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Real Time Exemption Checking Service – Client Functional Specification

Document Management

Revision History

Version	Date	Summary of Changes
0.1	15/06/2018	Initial version for review
0.2	19/06/2018	Clarified requirements wording after BA review
0.3	27/06/2018	Amended PEC-FR-37 to allow printing tokens for exempt patients where prescribed items are Schedule 2 or 3 CDs
		Added requirement PEC-FR-52 to describe behaviour in claim amendment
		Added an item to Appendix A to be used for Universal Credit exemption
		Reworded PEC-FR-28, PEC-FR-39, PEC-FR-35 & PEC-FR-51 to clarify meaning.
		Added wording to 8.1 to clarify claim message behaviour.
		Filled out architecture section.
0.4	2/08/2018	Extended architecture section to include Phase 2/direct connection
		Amended PEC-FR-12 changing RBAC activity required to access service
		Amended vocabulary in Appendix A adding 'any other value'
		Amended PEC-FR-29 to remove part relating to persisting exemption to patient record.
		Amended PEC-FR-12 changing activity required.
		Removed PEC-FR-28, PEC-FR-45, PEC-FR-46, PEC-FR-47, PEC-FR-48 as no patient record update required
0.5	9/08/2018	Amended requirement PEC-FR-23 as prescription exemption checks cannot be requested by patient's representative.
0.6	17/08/2018	Amended Appendix A to reflect latest vocabulary changes
0.7	20/09/2018	Added PEC-FR-30 and 7.1.4 and removed PEC-FR-38 to place paper prescriptions out of scope.
		Added missing text under 3.2
		Amended PEC-FR-36, PEC-FR-43, PEC-FR-51 and 7.2 to not allow patient override of exemption response where an exemption has been found
		Added PEC-FR-49 to recommend configuration of token printing for CDs
		Clarified wording in 8.1
		Amended PEC-FR-29 to allow a check per prescription, following volumetric analysis.
		Removed PEC-FR-27 and added PEC-FR-49.1 to recommend configuration of token printing by default
0.8	21/11/2018	Removed PEC-FR-29 and added PEC-FR-31 ensuring checks are made per prescription.
		Added PEC-FR-32 preventing checks for EPS R1
		Added PEC-FR-49.2 requiring showing exemption where available
		Added architecture diagram and description for Beta release
1.0	30/05/2019	Amendments following initial implementation:

		Added PEC-FR-49.3 making exemption info available when handing to pt
		Removed PEC-FR-39 as duplicate
		Retitled to Real Time Exemption Checking Service to differentiate from an existing service already provided by NHS BSA
		7.3 amended to reflect no expiry date in response
1.1	20/06/2019	Added PEC-FR-41
1.2	09/10/2019	Updated GitHub link & reviewers table
1.3	09/12/2019	Updated 'Prescriber endorsements' and amended PEC-FR-22

Reviewers

This document must be reviewed by the following people:

Reviewer name	Title / Responsibility	Date	Version
Nazia Kotia	NHS Digital Business Analyst	19/06/18	0.1
Scott Pollard	NHSBSA Project Manager	26/06/18	0.2
Neil Tait	NHSBSA Technical Architect	26/06/18	Not reviewed
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Andrew Coates	NHS Digital Programme Manager	17/05/19	1.0
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Richard Booth	NHS Digital Senior Technical Architect	20/06/19	1.1

Approved by

This document must be approved by the following people:

Name	Approval	Date	Version
Andrew Coates, NHS Digital Programme Manager	Approved	20/06/19	1.1
		09/10/19	1.2
		10/12/19	1.3
Richard Booth, NHS Digital Senior Technical Architect	Approved	20/06/19	1.1
		10/12/19	1.3

Glossary of Terms

Term / Abbreviation	What it stands for
Electronic prescription	The information transmitted electronically, with the inclusion of an Advanced Electronic Signature, from a prescriber to Spine to allow dispensing and claiming via EPS
Electronic Prescription Service (EPS)	Electronic Prescription Service delivered by the EPS/ETP programme
Electronic Transmission of Prescriptions (ETP)	Electronic Transmission of Prescriptions programme, now known as the Electronic Prescription Service
Prescription token	Paper copy of the electronic prescription used to capture the patient's declaration of charge paid or exemption.
FP10	The paper form that is used to create a paper–based NHS prescription.
Medication item	Any medicine, appliance or reagent that can be prescribed
Organisation Data Service (ODS)	The Organisation Data Service (ODS) provided by the Authority. It is responsible for the national policy and standards with regard to organisation and practitioner codes.
Patient Medical Record (PMR)	A term used to describe the module/component of the system that holds patient medical records. Some implementers use the term PMR to describe a single patient medication record. Within the EPS documentation the term relates to the entire collection of patient medical records for the GP practice.
Personal administration	The prescribing, dispensing and claiming of products listed in the GMS Statement of Financial Entitlements, by a GP practice, which can be directly administered to the patient.
Prescribe	The act of authorising medication items on a prescription.
Repeat prescription	A prescriber-authorised repetition of a prescription
Repeatable prescription	A prescription valid for an authorised number of issues
The System	The system seeking compliance with the Real Time Exemption Checking Service

