

# Guidance for Community Pharmacy Funding for COVID-19

1 July 2023

## **Purpose**

The purpose of this guidance document is to

 Update the community pharmacy sector on funding for COVID-19 Care in the Community (CitC) – Pharmacy Services

## **Background**

Primary care funding for COVID-19 was last reviewed in February 2023 and continued to support the alignment of access criteria for COVID-19 anti-viral medicines with funding for pro-active initial clinical assessments. This recognised that those populations have a higher risk for serious health outcomes from a COVID-19 infection.

The model of care continues to reflect the move from a pandemic response to an equity-based approach targeting those at higher risk of poorer health outcomes from COVID-19 including priority and vulnerable populations. This model of care aligns with the current COVID-19 testing plan, public health measures and policy settings, and keeps within the budgeted forecast for COVID-19 funding until 30 September 2023.

## Pharmacy guidance

All existing Care in the Community (CitC) pharmacy services relating to COVID-19 continue unchanged. The pricing schedule is contained in Appendix 1.

# **COVID-19 Antivirals Eligibility Review**

This service recognises that some Service Users seeking Pharmacist-Only Supply of COVID-19 antivirals will be found to be ineligible.

If a provider consults with a Service User and discovers they do not meet the Pharmac eligibility criteria for funded COVID-19 antivirals, the provider can claim the COVID-19 Antivirals Eligibility Review fee.

If a provider consults with the Service User and discovers they meet the Pharmac eligibility criteria for funded COVID-19 antivirals, but these medicines are not appropriate for clinical reasons, the provider can claim the Medicines Management Consultation fee.

As per the current Service Specification, the reason the antivirals were not supplied must be documented in CCCM.

In exceptional circumstances, if a COVID-19 Antivirals Eligibility Review takes longer than 15 minutes providers may claim two service fees.



#### **APPENDIX 1:**

### PRICING SCHEDULE FOR COVID-19 Care in the Community – PHARMACY SERVICES

| Consult type Virtual medicines management advice and support   |  |                                    |
|--|--|------------------------------------|
|  | In-home visit where clinically required for COVID-19 cases |                                    |
| Pricing Item   |  | Funding<br>Rate (GST<br>exclusive) |
| COVID-19 Antivirals Eligibility Review (if the service user doesn't meet Pharmac eligibility criteria for COVID-19 antivirals), Per 15-Minutes |  | \$37.50                            |
| Medicines Management Consult, Per 30-minutes   |  | \$75.00                            |
| After-hours weekday and weekend Medicines Management Consult, Per 30-minutes   |  | \$112.50                           |
| Compliance Packaging (for COVID-19 specific medicines eg, Paxlovid renal dosing)   |  | \$10.00                            |
| In-Home Visit (for 1 pharmacist), Per 60-minutes   |  | \$150.00                           |
| In-Home Visit (for an additional support person), Per 60-minutes   |  | \$50.00                            |
| In-Home Visit - Mileage rate, Per kilometre  |  | \$0.83                             |
| Reimbursement of Prescription Co-Payment, Per eligible medicine  |  | \$4.35                             |
| Reimbursement for Medicine Delivery, Per Delivery  |  | \$7.00                             |

#### **Notes**

- The pricing schedule only applies to confirmed or probable COVID-19 cases. There are now no exceptions for close contacts or household contacts as there is no requirement for these people to isolate.
- Ordinary business hours are 8:00 am to 6:00 pm on Monday to Friday (excluding public holidays in the providers geographic area) or as agreed between an individual provider and their district (as per the Integrated Community Pharmacy Services Agreement (ICPSA)
- Pharmacy home visits should be claimed on a per trip basis. That is, if the
  pharmacist visits three service users during a trip that takes one hour, they should
  charge one \$150 fee not three \$150 fees
- Conditions of claiming:
  - No fees are to be charged to service users
  - No simultaneous claiming against any other funding stream
- Where clinically indicated, in exceptional circumstances, providers may claim multiple service fees if an extended consultation is needed. For example, if a Medicines Management Consult for a complex case takes longer than 30 minutes providers may claim two service fees.