# **Education guide - Information about prescribing, dispensing, and claiming HSD**

Highly Specialised Drugs (HSD) are subsidised through the Pharmaceutical Benefits Scheme (PBS) and are administered under Section 100 of the <u>National Health Act 1953</u><sup>[1]</sup>. HSD are for the treatment of complex medical conditions which require ongoing specialised medical supervision.

HSD are listed in the Schedule of Pharmaceutical Benefits (the Schedule) under the following programs:

- 1. Highly Specialised Drugs Program (Public Hospital), identified in the Schedule as S100 HSD Public and,
- 2. Highly Specialised Drugs Program (Private Hospital), identified in the Schedule as S100 HSD Private

Public and private hospital HSD are listed in the Schedule with separate item codes. Items are also listed in the Schedule as either:

- Authority required (STREAMLINED), or
- Authority required

Some items are listed under the HSD program and in the General Schedule but may be listed with different restriction criteria. Refer to the Schedule for more information.

Regulation 24 arrangements apply, where appropriate.

# Patient eligibility

Patients must meet all of the following requirements:

#### Patients must:

attend or have attended an approved HSD hospital as a day admitted patient, non-admitted patient or a patient on discharge. Hospital in-patients are not eligible for HSD

- be under appropriate specialist care of the approved hospital's HSD unit
- $\square$  meet the criteria for the item as listed in the Schedule

be an Australian resident, or other eligible person, who holds a valid Medicare card, or a person from a country with a Reciprocal Health Care Agreement (RHCA) with Australia. Where a patient is eligible to be treated under a RHCA, the supply will be limited to the original prescription only. Repeat prescriptions are not permitted for these patients.

When prescribing public hospital HSD items, prescribers acknowledge the patient's eligibility by endorsing the streamlined authority code on the prescription. The exceptions to this are increased quantities and repeats for HSD Authority required (STREAMLINED) items and HSD Complex Authority Required (CAR) items. Prescribers must apply for an authority approval for these items and provide us with the provider number of the approved public hospital where the patient is eligible.

When prescribing private hospital HSD items, prescribers confirm patient eligibility by supplying us with the provider number of the approved private hospital where the patient is eligible.

Patients are entitled to the quantity and repeats listed in the Schedule for any HSD but only one month's supply and up to five repeats in the case of Clozapine. Where the listed quantity and repeats will provide less than 12 month's supply for Authority required (STREAMLINED) items, prescribers may apply for an authority approval for increased quantities and or repeats.

# **Prescriber eligibility**

For prescribers to write HSD prescriptions, they must be a medical practitioner issued with a PBS prescriber number and meet at least one of the following requirements:

#### Prescribers must be:

a staff hospital specialist or a visiting or consulting hospital specialist affiliated with the public or private hospital unit an accredited prescriber of HIV/AIDS medicine an accredited prescriber of Hepatitis C maintenance medicine a general practitioner or non-specialist hospital doctor who provides maintenance therapy under the guidance of a treating specialist

HSD CAR items may also have additional prescriber requirements. Refer to the item's restriction criteria in the Schedule for more information.

# Supplier eligibility

Restrictions apply to which pharmacies can dispense and claim HSD.

Under the National Health Act 1953, approved suppliers include:

- community pharmacies approved under section 90
- public and private hospitals approved under section 94

Additionally, hospitals not approved under section 94 can apply for approval to prescribe and supply HSD under the *National Health (Highly specialised drugs program for hospitals) Special Arrangements Instrument 2010*<sup>[2]</sup>.

HSD items are approved as either a:

- HSD public hospital item (HSD PUB)
- HSD private hospital item (HSD PTE)
- HSD Complex Authority Required (CAR) item

HSD CAR items are also listed with separate public and private hospital item codes.

Pharmacies must only dispense and claim HSD appropriate for their pharmacy type. The patient's eligibility determines the item code approved and subsequently the type of pharmacy that can dispense and claim the prescription. We will not pay for prescriptions dispensed by the incorrect type of pharmacy.

## **Supplier restrictions**

HSD item	Dispense from a Public hospital	Dispense from a Private hospital	Dispense from a Community pharmacy		
HSD PUB (non CAR item)	<b>~</b>	×	×		
HSD PUB (CAR item)	<b>√</b>	×	<		
HSD PTE (non CAR item)	×	<b>V</b>	✓		
HSD PTE (CAR item)	×	<b>~</b>	✓		

## **Requirements for HSD PUB items (excludes HSD CAR items)**

Listing in the Schedule - Authority required (STREAMLINED)

#### Prescribing

Prescribe using a:

 $\square$  PBS public hospital prescription, or  $\square$  PBS authority prescription, or  $\square$  an approved hospital medication chart if supply will occur within the public hospital

A PBS authority or public hospital prescription must be used when prescribing HSD CAR items or for prescriptions where the quantity or number of repeats is greater than the maximum listed in the Schedule

If the prescription is for the listed quantity and repeats

You are not required to contact us.

write the 4 digit streamlined authority code on the prescription If the prescription is for an increased quantity and or repeats

Authority approval is required from us.

