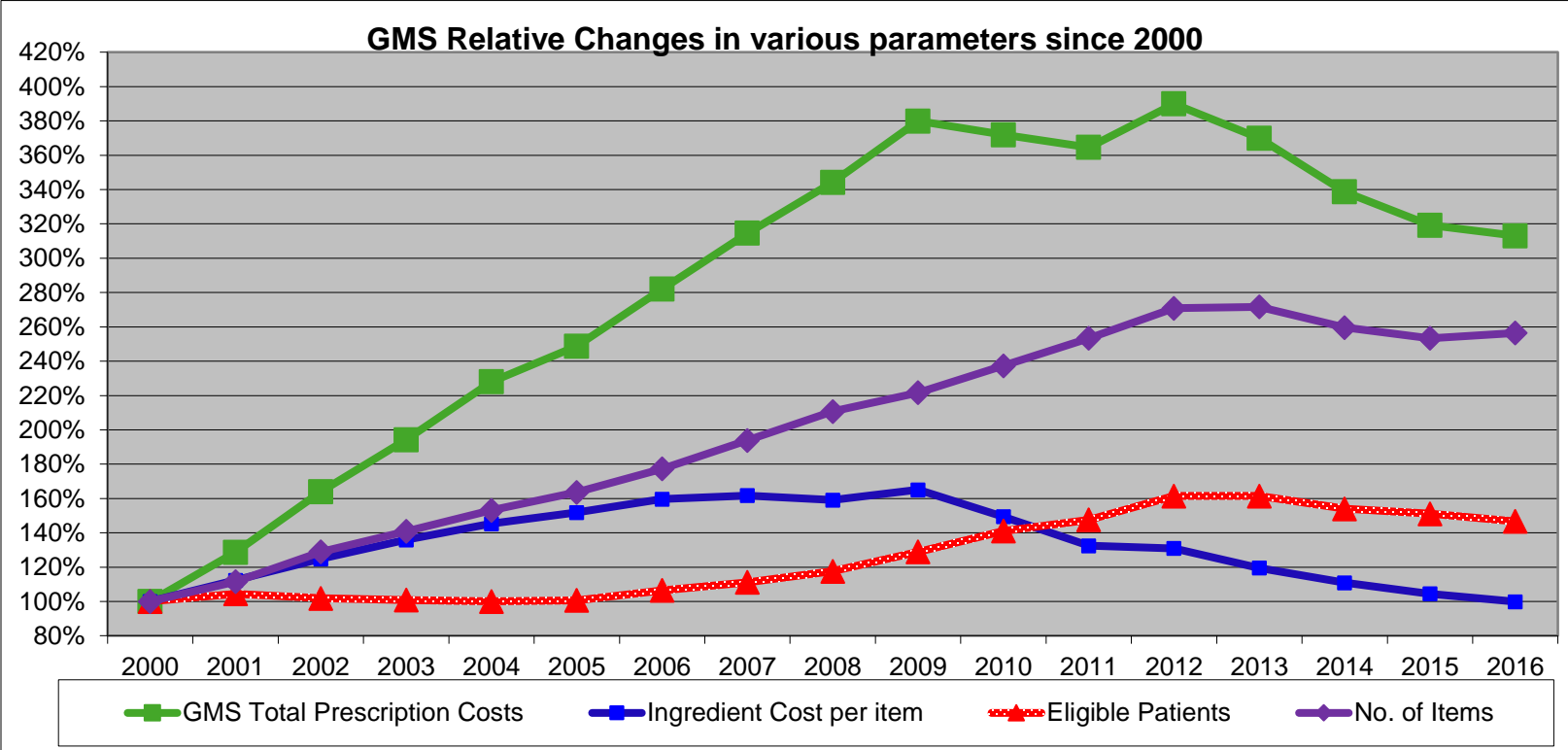
Number of Items reimbursed

Number of Items Reimbursed - 4 Main Schemes

*Estimated figure

GMS Trends Since 2000

GMS Relative Changes in various parameters since 2000

Legend:
- GMS Total Prescription Costs
- Ingredient Cost per item
- Eligible Patients
- No. of Items

GMS cost per claimant

Line chart comparing two series over the years 2012–2016.

