



January 2020

PSNC Briefing 002/20: Changes to FP10 NHS prescription form and EPS Tokens

New NHS prescription forms and EPS Tokens are being introduced in England from January 2020. This Q&A style briefing is designed to help pharmacy teams understand the changes and adapt their processes accordingly to ensure patient declarations are captured accurately. These FAQs should be read in conjunction with the 'Changes to the FP10 NHS Prescription Form' guidance produced by the Department of Health and Social Care (DHSC) and NHSBSA.

Key changes include:

- Addition of new exemption box 'U' for "patients who are in receipt of Universal Credit and meets the criteria"
- Removal of box 'X' for "was prescribed free-of-charge contraceptives"
- Introduction of a new prescriber endorsement 'FS' for "free supply of sexual health treatment"
- Merging of age exemption categories ('A' and 'C') into a single category 'A' "is 60 years of age or over or is under 16 years of age"
- Re-wording of exemption category 'G' to "Prescription exemption certificate issued by the Ministry of Defence"

General

Why has the layout of the new FP10 form and Token changed?

Changes to FP10 forms and Tokens have been introduced to make it easier for eligible patients to correctly claim the exemptions to which they are entitled to free NHS prescriptions and avoid penalty charges.

What is the new form version identifier?

The new form version will display 1219 as the identifier to indicate December 2019 for e.g. FP10SS1219. The existing form version is 0515.

When will the new versions of FP10 forms and Tokens be put into circulation?

Revised versions (1219) of paper FP10 prescription forms and Tokens have been put into circulation from January 2020. Patients can expect to see the new forms in the coming weeks.

Will the changes appear on all types of FP10 forms (dental, nurse, FP10MDA)?

Changes have been made to the complete suite of new FP10 forms (FP10SS, FP10D, FP10P, FP10MDA etc).

Can I continue to accept the existing versions of FP10 forms and Tokens for dispensing?

Pharmacy teams should be aware that until stock of the existing versions (0515) of FP10 forms and Tokens are exhausted, pharmacies can accept and use both (new and existing) versions of FP10 forms and Tokens. Pharmacy teams should have adequate processes in place to ensure accurate completion of patient declarations on existing and new versions of the FP10 forms and Tokens. The NHSBSA will operate a dual system for processing of both existing and new versions of the FP10 forms and Tokens during the transition period.

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Do I need to dispose of existing version (0115) of dispensing Tokens and order the new version (1219) from PCSE? Existing stock of dispensing Tokens (version 0515) can continue to be used and, where required, patient declarations should continue to be captured on any Tokens required to be submitted to the NHSBSA at the end of the month.

What if the reverse of the prescribing Token presented by the patient does not match the reverse of the dispensing Tokens used in the pharmacy?

Until stocks of existing versions of Tokens are depleted, patients may receive a version of the prescribing Token from their GP which may be different to the dispensing Token printed by the pharmacy. The pharmacy may use either version for purposes of capturing a patient's declaration of prescription charge status.

When will prescribing and dispensing systems be updated?

Changes are being made to EPS and prescribing and dispensing systems as soon as possible. We are unable to provide any specific timescales for each system or confirm as to when any updates will go live. You may wish to contact your system supplier for further information.

Do the new FP10 forms need to be separated from the existing forms for submission at the end of the month?

No, the new paper FP10 forms can be sent together with existing forms except for any prescriptions which are to be submitted using red separators which now includes prescriptions with items endorsed 'FS' for free supply of sexual health treatment (see later).

What does the reverse of the new FP10 form look like?

Images below show the side-by-side comparison of the new (1219) and existing (0515) versions of FP10 forms.

NEW FORM in circulation from Jan 2020 FP10 (1219) © Crown Copyright FP10SS1219 Enter amount paid and sign below If you paid If you didn't pay Mark a line in one box and sign below is 60 years of age or over or is under 16 years of age (unless your date of birth is printed on the form) is 16, 17 or 18 and in full time education D Maternity exemption certificate Ε Medical exemption certificate Prescription prepayment certificate F Prescription exemption certificate issued by Ministry of G HC2 (full help) certificate Income Support or Income-relate . Em Н Income-based Jobsephel's Nin Vance K Tax Credit exemption certificate M Pensic of regit Guarantee Credit (including partners) Universal Credit <u>and</u> meets the criteria. *Find out more at* www.nhsbsa.nhs.uk/UC Read the declaration and sign the form The information I have given is correct and complete and I confirm proper entitlement to exemption I understand that if I falsely claim, I may be issued a Penalty Charge Notice, and I may have to pay up to £100 - as well as my prescription charge(s). I understand the NHS Business Services Authority may use and share my information within the NHS and with relevant Government bodies to check for fraud and mistakes. Find out more at: www.nhsbsa.nhs.uk/yourinformation On behalf Signature of patient PHARMACY USE ONLY EVIDENCE NOT SEEN