Obtain approval by:

 $\square$  telephone, or  $\square$  submitting a written application

For telephone applications:

write the authority approval number on the prescription (PUB ZXXXAA format)

We will endorse written applications with:

stamped 'Approved by PBS-DHS', the quantity and number of repeats authorised, and initials in the space marked delegate, and  $\square$  a separate stamp with 'Public hospital PBS item code'

#### Supplying

Supply from a:

public hospital pharmacy only

Prescriptions approved for public hospital item codes are only available for dispensing in public hospitals and cannot be supplied by community pharmacies or private hospitals.

## **Requirements for HSD PTE items (excludes HSD CAR items)**

#### Listing in the Schedule - Authority required

#### Prescribing

Prescribe using a

□ PBS authority prescription

Authority approval is required from us.

Obtain approval by:

 $\square$  telephone, or  $\square$  submitting a written application

For telephone applications:

write the authority approval number on the prescription (PTE ZXXXXAA format)

We will endorse written applications with:

stamped 'Approved by PBS-DHS', the quantity and number of repeats authorised, and initials in the space marked delegate, and  $\square$  a separate stamp with 'Private hospital PBS item code'

#### Supplying

Dispense from a:

 $\square$  private hospital pharmacy, or  $\square$  community pharmacy

## **Requirements for HSD CAR items**

#### Listing in the Schedule - Authority required

#### Prescribing

#### Public hospital HSD CAR

Prescribe using a:

#### □ PBS authority prescription, or □ PBS public hospital prescription Private hospital HSD CAR

Prescribe using a:

PBS authority prescription

Authority approval is required from us.

Obtain approval by:

 $\square$  submitting a written application  $\square$  telephone (where permitted in the Schedule)

The completed prescription and supporting documentation, including patient clinical details, must be submitted with the application. Requirements for applications are outlined in the Schedule.

We will endorse written applications with:

stamped 'Approved by PBS-DHS', the quantity and number of repeats authorised, and initials in the space marked delegate, and 'Public hospital PBS item code' or 'Private hospital PBS item code' and 'Section 100 CAR approved', and the appropriate approved item code from the Schedule will be written in the 'delegate approval' section of the prescription

For telephone applications:

 $\square$  write the authority approval number on the prescription (CAR ZXXXAA format) $\square$  write the approved item code on the prescription, as provided by our delegate

There are limited circumstances where a phone approval may be granted. Refer to the item details in the Schedule.

#### Supplying

#### Public hospital HSD CAR

Dispense from a:

community pharmacy public hospital pharmacy (public hospital HSD CAR item codes only)

#### Private hospital HSD CAR

Dispense from a:

□ community pharmacy □ private hospital pharmacy (private hospital HSD CAR item codes only)

## **Prescription requirements**

The following information is required to be completed on all HSD prescriptions:

- 1. Prescriber's name, practice or hospital address, and prescriber number
- 2. Authority prescription number We require this number to grant an authority approval. It is also used by the pharmacy as a reference when dispensing. The exact location of this number on the prescription may vary. The authority prescription number is generated by the prescribing software for computer generated prescriptions
- 3. Patient's name and address
- 4. Name, strength and form of medicine
- 5. Dose or instructions for use
- 6. Quantity and number of repeats
- 7. Signature of the prescriber and date the prescription was written
- 8. Authority approval number
- 9. An indication whether the prescription is to be supplied under the PBS or RPBS (Repatriation Pharmaceutical Benefits Scheme)

Prescribers will be required to quote the private hospital provider number when applying for an authority approval over the telephone. The hospital provider number must be written on the prescription for written applications.