GMS Cost per claimant inc high tech drugs (blue):
- 2012: €1,052.04
- 2013: €1,021.69
- 2014: €1,043.02
- 2015: €1,089.82
- 2016: €1,161.12

GMS Cost per claimant (red):
- 2012: €950.84
- 2013: €864.61
- 2014: €823.37
- 2015: €859.93
- 2016: €872.92

Legend: GMS Cost per claimant inc high tech drugs | GMS Cost per claimant

High Tech Ordering and Management Hub

Pre-Existing High Tech Arrangement

1. Data transparency and assurance inhibited by:

- ➢ Paper based processes

- ➢ Lack of system integration

- ➢ Disconnect between information sources

- ➢ End-to end tracking not possible

- ➢ Order information not captured centrally prior to delivery

Pre-Existing High Tech Arrangement

2. Stock Control and management risk because:

➤ Stock is 'owned' by the HSE who currently hold and retain the totality of stock risk

➤ There is little incentive to order stock on a 'just-in-time' basis

➤ End of year stock-holdings indicates 'just-in-time' model is not being employed by all

➤ Presentation updates without 'managed' introduction result in 'wasteful' stock redundancy

Pre-Existing High Tech Arrangement

3. Accidental error and order validation risk because:

- ➢ Patient prescription information is not centrally recorded

- ➢ No controls or warnings during pharmacy ordering e.g. patient no longer active, excessive quantities ordered

- ➢ Pharmacists not aware that patient has nominated a new pharmacy resulting in excess ordering

- ➢ Proof of delivery checks not automated

- ➢ No continuous link between order, delivery, dispense and payment

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Drivers for Implementation

The spend on the High Tech Arrangement spend was €637m in 2017 (excluding fees). It is imperative that the infrastructure around the arrangements with this level of spend is fit for purpose and ensures:

➢ Full transparency of data and information

➢ Enhanced assurance with regard to stock management and control

➢ Minimisation of stock wastage in the supply chain

➢ Delivery of value for money to the exchequer and the public

➢ Continuum of care and provision for patients at a high level

➢ Statutory and Audit obligations are met

Business Objectives

To develop and enhance the High Tech Arrangement by implementing an integrated, electronic Ordering and Management Hub for High Tech Medications

Design Principles

➢ Maintenance of Patient Accessibility and Care

➢ Delivering of Value for Money to the exchequer and the public and optimising cash flows

➢ Improved transparency of data and Information, enhanced assurance, validation and probity

