

Senate Finance and Public Administration Standing Committee
ANSWERS TO QUESTIONS ON NOTICE
BUDGET ESTIMATES – 28 May 2009

Human Services Portfolio

Department/Agency: Medicare Australia
Outcome/Output Group: Outcome 1/Output Group 1
Topic: Prescription Shopping Program

Senator: Ryan

Question reference number: HS25

Date set by committee for the return of answer: 10 July 2009

Question:

HS25a: Upon report to the Prescription Shopping Information Service, how are patients and providers investigated?

HS25b: What are the implications for providers and patients reported?

Answer:

HS25a-b: Under the *Medicare Australia (Functions of Chief Executive Officer) Directions 2005*, which were issued by the then Minister for Human Services, a ‘prescription shopper’ is defined as a person who in any three month period has had supplied to them:

- Pharmaceutical Benefits Scheme (PBS) items prescribed by six or more different prescribers (excluding specialists and dentists); or
- a total of 25 or more target PBS items (central nervous system drugs); or
- a total of 50 or more of any PBS items.

Many people who meet the Prescription Shopping Program (PSP) criteria have genuine reasons for accessing high levels of medication, for example, chronic illness. The PSP focuses on providing information to assist prescribers to make informed prescribing decisions and thereby assist them to better manage the health outcomes of their patient.

There are two key elements to the program:

- Prescription Shopping Information Service (PSIS) (available 24 hours, seven days a week to providers who are registered with the Service); and
- a patient and provider alert service conducted by Medicare Australia.

Under the Information Service, providers who suspect patients are seeking PBS medicines in excess of medical need, can find out if their patients have been identified by Medicare Australia as potential prescription shoppers. If patients have been identified, providers can get almost real time information on the number and type of PBS medicines supplied to that patient and the number of providers who issued those prescriptions.

Under the second part of the PSP, Medicare Australia conducts analysis of PBS data and notifies relevant providers and patients about cases where it appears PBS medicines may have been supplied in excess of medical need. It is up to the provider, in consultation with the patient, to decide the best course of action thereafter.

When Medicare Australia contacts a provider about a patient of concern, the provider is supplied with a report on the type and amount of PBS medicine supplied to that patient. They are also told the number of providers that the patient visited in the latest calendar quarter. The patient will also receive a letter from Medicare Australia explaining that Medicare Australia has notified all of their providers and that it may be in their best interest to consult with one provider/practice in regard to their clinical management.

Medicare Australia's only role in these matters is the provision of information to advise providers and patients. Medicare Australia has no role in the clinical treatment of the patient.

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