

Aboriginal Health Services pharmaceutical supplies request and claim (PB042)

(Section 100, *National Health Act 1953*)

When to use this form

Use this form to:

- request pharmaceutical benefits for the treatment of patients of an Aboriginal Health Service (AHS), **and**
- claim payment for the provision of pharmaceutical benefits to an AHS.

Terms and conditions

- a) Pharmaceutical benefits can only be claimed for those AHS at the locations approved by the Australian Government.
- b) The AHS named in this form must adhere to the relevant applicable laws of the state or territory for the storage and supply of pharmaceutical benefits.
- c) The AHS named in this form and/or the communities from which pharmaceutical benefits will be supplied has/have facilities appropriate for the storage of medicines. Appropriate facilities require storage in a secure manner to prevent access by unauthorised persons, to maintain the quality of the medicines, and in accordance with any special conditions specified by the manufacturer.
- d) Where medicines are restricted pharmaceutical benefits or authority required pharmaceutical benefits, they must be used only in accordance with the relevant restriction or condition.
- e) Where a Pharmaceutical Benefits Scheme (PBS) listed medicine includes a Brand Premium or a Therapeutic Group Premium the lowest priced alternative should be supplied where appropriate.
- f) Records must be maintained for all pharmaceutical benefits supplied to patients. These records must be available for inspection for a period of at least 24 months after the date of supply to the patient.
- g) Pharmaceutical benefits claimed must be supplied free of charge to patients of an AHS.
- h) The AHS named in this form must not be a party to an arrangement, such as a coordinated care trial, for which PBS funds have been provided for the pharmaceutical benefits listed in this form.
- i) Where pharmaceutical benefits are labelled for an individual patient of an AHS they must be provided on the basis of a Remote Area Aboriginal Health Services (RAAHS) prescription in accordance with the applicable laws of the state or territory.
- j) A RAAHS prescription is a written instruction for the supply and administration of pharmaceutical benefits, to an individual patient to be provided through an AHS, where the provision of pharmaceutical benefits is in accordance with the applicable laws of the state or territory.
- k) Claims for payment of the RAAHS patient specific medicine supply fee for pharmaceutical benefits supplied prior to 1 January 2018 will not be accepted by Services Australia.

All items contained in section 2 of the Schedule of Pharmaceutical Benefits, in force at the time of supply, are available under these arrangements, EXCLUDING:

1. Extemporaneously prepared items (section 4 of the Schedule of Pharmaceutical Benefits)
2. Prescriber Bag (Emergency drug) supplies
3. Repatriation Pharmaceutical Benefit Scheme pharmaceutical benefits
4. Highly Specialised Drugs, **and**
5. Schedule 8 medicines as defined by the drugs and poisons legislation in the relevant state or territory.

If any of the above pharmaceutical benefits are required they must be prescribed on an approved prescription form and dispensed under standard PBS arrangements.

How to complete the Requested items section

All claims must contain the following:

- An item code must be supplied for each item.
- The 'Quantity required' and 'Quantity supplied' columns must have entries for each item.
- The Patient Specific Medicine Supply Fee (PSMSF) is for each PBS medicine ordered on a RAAHS prescription and labeled for an individual patient for supply through an approved AHS.
- The 'Quantity supplied' and 'Subset quantity supplied for an individual' PSMSF, need to be claimed collectively on the one form. The 'Subset quantity supplied for an individual' cannot carry over into other claims.
- If you are claiming the PSMSF, the quantities need to be a subset of the 'Quantity supplied' column. The subset cannot exceed the total quantity supplied.
- The 'Total number of items supplied for an individual for this claim' field must be filled in.

Filling in this form

You can complete this form on your computer, print and sign it.

If you have a printed form:

- Use black or blue pen
- Print in BLOCK LETTERS

For more information

Go to servicesaustralia.gov.au/healthprofessionals or call **132 290** Monday to Friday, 8.30 am to 5 pm, Australian Eastern Standard Time.

Call charges may apply.



medicare



Aboriginal Health Services pharmaceutical supplies request and claim (PB042)

(Section 100, *National Health Act 1953*)

Aboriginal Health Services details

1 AHS registration number

2 Community name

3 Address

Postcode

Requested items

4 Items requested by AHS

Serial number (<i>pharmacy use</i>)	Code	Manu- facturer's code	Description of goods (item, form and strength)	Quantity required	Quantity supplied (multiples of PBS maximum)	Subset quantity supplied for an individual

Pharmacy details

7 Pharmacy approval number

8 Pharmacy name

9 Address

 Postcode

Privacy notice

10 Personal information is protected by law (including the *Privacy Act 1988*) and is collected by Services Australia for the purposes of assessing and processing this authority application.

Personal information may be used by Services Australia, or given to other parties where the individual has agreed to this, or where it is required or authorised by law (including for the purpose of research or conducting investigations).

More information about the way in which Services Australia manages personal information, including our privacy policy, can be found at servicesaustralia.gov.au/privacy

Signatory's declaration

11 I declare that:

- the goods listed have been requested by and supplied to the Aboriginal Health Services named above and all pharmaceutical benefits have been supplied in accordance with all the terms and conditions.
- the subset quantity supplied for an individual was prepared and labelled for an individual patient of the Aboriginal Health Services and supplied under a Remote Area Aboriginal Health Services prescription.
- the information I have provided in this form is complete and correct.

I understand that:

- it is an offence under the *Crimes Act 1914* to obtain monies from the Australian Government or any public authority under the Australian Government by means of any false pretence or untrue representation.
- I cannot sign the declaration for this claim as both the AHS qualified health professional and the Pharmacy Representative.
- giving false or misleading information is a serious offence.

Full name

Position

Pharmacist

Owner

Director

Pharmacy Manager

Other Give details

Signature

Date of supply

Your claim reference number

Returning this form

The original must be submitted to Services Australia for payment with a copy retained by the pharmacy and a further copy provided to the AHS.

Return this form and any supporting documents:

- by email to: qld.ahs@servicesaustralia.gov.au
There may be risks with sending personal information through unsecured networks or email channels.

or

- by post to:
Pharmaceutical Benefits Scheme
Services Australia
Remote Area Aboriginal Health Services
PO Box 9826
BRISBANE QLD 4001