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Further Requirements：

NPFIT-FNT-TO-TIN-1383 IG v3 Foundation Module

NPFIT-FNT-TO-TIN-1023 PDS Compliance Module V2 - Baseline Index

NPFIT-FNT-TO-TIN-1023 PDS Compliance Module V3 - Baseline Index

NPFIT-ELIBR-AREL-DST- 0408.04 ITK Spine Mini Services Client Requirements

NHSBSA Overprint Specification for NHS Prescriptions

NPFIT-ETP-EDB-0278.03 EPS Infrastructure Specification

NPFIT-ETP-EIM-0015 Guidance for Endorsement

NPFIT-FNT-TO-TIN-1383 IG v2 Foundation Module IG v3 Foundation Module

Related Guidance Documents:

NPFIT-ETP-EDB-0025 EPS Prescribing Systems Compliance Specification v6.10

NPFIT-ETP-EIM-0110 RBAC Implementation Guidance for the EPS R2

NPFIT-ETP-EIM-0015 Guidance for Endorsement

Contents

1 About this Document

1.1 Purpose

This document details the functional requirements that must be fulfilled in order for client systems to integrate with the Real Time Exemption Checking Service.

Some aspects of the business processes and implementation will require agreement with the relevant professional and/or representative bodies, and local implementation detail may vary between organisations, in particular identifying those processes which are optional and mandatory. The system will be expected to support the documented business process whether they are optional or mandatory.

This document specifies the functionality required to integrate with the Real Time Exemption Checking Service for dispensing in England.

Dispensing systems must be compliant with the Electronic Prescription Service and so must additionally adhere to the requirements defined within the "Dispensing Systems Compliance Specification" (ref: NPFIT-ETP-EDB-0024).

1.2 Audience

This document has been written for implementers.

1.3 Content

Within this document, system requirements are explicitly numbered and listed within tables. Additional documentation, guidance and illustrations are contained within each document section to support the understanding of the requirements.

The key words "MUST", "MUST NOT", "REQUIRED", "SHALL", "SHALL NOT", "SHOULD", "SHOULD NOT", "RECOMMENDED", "MAY", and "OPTIONAL" in this document are to be interpreted as described in RFC 2119.

2 Background

NHS Prescription Fraud is currently costing the NHS over £200 million a year. Patients are not clear what exemptions they are entitled to and how to obtain the required proof. The current paper system is open to error as although checks are carried out at the dispensary the information available at this point may be limited. Checks are also carried out by the NHSBSA but this is only once medication has been dispensed.

NHS Digital has been asked to provide an effective digital solution to ensure that exemptions from prescription charges are applied correctly at the point of dispensing medication.

The service will enable dispensers to check a Patients' prescription exemption status, resulting in exemptions being applied correctly prior to medication being dispensed, thereby reducing prescription fraud in England.

There are numerous benefits associated with this change, including dispensers benefiting from efficient exemption status checking due to the digitising of the process, which will in turn reduce the burden on pharmacy. Any integration with the Real Time

Exemption Checking Service must not increase pharmacy activity nor hinder any patient from receiving their medication.

2.1 Architecture

The architecture is based on the NHSBSA operationalising an existing service used for checking existing exemptions for patients wishing to purchase a Prescription Prepayment Certificate online.

The service maintains the existing dispensing system interfaces with the Spine EPS application (Spine Security Broker, EPS Claim messaging) and provides a simple Application Programming Interface (API) gateway from NHSBSA cloud-based infrastructure.