### **Completed HSD PTE prescription**

PBS/RPBS author Not valid unless authorised	by delegate 2 11111111
Dr Tom Practiti 100 Main Stree Brisbane	1
QLD, 1111 Prescriber num	ber: xxxxxxxx
Patient's Medicare no.	- Patient's Ref no.
Patient's full name	Mr Alan Patient 3
Patient's address	100 First Street
Tick for return	Brisbane, QLD Postcode 1111
Entitlement no.	
PBS Safety Net entitlement cardholder	Concessional or dependant, RPBS beneficiary or PBS Safety Net concession cardholder
(Tick appropriate boxes)	ested for the following: state manager, Medicare 🖌 9
<b>RPBS</b> prescription from	the authorised delegate of the Repatriation Commission
Brand substitution no	t permitted 💟
Only one	Item per form
4 	
Val	ganciclovir 450mg tablet 4
7 /	Pharmacist/patient copy
Dosage directions	Take 2 tablets daily 5
Quantity 6 60	Prescriber's signature Date
No. of repeats	T Practitioner 01/101/201X 7
Medicare/ Quan DVA use	tity Repeats PTE Z1234 AB 8
I declare that I have received this medicine and	Patient's or agent's signature Date of supply
the information relating to any entitlement to a	
pharmaceutical benefit is correct.	Agent's address
Privacy notice: Y Government Depa required to proces You information n have agreed or it You can get more PB025.1310 including our priv	L turn personal information is protected by iaw, including the <i>Privacy</i> Act 1998, and is collected by the Australian thment of Human Services for the assessment and administration of payments and services. This information is as your application or claim. may be used by the department or given to other parties for the purposes of research, investigation or where you is required or authorised by iaw. Information about the way in which the Department of Human Services will manage your personal information, acy policy at tumanservices.gov.subprivacy or by requesting a copy from the department.

#### **Completed HSD PUB prescription**

As well as the prescription requirements outlined above, hospital prescriptions must include the hospital name and hospital provider number. Medication charts for use in public hospitals must meet the same requirements as a hospital prescription.

The hospital name, address, phone number, and provider number will be printed on every prescription at the top left corner or is generated by the prescribing software for computer generated prescriptions. Hospital prescriptions may vary depending on the state or territory.

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		- / /	and frequency	Quantity		Supply Y/N	S Approval number	
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# Additional information for pharmacists

Determine if the HSD prescription can be dispensed by your type of pharmacy. The authority approval on the prescription will assist in identifying which pharmacy type can dispense the prescription.

- Regulation 25 (immediate supply necessary) only applies to HSD PTE and HSD CAR items
- pharmacists can defer the supply of HSD items on public hospital prescriptions only
- patients are required to pay the appropriate PBS patient contribution
- all HSD are eligible for PBS Safety Net

After completing the required information in the pharmacy dispensing software (PDS), act on any warning or rejection messages. A warning or rejection message will be displayed if the prescription cannot be supplied by your pharmacy type. Call us for clarification if necessary.

# **Claiming requirements**

#### **Public hospital pharmacies**

Submit a paperless claim for:

Authority required (STREAMLINED) items. Hardcopy prescriptions are not required to be sent to us

Prescriptions must be sent to us for:

Authority required items, including increased quantities and or repeats of Authority required (STREAMLINED) items HSD CAR items

If the supply has been dispensed using an approved medication chart, pharmacists must certify supply of all paperless claims for the claim period by completing the Claim for payment/Payment reconciliation form.

Public hospital pharmacies who make a claim for HSD must keep paperwork for a minimum of 2 years from the date of dispensing.

#### Private hospital pharmacies

Prescriptions must be sent to us for:

 $\square$  Authority required items  $\square$  HSD CAR items

#### **Community pharmacies**

Prescriptions must be sent to us for:

 $\square$  Authority required items  $\square$  HSD CAR items

#### Pricing

HSD are subject to different mark-ups from other PBS items.

- payment to approved suppliers is based on the ex-manufacturer price and does not allow for a wholesale mark-up
- the Department of Health recommends that approved suppliers order HSD directly from manufacturers to ensure appropriate payment

#### Example 1

John Citizen is a public hospital eligible patient for HSD prescriptions. He sees the nephrologist in the outpatient clinic who correctly writes a prescription for Darbepoetin Alfa as a HSD PUB, Authority required (STREAMLINED) item on a public hospital prescription. John presents the prescription to his local community pharmacy to be dispensed.

Pharmacist action:

- a community pharmacy cannot dispense a PUB HSD prescription
- John can only have this prescription dispensed from an approved public hospital
- if the community pharmacy tries to dispense the prescription, an Online Claiming for PBS warning message will be displayed and they will not receive payment from us if they supply the item

#### Example 2

Sarah Smith is a private hospital eligible patient for HSD prescriptions. She sees the nephrologist in the outpatient clinic who correctly writes and obtains approval for a prescription for Sevelamer as a HSD PTE, Authority required item on an Authority prescription. Sarah presents the prescription to her local community pharmacy to be dispensed.

Pharmacist action:

- a community pharmacy can dispense a HSD PTE prescription
- Sarah can choose to have this prescription dispensed from an approved private hospital or community pharmacy
- take care when dispensing. Sevelamer has multiple listings in the Schedule including:
  - HSD PTE Authority required. For dispensing in private hospital and community pharmacies only
  - HSD PUB Authority required (STREAMLINED). To be dispensed in public hospital pharmacies only
  - Section 85 General Schedule with different criteria. These Section 85 streamlined approvals can be dispensed at a community pharmacy
- you must choose the correct HSD PTE listing in your PDS when dispensing Sarah's Sevelamer to ensure correct payment