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Shared Services
Partnership
Primary Care Services



Electronic Transmission of Claims (ETC)

Laying the foundations for
seamless digital
prescription solutions

Overview

Electronic Transmission of Claims (ETC) delivers an electronic dispensing message from community pharmacy to the NHS Wales Shared Services Partnership (NWSSP). In early releases the message will provide an electronic version of endorsing information with the paper prescription form remaining the legal claim for payment.

The service is being delivered in a collaborative development between pharmacy PMR systems suppliers and the Primary Care Services (PCS) division of NWSSP.

Strategic Context

The vision for the development of the ETC service is built around: -

- Welsh Government health and social care policies that drive the strategic direction for digital healthcare systems
- The overarching NWSSP IM&T strategy and the strategic direction of partner organisations such as the NHS Wales Informatics Service (NWIS).

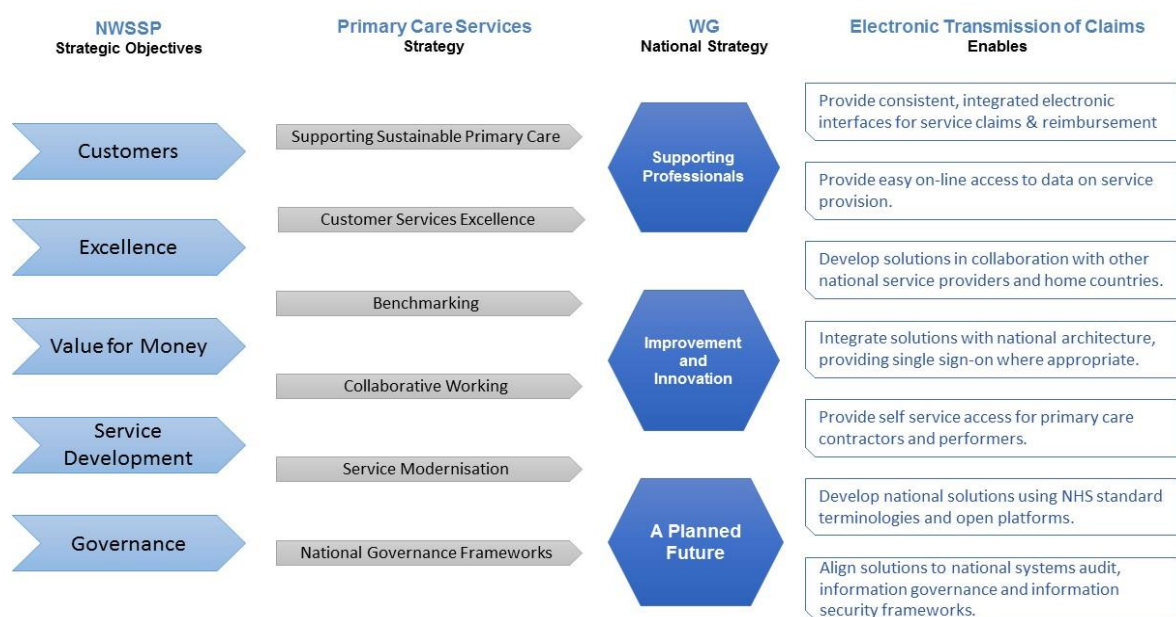
The service is aligned to key areas of the strategic and legislative framework developed by the Welsh Government around information and the digital agenda, in particular: -

- [Welsh Government \(2017\) Statement of Intent](#): better use of health and care data for safe, effective care and efficient service
- [Informed Health and Care](#): A Digital Health and Social Care Strategy for Wales

In particular, the service is designed to support three of the key principles of the Informed Health and Care strategy namely: -

- Supporting Professionals
- Improvement and Innovation
- A Planned Future

The following diagram shows how the ETC service is aligned to the relevant components of Informed Health and Care and the NWSSP strategic objectives.



Delivering benefits now

BENEFITS FOR PHARMACY CONTRACTORS

Once ETC is fully operational, sorting and submission arrangements will be simplified. In essence, this means that the majority of the prescription account can simply be placed in Group 1 of the submission bundle. There will still be a small number of exceptions to be placed in Group 1a but these will be greatly reduced.

ETC will increase the number of prescriptions that NWSSP can automatically process. This will reduce the amount of manual processing and the scope for human error. The introduction of automatic processing by scanning the 2DRx barcode has contributed to an increase in processing accuracy from 99.1% to 99.5%. We expect to see further improvement as a result of ETC.

ETC will reduce the reliance on manual keying of prescription data. This will allow us to divert resource into providing help and advice to contractors and to continuously review and improve the submission, claim and payment experience.

BENEFITS FOR NHS WALES

The reduced reliance on manual keying will allow us to continue to meet our capacity improvement (CIP) targets. Since the inception of our prescription automation programme we have seen a 60% increase in the number of prescription items processed whilst reducing our processing workforce by 55%. This has enabled us to make a major contribution to the release of funds back to Health Boards for reinvestment in frontline services. ETC will enable us to continue this trend.



Delivering benefits in the medium term

BENEFITS FOR PHARMACY CONTRACTORS

Once ETC is fully rolled out, the time taken to process pharmacy accounts will be shortened. NWSSP will then work with Welsh Government to agree the resource costs required to manually process the remaining prescriptions and assess whether the payment cycle can be shortened and earlier payment of accounts can be achieved.

Our strategy throughout the lifecycle of the automation programme has been to reinvest released resource to develop additional digital services for pharmacy contractors. This has led to the delivery of enhanced electronic claim and information systems (e.g. eSchedule, NECAF, eReturns). ETC will enable us to continue to enhance these services, for example, by providing an end-to-end view of the status of each claim as it goes through the prescription processing cycle and further developing enhanced services management information.

We will also continue to review the scope of the ETC service to ascertain where it can contribute to the streamlining of processes such as repeat dispensing. For example, by reconciling ETC claims against the master repeat dispensed prescription, ETC could enable us to dispense with the requirement to produce and submit the slave “instalment” prescriptions.



The Building Blocks of a Fully Electronic Prescription Service

BENEFITS FOR COMMUNITY PHARMACY AND NHS WALES

ETC has been designed to ensure that it can fully integrate with any future development of a fully electronic prescription service. This means that, as soon as an electronic prescriber to dispenser prescription message is implemented, the full benefits of a paperless service can be realised. For pharmacy contractors this will mean minimal paper handling, storage and submission and improved information governance and security through secure electronic messaging.

We are cognisant of the fact that, whilst the service is focussed on administration and reimbursement, there are dependencies and cross-over into clinical systems and processes. ETC has therefore been designed to optimize integration with related IM&T services by conforming to national authentication, security and messaging standards and implementing NHS standard terminologies (such as SNOMED CT and ONS reference data standards).

Additionally, the use of standard terminologies and open platforms will make ETC data available for consumption and analysis (by third party systems where appropriate) to support business process development, informed decision making and improved service planning.