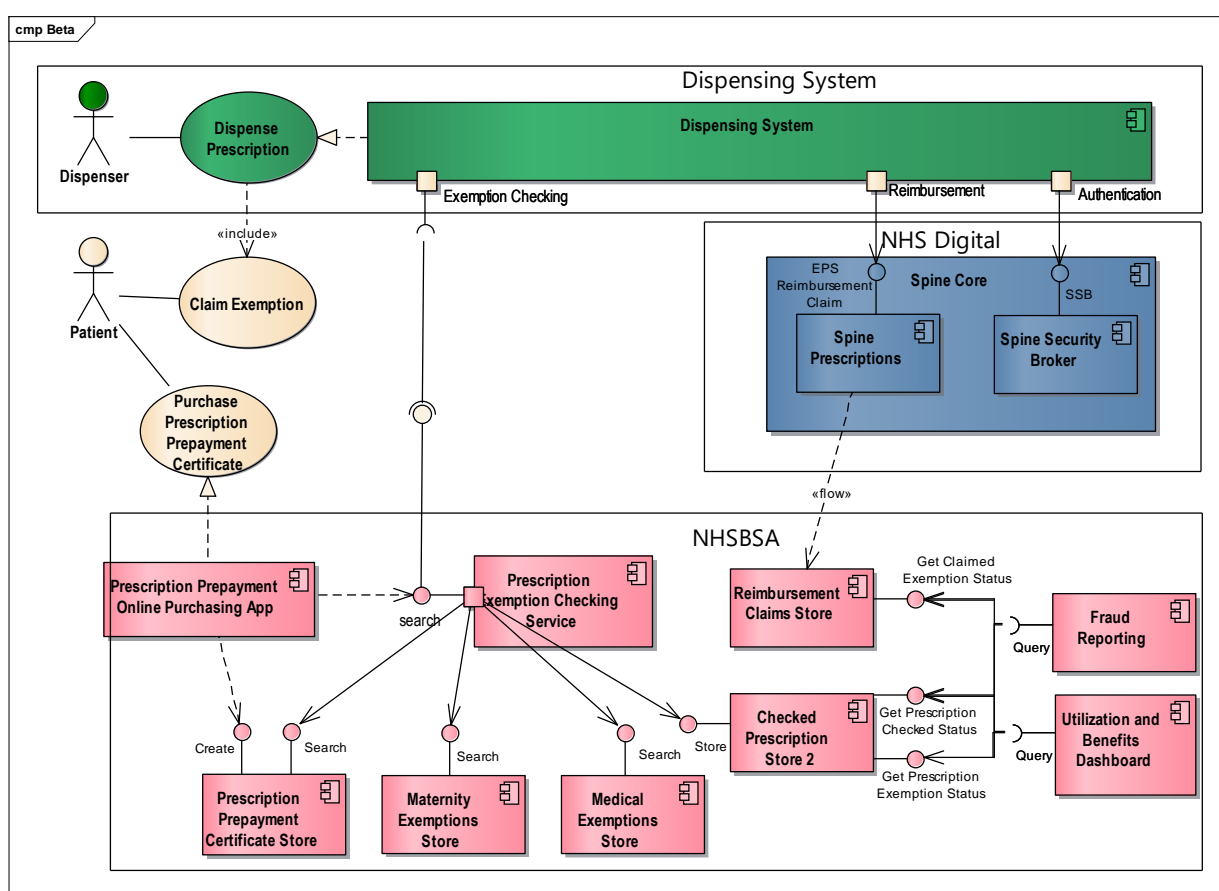**Figure 1: Real Time Exemption Checking Service components**

3 Scope

3.1 Client Functional Scope

The following are explicitly **out of scope** for the Real Time Exemption Checking Service:

- Bulk prescriptions
- Prescription charge refund

- Dispensing outside of England
- Dispensing of non-English prescriptions in England
- FP 10 REC
- Home Oxygen Therapy Service
- FP10, EPS Release 1 and any other prescriptions which cannot be claimed electronically

3.2 Service Functional Scope

There are a number of ways by which patients can be exempt from exemption charges, and this may be updated as policy changes. Not all of these exemption types are available through the exemption checking service, and the exemption types may be extended as new information sources are connected. The interface has been designed to support introduction of new exemption types without a need to make changes to the externally facing elements.

4 Messaging & Integration

The service is provided as a simple web service. The integration requirements are documented at: https://nhsconnect.github.io/prescription-exemptions/

Ref	Requirement
PEC-FR-1	Systems must meet the Real Time Exemption Checking Service integration specification.

5 Patient Demographics

The Real Time Exemption Checking Service is available to any patient with a known and valid NHS Number obtained from Spine Demographics and whose record is not flagged within Spine Demographics with a confidentiality code of "sensitive" or flagged as deceased.