➢ Management of Risks including wastage

➢ Ease of use for multiple type stakeholders/users

➢ Availability 24/7 x 365 days per annum

High Tech Hub Project Governance Arrangement
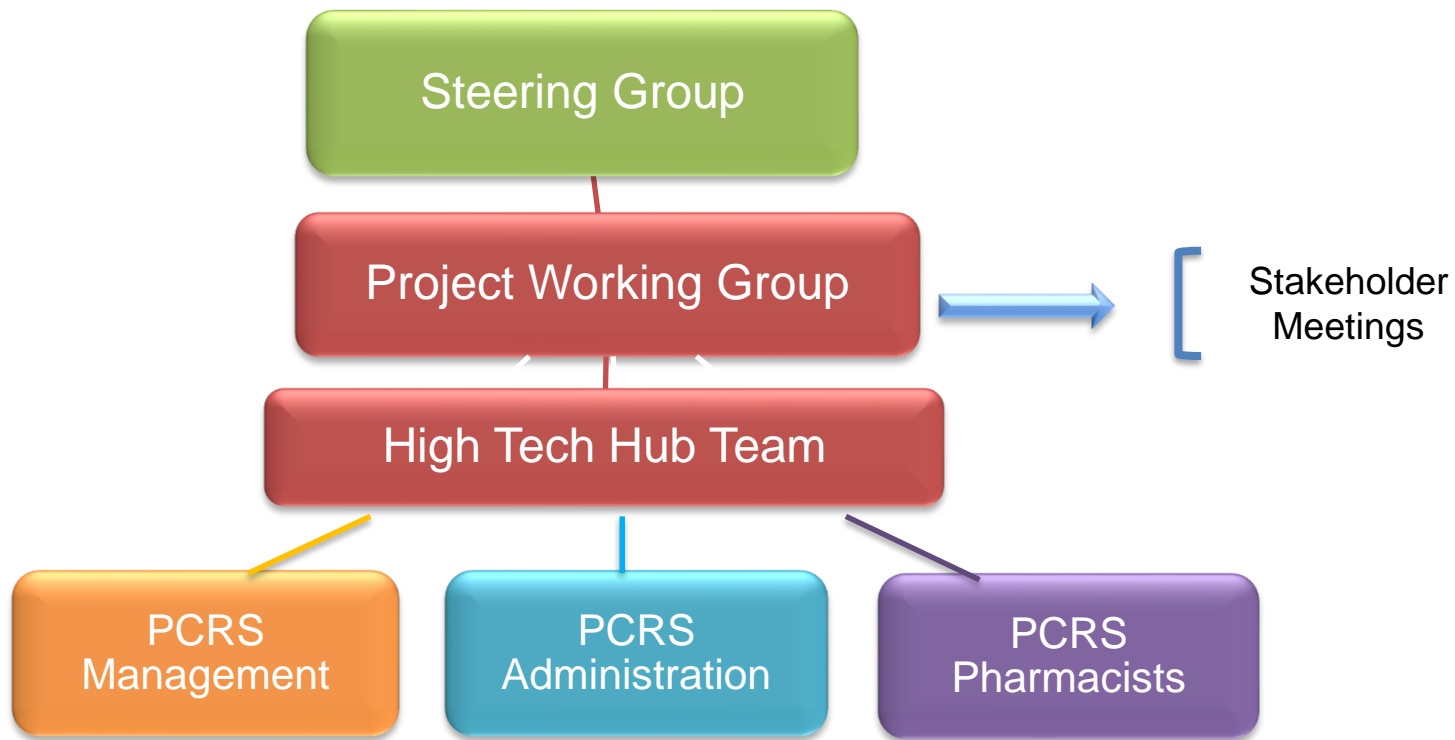
PCRS Approach

2016:

> ➢ Detailed review of High Tech Arrangement to inform our decisions and our vison for the future state

> ➢ Commenced development of business and functional specifications

2017:

➢ Engagement with Stakeholders to obtain their input into the design and work flows and also to further understand their operating models

➢ Design and build of the High Tech Hub and staff recruitment

➢ December 2017 – Phase 1 Go-Live

Implementation Strategy

- ➤ Engagement and early consultation with all stakeholders:
  - ✓ to invite input and feedback
  - ✓ to identify areas of potential concern
  - ✓ to identify integration needs

- ➤ Refine requirements based on consultation with pharmacies and suppliers

- ➤ Develop hub (functional and technical build)

- ➤ Phased roll-out: consider initial roll-out of registration process first and/or pilot for selected drugs