EXISTING FORM being phased out FP10 (0515)

NOTE	Patients who don't have to pay must fill in parts 1 and 3 (unless they are exempt on age grounds, and their age is printed on the front of this prescription). Those				
for free pres	st fill in parts 2 and 3. Penalty charges may b criptions. If you're unsure about whether you an FP57 form. You cannot get one later. The	be applied if you make a wrongful claim u are entitled to free prescriptions, pay			
Part 1	The patient doesn't have to pay because he/she:				
Α	is under 16 years of age	Collectors of Schedule 2 & 3 CDs should sign their name			
В	is 16, 17 or 18 and in full-time educa				
C	is 60 years of age or over				
D	has a valid maternity exemption certificate				
E	has a valid medical exemption certificate				
F	has a valid prescription pre-payment certification acy or				
G	has a valid War Pension exemption	n are			
L	is named on a current HO charge relations 2				
X	was prescribed free and arge postraceptives				
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What changes have been made to the contraceptive's category on the reverse of the new FP10 form and Token? Box X "was prescribed free-of-charge contraceptives" has been removed from the new paper FP10 forms and Token. This is because legislation does not require a patient to make a declaration or sign a form to receive free-of-charge (FOC) prescription items listed in the Drug Tariff (Part IXA Contraceptive Devices and Section 10 Part XVI 'List of 'Contraceptive Drugs to be Dispensed Free of Charge') or items that are annotated 'CC'.

Does removal of box X from the reverse mean that patients will now need to start paying for their contraceptives? No. Contraceptives continue to remain FOC on NHS prescriptions. The removal of box X is because there is no requirement for patients to make a declaration to receive any FOC items against NHS prescriptions.

Do patients still need to select box X on existing version (0515) of FP10 forms and Tokens with no other items but contraceptives?

Patients can but are not required to tick box X or sign for any contraceptives ordered on the existing version (0515) of FP10 forms and Tokens. Accordingly, there is no longer a requirement to include any Tokens with FOC items (e.g. contraceptives) along with other Tokens normally submitted to the NHSBSA at the end of the month. If, however, the prescription contains other items for which a charge should normally be levied, the prescription should be processed as either charge paid, or the appropriate exemption category should be selected (and where required, any corresponding Tokens should be submitted to the NHSBSA accordingly).

Will the EPS message code 'X' (0010) for "was prescribed free-of-charge contraceptives" continue to remain available for selection in EPS?

Whilst category X is to be removed from the reverse of the new FP10 forms and Tokens, the EPS message code 'X' (0010) for "was prescribed free-of-charge contraceptives" will remain on EPS systems that usually display it. This message code remains on EPS systems because population of a message code field is mandatory before an EPS claim is submitted for payment to the NHSBSA.

Should FOC items and chargeable items be prescribed on the same prescription?

Ideally, prescribers should not include items classed as FOC on the same prescription form as a chargeable item. DHSC guidance states that "free-of-charge items should not be included on the same prescription form as items for which a charge is usually applicable". NHSBSA's "Requirements and Guidance for Endorsement in the EPS" also states "prescribing systems should assist prescribers by splitting items onto separate prescriptions where a combination of [FOC such as contraceptives] and other chargeable medication items are prescribed at the same time". Where prescribing systems have not been updated, it may be technically possible for pharmacy teams to receive prescriptions with both FOC items (e.g. contraceptives) and chargeable items despite this guidance.

How does NHSBSA process prescriptions for contraceptives?