5.1 Synchronisation of Demographics Attributes

For integration with the Real Time Exemption Checking Service, a minimum set of patient demographic attributes must be synchronised between the local system and Spine Demographics. These attributes are as follows:

- NHS Number

- Usual name

- Usual address

- Date of birth

- Gender

Telecom contact details, which includes email, are deliberately excluded as they have been found to be frequently updated and inconsistently formatted, resulting in unnecessary synchronisation overhead.

5.2 Demographics restrictions to Exemption Checking

The following scenarios are not permitted to use the Real Time Exemption Checking Service

5.2.1 Invalid Values in Demographics Data

Data retrieved from Spine demographics and local systems may not meet data format requirements and must not be permitted to be included in requests to the service. Common examples include non-ASCII characters.

5.2.2 Exemptions for Dead Patients

The System must prevent the checking of exemptions for dead patients. The System must prevent this based upon the data from Spine Demographics or locally: The 'deceasedTime' attribute within the patient's Spine Demographics record holds details of time of death. This requirement applies to both the death status flags within Spine Demographics of 'formally' and 'informally' dead. Please refer to the Spine Demographics specification for definitions and business processes for patients becoming marked as dead.

An internal trigger from Spine Demographics informs the Spine Prescriptions system that a patient has died, cancelling all outstanding prescriptions for that patient on Spine which are yet to be downloaded by the dispensing system, and marking others as pending cancellation.

5.2.3 Exemptions for 'Sensitive' Patients

A demographic record that is sensitive will be identified on PDS with a 'confidentialityCode' attribute of "S". EPS prescriptions are not generated for patients with records flagged as sensitive. This means that checks for these prescriptions should not take place, but also that dispensing systems do not generally include capture of the sensitive flag. Where the sensitive flag is available in the dispensing system the System must ensure that an electronic prescription cannot be authorised for these patients.

Ref	Requirement
PEC-FR-2	The system must implement Spine demographics synchronisation as described either in: "PDS Compliance Module V3 - Baseline Index" (ref: NPFIT-FNT-TO-TIN-1188) OR ITK PDS Spine Mini Service bundle as described in the document ITK Spine Mini Services Client Requirements (NPFIT-ELIBR-AREL-DST-0408.04) OR "PDS Compliance Module V2 - Baseline Index" (ref: NPFIT-FNT-TO-TIN-1188)
PEC-FR-3	The System <u>must</u> synchronise at least the following patient attributes from Spine Demographics with the local demographic record. • Usual name • Usual address • Date of birth • Gender
PEC-FR-4	The System <u>must not</u> automatically synchronise patient telecom details with Spine demographics, including 'use' attributes.
PEC-FR-5	The system must only allow prescription exemption checks to take place for patients with demographic records synchronised with Spine demographics.
PEC-FR-6	The System must prevent a prescription exemption check for a patient who is recorded as deceased.
PEC-FR-7	The System must prevent a prescription exemption check for a patient whose demographic record is flagged as sensitive.
PEC-FR-8	The System must prevent incorrectly formatted data from being submitted within a prescription exemption check.

6 Authentication & Authorization

All calls to the must be made by a user authenticated and authorized by Spine, as described by NHS Digital Information Governance requirements and Spine External Integration Specification Part 6. Clients must implement Role Based Access Control (RBAC) as defined in the National RBAC Database (NRD), and in order to map the

correct activities to roles implementation must include at least the pharmacy-related roles. At version 27.2 of the NRD the following baseline roles are included in the EPS Pharmacy restriction set:

EPS Pharmacy	R8008	Admin/Clinical Support Access Role
EPS Pharmacy	R8004	Healthcare Student Access Role
EPS Pharmacy	R8003	Health Professional Access Role
EPS Pharmacy	R1290	Pharmacist

6.1 Locum Staff

Some users, particularly locum pharmacists may work in many organisations at short notice. Rather than being registered with a User Role Profile (URP) per employing organisation these users can be registered with a single URP associated with a virtual 'National Locum Pharmacy' organisation ODS code (code = FFFFF). When including organisation details in the request this must be the detail of the requesting organisation rather than from the URP.

Ref	Requirement
PEC-FR-10	The system must implement Spine authentication and Roles-Based Access Control (RBAC) as defined in NHS Digital Information Governance requirements.
PEC-FR-11	The System must implement the Baseline Roles defined in the EPS Pharmacy restriction set of the National RBAC Database.
PEC-FR-12	The System must authorize only authenticated users with the RBAC activity *B0570 - Perform Pharmacy Activities* to carry out prescription exemption checks.
PEC-FR-13	The System must only allow users to carry out prescription exemption checks within a current authenticated session.
PEC-FR-14	The System must include the organisation detail of the requesting organisation in authentication headers submitted to the Real Time Exemption Checking Service.

