

Pharmaceutical Reforms in SA Public Hospitals

The South Australian Government has accepted a Commonwealth offer to participate in a process of pharmaceutical reforms in public hospitals.

The reforms comprise a dual outcome:

- > Access to medicines via the Pharmaceutical Benefits Scheme (PBS) for:
 - > patients on discharge
 - > patients attending outpatient clinics
 - > a range of cancer chemotherapy drugs for day patients and outpatients.
- > Implementation of the Australian Pharmaceutical Advisory Council's (APAC) guiding principles to achieve continuity in medication management.

Key Objectives

The key objectives of the reforms are to improve:

- > equity of access to medication for patients regardless of their place of care – public hospital, private hospital or community sector, and
- > safety and quality of medication management, including a smooth transition between hospital and community based care.

Previously, the South Australian Government met the cost of all medicines supplied to public hospital patients. Under the pharmaceutical reforms, hospital pharmacies will be able to claim reimbursement from Medicare Australia for PBS items supplied on hospital PBS prescriptions. The released funding will be used to improve safety and quality of medication management and continuity of care.

The reforms will initially be implemented in the major metropolitan public hospitals in a staged process beginning in the latter part of 2008.

South Australian implementation follows the successful uptake of the reforms interstate, commencing with Victoria in 2001, followed by Queensland, Western Australia, the Northern Territory, and Tasmania.

Continuity of Care

Hospitals participating in the pharmaceutical reforms will be required to implement the APAC guiding principles to achieve continuity in medication management and will be expected to achieve agreed milestones. These include:

- > Document a complete and accurate medication history at the time of admission or as early as possible in the episode of care.
- > Assess current patient medication management and conduct medication review throughout the episode of care.
- > Develop a medication action plan in consultation with patients.
- > Review discharge medication requirements prior to the time of discharge and provide an adequate quantity of medication to carry through to the next appointment.
- > Provide oral and written medicines information.
- > Ensure comprehensive, appropriate and timely communication to the primary healthcare provider responsible for continuing the patient's medication management.



Fact sheet for general practitioners

Hospital PBS Prescription Form

Hospital PBS prescriptions may be dispensed by community pharmacists, but hospitals are not permitted to dispense community PBS prescriptions.

An approved hospital PBS prescription form must be used – it is different from community PBS prescription forms. To see an example of the hospital prescription, visit the pharmaceutical reforms page on the web site:

www.sahealth.sa.gov.au/pbs

Hospital prescription forms comprise three copies:

- > The top copy is for the patient and/or pharmacist and can be used as the attachment for repeat authorisations.
- > The second copy is to be sent to Medicare Australia with the claim.
- > The third copy is for filing in the patient's medical record at the hospital.

Key Points for General Practitioners

- > The reforms are being implemented to improve patient care.
- > Prescribers employed by participating public hospitals will be able to write PBS prescriptions for patients attending outpatient clinics, on discharge from hospital and when receiving chemotherapy as day patients or as outpatients.
- > Prescriptions can be for up to one month's supply of medication, or the PBS maximum quantity, if this is clinically appropriate. For discharged patients this means that there will be more time to

arrange a GP consultation before medication runs out.

- > Hospital prescribers will only be prescribing medication that the patient requires an immediate supply of, not everything they are taking.
- > Repeats for PBS items will not usually be ordered, instead information will be sent to the patient's GP for continuation of treatment.

Key Points for Patients

- > Patients will receive the same quantity of medication for the same cost as when they have a prescription filled at a community pharmacy.
- > All medications used while patients are in hospital will continue to be provided without charge.
- > As previously, all items that patients have paid for at a hospital pharmacy count towards the joint Commonwealth/State Safety Net.

What patients need to do

Bring to hospital:

- > Their current medications
- > A complete list of the medications they are taking, including over-the-counter and complementary medications
- > Current Medicare card
- > Current pharmaceutical benefits concession card, if they have one (e.g. Concession card, Centrelink Health Care card, DVA card, Safety Net entitlement card)
- > Prescription record form, if they have one.

For more information

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