- ➤ On-going support, maintenance and review and, where necessary, enhancement

Stakeholders

Supplier

Prescriber

PCRS HUB

Pharmacy
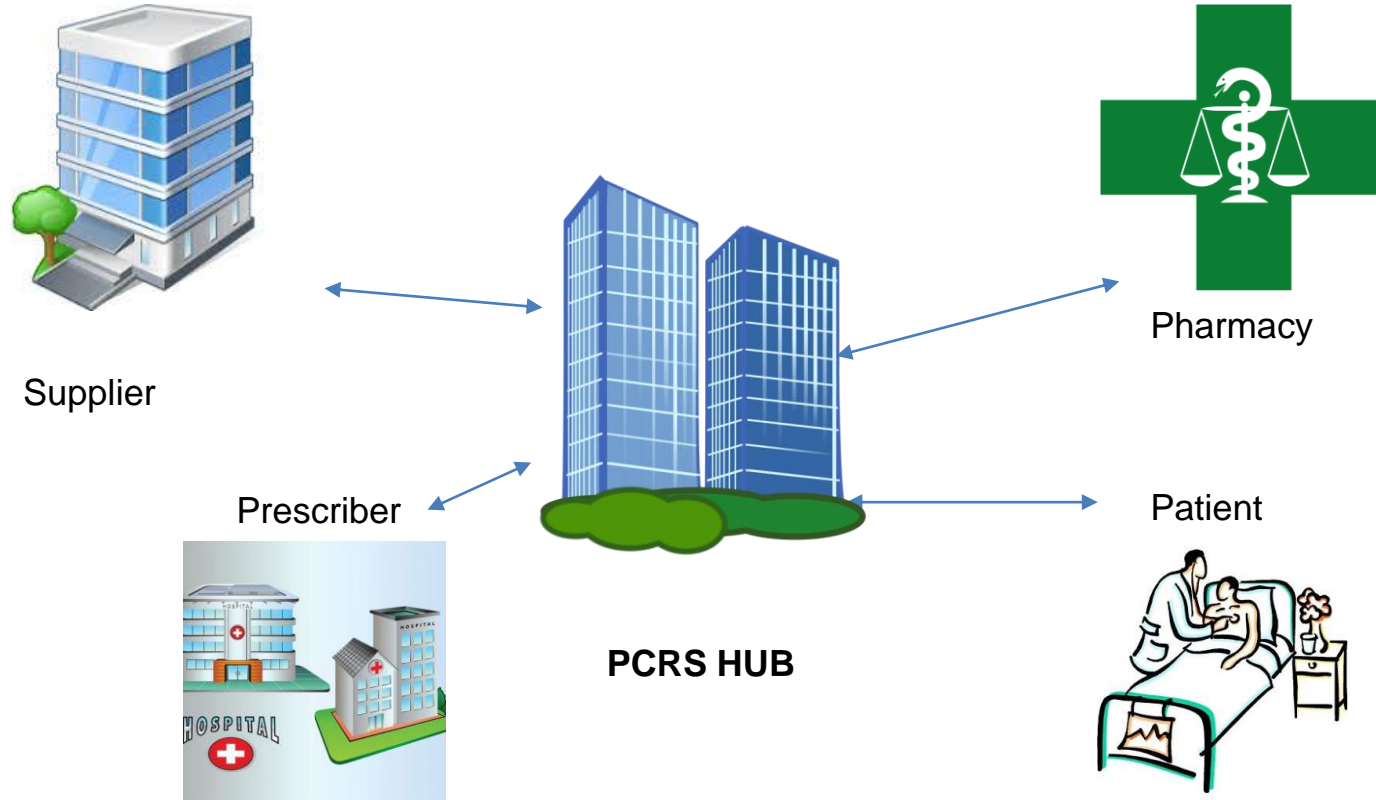
Patient

The High Tech Ordering and Management Hub

Order & Delivery Process

From the Suppliers Perspective

➢ Pharmacy nominates preferred suppliers in order of their priority or alternatively at item level.

➢ Supplier has visibility of all their orders on the High Tech Hub on their Home Page.

➢ Supplier can sort the sequence in which orders report or filter orders.

➢ Supplier has option to reject or cancel an order.

From the Suppliers Perspective continued

➢ Supplier can download all of their accepted orders to a csv file to process and then update the hub when dispatched.

➢ All updates on the Hub are reported in real time therefore all stakeholders can view the current status of the order(s).

➢ Supplier can still reject an order after accepting it e.g. product may no longer be in stock.

➢ Supplier has visibility of deliveries accepted by Pharmacy

Supplier Orders

▸ **Search Filters**

Download Accepted Orders

Search: [_____]

Order #	Pharm Num	Product	Date Modified	Status
2396	ℹ 11420	Suprefact Soln. for Inj. 1 mg./ml. 5.5 ml. Vial. 2 Vial Pack 1 (88510) X 10	01-Dec-17 10:58	Awaiting supplier response
2483	ℹ 11420	Elonva Soln. for Inj. Pre-Filled Syr. 100 mcg./0.5 ml. Pack 1 (88540) X 30	01-Dec-17 12:26	Awaiting supplier response
2623	ℹ 10001	Gonal F Pdr. and Solv. for Soln. for Inj. 75 iu 1 (88465) X 7	02-Dec-17 11:31	Awaiting supplier response
2643	ℹ 11420	Cetrotide Pdr. and Solv. for Soln. for Inj. 0.25 mg. 7 (88453) X 5	04-Dec-17 07:52	Awaiting supplier response
2644	ℹ 11420	Elonva Soln. for Inj. Pre-Filled Syr. 100 mcg./0.5 ml. Pack 1 (88540) X 1	04-Dec-17 07:53	Awaiting supplier response
2645	ℹ 11420	Suprefact Soln. for Inj. 1 mg./ml. 5.5 ml. Vial. 2 Vial Pack 1 (88510) X 2	04-Dec-17 07:54	Awaiting supplier response

Showing 1 to 6 of 6 entries   Previous 1 Next

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Centralised Hub Benefits

➢ Provision of transparency and assurance across the high tech process resulting in enhanced governance and control.