The Drug Tariff (Part IXA and Part XVI) lists FOC contraceptive items which do not require a prescriber endorsement. Items prescribed for contraceptive purposes but not listed in the Drug Tariff need to be annotated by the prescriber with initials 'CC' or the female symbol (?) so that a charge is not levied for any items so marked. The NHSBSA automatically identify the FOC contraceptives listed in the Drug Tariff and those marked for contraceptive purposes accordingly, to ensure no prescription charges are deducted regardless of paid/exempt status declared by the patient.

What does a patient pay for a prescription that has both a contraceptive and another item on it?

Ideally, prescribers should not include items classed as FOC (for e.g. contraceptives) on the same prescription form as a chargeable item. Where such prescriptions are received, the table below highlights whether a patient would pay a prescription charge using different examples of contraceptive-containing prescriptions:

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	Prescription for			
Patient status	Contraceptive only (FOC)	Contraceptive + other FOC items (such as FS endorsed STI treatment)	Contraceptive + chargeable item	
Exempt from prescription charges	No charge	No charge	If a patient has a valid exemption from prescription charges, the actual reason for exemption should be selected. The contraceptive will be automatically treated as an FOC item.	
Pays for prescriptions	No charge	No charge	Patient pays for the chargeable items only. Any contraceptives are automatically treated as FOC and no prescription charges should be levied for these.	

I received an EPS prescription for a contraceptive and inadvertently marked it as charge 'paid' when submitting the EPS claim message. Will a prescription charge be deducted by the NHSBSA during pricing?

Contraceptive drugs and appliances listed in the Drug Tariff (Parts IXA and Part XVI) and items endorsed 'CC' are automatically treated as FOC by the NHSBSA regardless of a patient's exemption or charge status. So, if an EPS prescription for a contraceptive listed in the Drug Tariff (or item endorsed 'CC') is inadvertently marked as 'paid', no prescription charge will be deducted by the NHSBSA for these FOC items.

Are there any reimbursement risks associated with processing of EPS prescriptions which include FOC items such as contraceptives and other chargeable items?

Yes, there may be a risk of an incorrect number of prescription charge deductions being made against such prescriptions based on the category selection made via the EPS submission for entitlement to free prescriptions. For example, if an EPS prescription includes a FOC contraceptive and another chargeable item, and the prescription is submitted with the "was prescribed free-of-charge contraceptives" message code 'X' (0010) applied to the EPS message, a charge deduction will apply to the chargeable item even if the patient was exempt from prescription charges for other reasons, for e.g. medical exemption. An EPS prescription of this type should have been submitted with actual exemption reason which is applied at a form level rather than the item-level, "was prescribed free-of-charge contraceptives" reason for entitlement to free prescriptions.

Can my PMR system support the processing of EPS prescriptions which have a contraceptive and a chargeable item prescribed on it?

Some PMR systems may auto-populate the required EPS message code in the appropriate way to simplify pharmacy processes. PMR systems may also provide support to minimise the risk of pharmacy staff making incorrect category or EPS message code selection errors which may result in inappropriate charge deductions (for e.g. by preventing selection of the 'contraceptive' status to the whole prescription if other chargeable items are ordered on the same prescription). If your PMR provider does not offer such safeguards, you may choose to speak to your PMR supplier to see if they can support further improvements to reduce reimbursement risks around inappropriate EPS message code selection. Read more about making suggestions and feeding back to your PMR supplier at: psnc.org.uk/reportIT.

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Sexually Transmitted Infections (STIs)

What does the new prescriber endorsement FS stand for?

A new prescriber endorsement FS (free supply of sexual health treatment) has been introduced to enable prescribers to indicate to pharmacy staff that a product is being prescribed for the treatment of an STI and therefore can be provided to the patient free-of-charge (FOC).

Is there a list of drugs to which the FS prescriber endorsement can be applied to?

No, the new FS endorsement will operate by way of guidance, and prescribers should their clinical discretion when prescribing items for STI treatment, in accordance with their professional duties and obligations. Guidance on STIs that may be suitable for managing in primary care can be found in the guidelines section of the British Association for Sexual Health and HIV (BASHH) website and in BASHH's Standards for the management of sexually transmitted infections.

Why are patients with STIs entitled to receive their treatment for free on the NHS?

