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Maria Caulfield MP
Parliamentary Under Secretary of State (Minister for Mental Health and Women's Health Strategy)
and Minister for Women
39 Victoria Street
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1st November 2022

Dear Minister

The Pharmaceutical Services Negotiating Committee (PSNC) represents all 11,000+ NHS community pharmacies in England. We work closely with ministers and officials at DHSC to ensure that all patients receive the care and support they need from these vital frontline services. This includes a focus on women's health, with a new community pharmacy national contraception service launching this coming January. We believe pharmacies are well placed to do much more to support the health and wellbeing of women in the future as well.

I am writing to seek a meeting with you to discuss an urgent matter which falls into your ministerial portfolio, regarding the provision of hormone replacement therapy (HRT) at a reduced price, via a Pre-Payment Certificate (PPC). While we are very supportive of the principle of widening access to this medicine, we have serious concerns about the implementation of this policy. The proposal as it stands is unworkable for community pharmacy and, as a result, will lead to anger and frustration on the part of patients, prescribers, including General Practice and community pharmacy staff.

Under the current NHS procedures, it is not technically possible for pharmacy staff to process prescription forms that contain both HRT medicines (on a PPC) as well as other medicines that the patient needs to pay a prescription charge for. This means that pharmacists would have to ask the patient to return to their prescriber for two separate prescriptions. This will inconvenience the patient, delay their access to medicines (including any that need to be taken urgently), and create additional work for General Practice. We also expect difficult questions about why the Department's proposal does not fit with existing NHS systems.

As an answer, we strongly suggest that all HRT medicines (licensed and off-label) are made free of charge to patients. This works with existing NHS systems and would avoid the problems outlined above and, in addition, would enable patients to access free of charge all treatments for menopausal symptoms, as well as helping those least able to afford the prescription charge. You will know that our proposal is in line with the views of a range of charities, clinical experts and Parliamentarians who are campaigning on behalf of women.

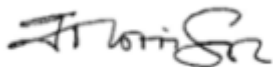
We have asked the DHSC to review the likely revenue, additional workload and costs involved in the current proposal. We believe that the costs of our proposal would be limited: the revenue gained from the introduction of the HRT PPC is

reduced compared to normal prescription charges and when considered against the likely additional workload for the healthcare professionals involved it will be further reduced.

Taking this simplified approach could be a precursor to the creation of a national menopause service based on the same principles as the contraception service. As with the contraception service, community pharmacists and their teams would be able to work holistically to support women's health in the round. Services could focus on offering expanded hypertension case-finding services, contraception management, healthy living, and menopause management.

Community pharmacy already plays a vital role in supporting women's health, and with fair funding and investment it has the capacity and expertise to do more. We would welcome a meeting with you to find an answer that works for patients, Government and healthcare providers.

Best wishes,



Janet Morrison OBE
Chief Executive
Pharmaceutical Services Negotiating Committee (PSNC)

Cc. Neil O'Brien OBE MP, Minister for Primary Care and Public Health