➢ Tracking of prescription from issue to dispatch of High Tech medication.

➢ Data captured can be utilised to improve medication management and prescribing behaviour for High Tech Drugs.

➢ Pharmacies have instant access to high tech prescription.

➢ Hospital prescriber can view their patient medication history.

➢ Central submission point for patient details and High Tech prescriptions.

Centralised Hub Benefits Continued

➢ Improved knowledge of stock on hand

➢ Errors in supplier invoices, or pharmacy payments/orders can be more easily prevented

➢ Automated reporting on all aspects of the High Tech Arrangement

➢ Automated order verification resulting in reduction in error

➢ Flexibility in delivering speciality specific requirements

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Hub Milestones to date

- System Deployed initially for IVF Therapeutic Area:
  - Phase 1 went live on December 4th 2017 with 154 pharmacies
  - Phase 2 went live on 20th March 2018 with 180 pharmacies
  - Phase 3 live on 27th March 2018 for all pharmacies

- Pulmonary Arterial Hypertension (PAH) went live on 29th May 2018

- Plans to extend the Cystic Fibrosis next

- Followed by Rheumatology, Gastroenterology and Dermatology

- Last identified area will be Oncology
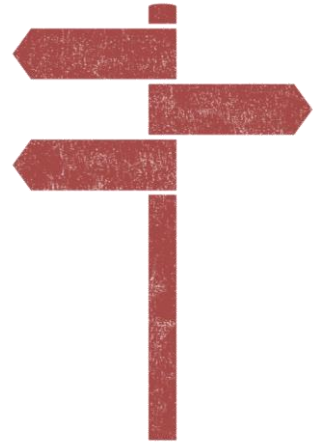
Approach to Go-Live with each speciality

- Engage with Clinicians/Prescribers and their hospital

- Understanding of the clinical programme and it's construct across the hospital network

- Appreciation of the clinical protocols in each speciality

- Knowledge of any specific/non standard arrangements

- Investigate if prescribers have access to I.T for patient registration at clinic level

- Engage with Suppliers prior to speciality deployment

In the run up to a Go-Live of a new speciality

➢ Drugs for speciality agreed and loaded to the High Tech Hub

➢ User registrations completed for Prescribers

➢ Communications to all relevant Stakeholders

Statistics to Date – as at 27/06/18

➢ 8,187 Prescriptions generated by clinicians on the Hub

➢ 336 Prescriptions relate to PAH

➢ 13,826 orders placed on the Hub

➢ 10 IVF clinics currently generating scripts on Hub and Mater Misericordiae Hospital for PAH

➢ 9 Suppliers currently accepting and dispatching drugs.

➢ 63 Drugs currently available for prescribing and ordering via the Hub.

Supplier Benefits

➢ When fully deployed one source of Orders

➢ Greater administration efficiencies

➢ Order and payment file integration

➢ Reduce or eliminate errors in supplier invoices, or pharmacy payments/orders

➢ Integration with external systems to facilitate fully automated process with suppliers and pharmacists

➢ PCRS Support mirroring supplier opening hours

Learning to Date

➤ Importance of FAQs

➤ Selection of preferred supplier at outset

➤ Allocation Rules

➤ Nominated Pharmacy Process

➤ Importance of communicating pre-deployment with stakeholders

➤ Importance of communicating regularly post deployment

Future Benefits

➢ End to End traceability of drugs ordered and supplied through the High Tech Hub

➢ Potential for detailed analysis of prescribing at Hospital and Clinician level to inform service development

➢ Stock management ➡ transparency and control of drug spend. Essential to ensure affordability of high cost medicines and access to new medicines

Contact Details of High Tech Ordering & Management Hub

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Email: PCRS.hitech@hse.ie

Operating times: Mon-Fri* 8am-7pm

*except Public and Bank Holidays

Thank you

Questions and Answers