Existing legislation under the NHS Act 2006 provides for free-of-charge treatment for sexually transmitted diseases (STDs). Many patients often receive treatment for STIs free-of-charge from local sexual health (GUM) clinics. Where these treatments for STI are supplied by way of an FP10 prescription form, there is currently no mechanism or operational arrangement for exempting the patient from the prescription charge, so patients may be charged for medicines that should be supplied for free. The FS endorsement has been developed as a technical solution to allow free supply of items used for the treatment of STIs.

Legislation refers to STDs so why is this change limiting free treatment for STIs only?

To be consistent with professional and other guidance (e.g. the National Institute for Clinical Excellence (NICE) and the British Association for Sexual Health and HIV) the DHSC refers to STIs rather than STDs, reflecting that many conditions are asymptomatic so an individual cannot be said to have a disease, and that an infection implies the condition is transmissible whereas a disease does not. Therefore, for the purposes of this change, it is considered that only those infections for which sexual contact is the main route of transmission should be treated as STI treatment, e.g. treatment for chlamydia would be free, treatment for candidiasis would not.

Are all items on the prescription exempt from prescription charges if a prescriber has added FS endorsement to an item?

No, only those items endorsed FS should be treated as FOC. All other items would be chargeable unless the patient is exempt from prescription charges for other reasons.

Can the pharmacy manually endorse FS on a prescription if a patient claims that their treatment is for an STI?

No, only prescribers can apply the FS endorsement. Without the FS endorsement, the prescribed treatment would be treated as a chargeable item, and patients would be advised that unless they are exempt from charges for another reason, they will have to pay the appropriate charge. If a patient claims that their prescribed item(s) is to treat an STI but the item has not been endorsed FS by the prescriber, the prescription would need to be returned to the prescriber for the correct endorsement.

Where a prescriber has endorsed FS against an item on a prescription, does the patient need to make a declaration and sign the reverse of the FP10 form or Token?

As with other FOC items, such as contraceptives, there is no patient tick box on the new versions of the paper FP10 form and Token. This is because legislation does not require a patient, or their representative, to make a declaration or sign a form to receive FOC sexual health medication (or contraceptives). Patients are not required to provide evidence of entitlement for FOC STI treatment. In EPS, however, a new message code 'Y' (0017) for "was prescribed free-of-charge sexual health medication" will be added to dispensing systems. For prescriptions which only have FS endorsed items, the message code 'Y' (0017) will need to be populated before an EPS claim is submitted for payment (some PMR systems may apply this code automatically if an FS endorsed item is prescribed).

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How do I submit paper prescriptions with items endorsed FS at the end of the month?

All paper prescriptions with the prescriber FS endorsement should be placed in a **red separator** when submitted to the NHSBSA for processing.

How will the NHSBSA process prescriptions with FS endorsed items for STI treatments?

The NHSBSA will recognise the FS endorsement when it is correctly applied by the prescriber and treat the marked items as free-of-charge, accordingly

How will prescribing systems accommodate this new change for electronic prescriptions?

The new prescriber endorsement FS is not yet configured into prescribing systems and the changes are being made as soon as possible. Until selection of FS endorsement has been enabled in prescribing systems, prescribers should revert to issuing **paper** prescriptions with FS manually endorsed next to each item intended for the treatment of an STI. Where FS has been added as a handwritten endorsement, for example, on a computer-generated form, this should be counter-signed in the usual way.

Where will FS endorsement appear on the paper FP10 forms and Tokens?

Once prescribing and dispensing systems are updated, the FS endorsement will be printed on the FP10 form or Token next to the applicable item(s).

In EPS, can FS endorsement be added to the dosage instructions to ensure it is treated as a free-of-charge item?

The FS endorsement should not be manually added to the EPS dosage instructions field as this would not allow a pharmacy to supply any treatment for STIs free-of-charge against NHS prescriptions. Addition of any supplementary information or 'free text' to the dosage instruction field or other fields such as 'additional instructions', will not be taken into account for reimbursement purposes as this information is not captured by the NHSBSA during processing. If FS has not been applied correctly to an item, the NHSBSA will assume the correct number of prescription charges have been collected by the pharmacy (unless the patient is exempt for other reasons) and the relevant number of charges will be deducted. If FS is applied incorrectly, the pharmacy would need to refer a patient back to their prescriber to have their prescription amended so that supply of any FOC STI items can be made appropriately." Prescribers wishing to use FS endorsement for EPS prescriptions must wait until their prescribing systems are configured to apply this endorsement. Until selection of FS endorsement has been enabled in prescribing systems, prescribers should revert to issuing paper prescriptions with FS manually endorsed next to each item intended for the treatment of an STI.

What EPS category code should I select on electronic prescriptions which have both FOC contraceptives and FS endorsed STI treatments prescribed?

In this case, as only one value can populate the EPS message, either code 'X' (0010) for "was prescribed free-of-charge contraceptives" or code 'Y' (0017) for "was prescribed free-of-charge sexual health medication" can be selected on dispensing systems.

Should FOC items and chargeable items be prescribed on the same prescription?

Ideally, prescribers should not include items classed as FOC on the same prescription form as a chargeable item. DHSC guidance states that "items classed as free-of-charge items for the treatment of an STI should not be included on the same prescription form as items for which a prescription charge is usually applicable". NHSBSA's "Requirements and Guidance for Endorsement in the EPS" also states "prescribing systems should assist prescribers by splitting items onto separate prescriptions where a combination of FS endorsed STI medication (or other free of charge) and other chargeable medication items are prescribed at the same time". Where prescribing systems have not been updated, it may be technically possible for pharmacy teams to receive prescriptions with both FOC items (e.g. FS endorsed STI treatment) and chargeable items despite this guidance.

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I received an EPS prescription for an FS endorsed STI medication and inadvertently marked it as charge 'paid' when submitting the EPS claim message. Will a prescription charge be deducted by the NHSBSA during pricing?

No, if an EPS prescription for an FS endorsed STI medication is inadvertently marked as 'paid', no prescription charge will be deducted by the NHSBSA for these FOC items.

What does a patient pay for a prescription that has both a FOC STI item and other items on it? Ideally, prescribers should not include items classed as FOC (for e.g. FS endorsed STI item) on the same prescription form as a chargeable item. Where such prescriptions are received, the table below highlights whether a patient would pay a prescription charge using different examples of FS endorsed prescriptions:

	Prescription for			
Patient	FS item only	FS item + other FOC items (contraceptives)	FS item + chargeable item	
Exempt from prescription charges	No charge	No charge	If a patient has a valid exemption from prescription charges, the actual reason for exemption should be selected. The item endorsed FS will be automatically treated as an FOC item	
Pays for prescription	No charge	No charge	Patient pays for the chargeable items only. Any FS endorsed STI treatments are automatically treated as FOC and no prescription charges should be levied for these.	

Are there any reimbursement risks associated with processing those prescriptions which include free-of-charge (FOC) items such as FS items and other chargeable items?

Yes, there may be a risk of an incorrect number of prescription charge deductions being made against such prescriptions based on the category selection made via the EPS submission for entitlement to free prescriptions. For example, if an EPS prescription includes a FOC STI treatment and another chargeable item, and the prescription is submitted in error with the "was prescribed FOC sexual health medication" status (message code 'Y' or 0017) applied to the EPS message, a charge deduction will apply to the chargeable item even if the patient was exempt from prescription charges for other reasons, for e.g. medical exemption. An EPS prescription of this type should have been submitted with actual exemption reason which is applied at a form level rather than the item-level, "was prescribed free-of-charge sexual health medication" reason for entitlement to free prescriptions.

Can my PMR system support the processing of EPS prescriptions which have a FOC STI item and a chargeable item prescribed on it?

PMR systems can be developed to minimise the risk of pharmacy staff making incorrect category or EPS message code selection errors which may result in inappropriate charge deductions. For example, PMR systems may:

- allow auto-selection of the 'Y' (0017) category for those prescriptions which have only FS endorsed items on the prescription; and/or
- not allow selection of the 'Y' (0017) category to apply to the whole prescription if there are two or more items and one of them is chargeable

Community Pharmacy IT Group, PSNC and NHS Digital have flagged these issues with all the PMR suppliers. You may contact your PMR system if you'd like to see further improvements in relation to the system's ability to support your processing of FS endorsed prescriptions. PMR suppliers make changes primarily based on the direct feedback they receive. Read more about making suggestions and feeding back to your PMR supplier at: psnc.org.uk/reportIT.

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Universal Credit (UC)

What changes are being made to the new FP10 forms and Tokens in regard to Universal Credit?

A tick box for Universal Credit (UC), and the equivalent for the EPS systems, has been added to enable patients to correctly declare their exemptions. On the new FP10 form and Tokens, patients should select box U for "Universal Credit <u>and</u> meets the criteria". In EPS, once systems have been updated, the new exemption message code 'U' (0016) for UC should be selected. Until EPS systems are updated to include the new EPS message code 'U' (0016) for UC, pharmacy teams should continue to select code 'K' (0012) for "Income based Job Seeker's Allowance". (see **Appendix** 1 for infographic).

How should qualifying patients declare their prescription charge exemption entitlement for receipt of Universal Credit (UC) on existing versions of FP10 forms and Tokens?

UC was introduced as a new patient prescription charge exemption category in March 2013; however, prescription forms and EPS prescribing and dispensing Tokens were not revised at the time. To enable patients to make a valid declaration of UC entitlement, a workaround was put in place whereby a patient is instructed to tick the box *K "gets income-based Jobseekers Allowance"* on the current version (0515) of the FP10 forms and Tokens and present their UC award notice as evidence of entitlement. Until EPS systems are updated, when transferring the declaration made by a patient on the EPS token, message code 'K' (0012) for "gets income-based Jobseekers Allowance" should be selected on the EPS claim message.

What proof/evidence do I need to request from a patient to confirm their entitlement to Universal Credit prescription charge exemption?

Patients should present their latest UC award notice. It is worth noting that UC does not automatically entitle patients to help with their health costs. To qualify, patients must be included in a UC award and their earnings during their most recent assessment period must be:

- £435 or less
- £935 or less if their UC includes an element for either a child or limited capability for work.

Where evidence cannot be provided, pharmacy contractors are required to advise the patient or their representative, that NHS checks are routinely undertaken to verify that persons are exempt from payment of NHS prescription charges as part of the arrangements for preventing or detecting fraud or error. The evidence not seen box should be ticked on the paper prescription/EPS dispensing system. Where patients are unsure of their entitlement to exemption from charges it is recommended that they pay for their prescription and obtain an FP57 receipt and refund form from the pharmacy at the same time. They can then apply for a refund once they have confirmed their eligibility.

Can I use Real-time Exemption Checking (RTEC) to effectively see if a patient is eligible to claim the Universal Credit exemption?

Yes. Once RTEC is fully rolled out, it will provide pharmacy teams with up-to date information on whether a patient has a valid exemption – although it will not display the type of the exemption. RTEC will confirm either "RTEC confirms exempt" or "RTEC does not detect exemption and the usual process can be used". Pharmacy staff will not normally need to check the patient's exemption status more than once, but a second check will be possible, if the patient queries the initial status returned by the NHSBSA system – for example because their medical exemption comes into effect on the day they collect their medication. The RTEC roll-out is beginning with those pharmacy contractors that use the Positive Solutions PMR system. Read more at: psnc.org.uk/rtec

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Age-exemption

What has changed regarding the age-exemption categories on the new FP10 forms and Tokens?

The existing exemption categories A – "is under 16 years of age" and C "is over 60 years of age" will appear on the new FP10 forms and Tokens as a single combined exemption category A – "is 60 years of age or over; or is under 16 years of age".

Are there any changes to the age exemption category for students "is 16, 17 or 18 and in full-time education"? No, this exemption category ('B') remains unchanged on paper FP10 forms, Tokens and EPS systems.

Do paper prescriptions with a hand-written date of birth require a declaration if a patient is exempt from prescription charges on the grounds of age?

If the prescription for an age-exempt patient is hand-written, the FP10 must be signed and the relevant box on the back of the form ('A' or 'C') should be ticked. Paper prescriptions with a computer-generated date of birth do not require a patient's signature on the reverse to declare their age-exemption.

Will the EPS system change to mirror this change?

Yes, the same changes will be made to EPS systems to combine the two age exemption categories 'A' and 'C', to become one new category which retains the message code 'A' (0002) and message code 'C' (0004) will become redundant. Until these changes have been made to EPS systems, pharmacy teams can continue to select EPS message codes 'A' (0002) or 'C' (0004), where appropriate. Currently most dispensing systems auto-populate message codes 'A' or 'C' based on the patient's date of birth held in the EPS message.

How does NHSBSA process EPS prescriptions for age exempt patients?

NHSBSA systems identify and use the date of birth applied to EPS messages to determine a patient's exempt or charge status.

War pension exemption

What changes are being made to the existing war pension exemption category?

The current exemption category 'G' (0008) – "has a valid War Pension exemption certificate" has been re-worded on the new FP10 form and Token as "Prescription exemption certificate issued by Ministry of Defence". This is to better represent the exemption certificates issued by Veterans UK and those entitled to an award under the Armed Forces Compensation Scheme (AFCS).

Other changes to the design and layout of the new FP10 forms and Tokens

Paid prescription box: This section moves to the top of the new FP10 form and Token. Patients or their representatives should place a mark here only if any prescription charges are paid. To avoid switching of paper prescriptions between exempt and chargeable groups, contractors are advised to carefully check that the reverse of the FP10 forms have been correctly completed and filed in their respective (paid or exempt) groups for end of month submission.

Signature and date box: Pharmacy teams should always ensure that this section of prescription is completed if prescription charges are collected or if an exemption (other than age exemption and real-time exemption) has been declared by the patient or their representative. To avoid switching of paper prescriptions between exempt and chargeable groups, contractors are advised to carefully check that the reverse of the FP10 forms have been correctly completed and filed in their respective (paid or exempt) groups for end of month submission.

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Patient name and address sections on the reverse: These will not appear on the new FP10 form and Token and the reverse is no longer separated into Parts 1, 2 & 3.

Collector of Schedule 2 & 3 CDs signature box: Pharmacy teams are reminded to ensure that these sections are completed, where appropriate. Some teams may capture the CD collector's details electronically on their PMR system.

Evidence Not Seen box: The "Evidence Not Seen" box has also moved to the bottom of the new FP10 form and Token. Pharmacy teams are reminded to ensure that this section is completed, where appropriate.

Prescription wording updated to reflect General Data Protection Regulations (GDPR)

Further resources

- Click here to view <u>DHSC and NHSBSA guidance</u>
- Click here to view **PSNC Exemptions from the prescription charge**
- Click here to view **PSNC What does the patient pay?**
- Click here to view PSNC Sorting your prescriptions prior to submission
- Click here to view **Drug Tariff online**
- Click here to view **PSNC End of month submission webinar**

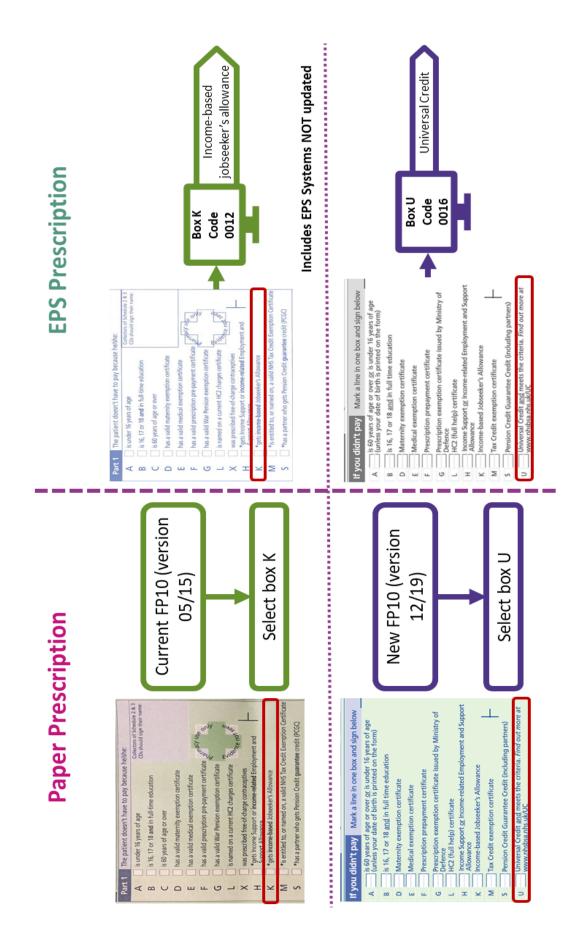
If you have queries on this PSNC Briefing or you require more information, please contact <u>PSNC's Dispensing and Supply Team</u>.

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Appendix 1

Changes to Universal Credit exemption on paper and EPS prescriptions



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