7 Prescription Exemption Checking

The Real Time Exemption Checking Service provides point in time information and so can only be used at the point of dispensing when the patient or patient's representative is asked to pay. Accordingly, it is not appropriate for use to check historical exemptions as required in the case of prescription charge refunds.

7.1 Initiating a Prescription Exemption Check

The trigger for an exemption check must be based on dispensing activity, which may include creation of a new patient record or at the request of the patient; the system must not poll the Service or call the Service on expiry of an existing exemption.

A prescription exemption check is only valid for a single prescription, and so if the patient has several prescriptions to dispense then a separate prescription exemption check should be made for each.

7.1.1 Age-Related Exemptions

Age-related exemptions (those children aged under 16 or people aged 60 and over) are out of scope for the Real Time Exemption Checking Service and a prescription exemption check must not be made for these patients. As per the drug tariff, patients whose date of birth is automatically printed out on a hard copy paper prescription or included in an EPS prescription do not need to complete an exemption declaration. Patients with an EPS prescription which does not include date of birth or with hand written prescription forms where the date of birth is inserted manually must continue to make an exemption declaration.

7.1.2 Prisoners on Release

Released prisoners and those released from secure accommodation do not have to pay a prescription charge and a prescription exemption check must not be made for these patients. As per the drug tariff these patients are identified by 'HMP', and the prison or secure accommodation address and telephone number printed in the box provided for the practice address on the front of the form, with the prescribing code and the cost center code for the organisation. These patients do not have to sign the exemption declaration.

7.1.3 Prescriber-managed exemptions

If a prescription **only** contains items where fee exemption is indicated by the following prescriber endorsements, they are out of scope for the Real Time Exemption Checking service:

- Contraceptive - CC/♀
- Sexual health treatment – FS

If the prescription contains endorsed items and other non-endorsed items, an RTEC check must be carried out in this scenario.

7.1.4 Paper Prescriptions

Where prescriptions are not claimed electronically as in EPS Release 2 there is no means to indicate to the reimbursement authority that a patient's declared exemption has been confirmed through the service. Exemption checks for paper prescriptions such as FP10 and EPS Release 1 prescriptions and other forms which may need reimbursement such as FP10 REC and NUMSAS (NHS Urgent Medication Supply Advanced Service) therefore must not use the service. Future EPS development may provide electronic claiming for other prescription types such as FP10 MDA; these would therefore be in scope of the Real Time Exemption Checking Service.

Ref	Requirement
PEC-FR-20	The system must not carry out a prescription exemption check where the patient is a child aged under 16 or is aged 60 and over.
PEC-FR-21	The system must not carry out a prescription exemption check in the case that the patient is a prisoner on release.
PEC-FR-22	The system must not carry out a prescription exemption check in the case of prescriptions **wholly** exempt from charges due to prescriber endorsements.
PEC-FR-23	The System must carry out a prescription exemption check based only on either dispensing activity or the request of the patient.
PEC-FR-24	The system must be able to carry out a prescription exemption check automatically as part of the dispensing workflow at the point of dispensing.
PEC-FR-25	The system must allow automatic prescription exemption checks as part of the dispensing workflow to be configurable as toggled on or off.
PEC-FR-26	The system must allow the user to manually initiate a prescription exemption check.
PEC-FR-27	The system must make the source of patient exemption information clear in the user interface.
PEC-FR-30	The system must not carry out a prescription exemption check for prescriptions which cannot be claimed electronically.
PEC-FR-31	The system must not apply a prescription exemption check response to more than one prescription.
PEC-FR-32	The system must prevent a prescription exemption check from being carried out for a prescription which cannot be claimed electronically.

7.2 Handling Prescription Exemption Check Responses

Where a prescription exemption is successfully returned by the service this must be applied by default to the prescription. Systems must not allow patients to override the prescription exemption service response and select a different or no exemption.

Where an exemption is found the prescription exemption check response may indicate just that an exemption exists or may include the detail of the patient's exemption type. If the exemption type detail is included then this must be shown to the user.

Where a prescription exemption is successfully returned by the service systems should not print dispensing tokens for EPS Release 2 prescriptions by default. Some dispensing workflows include capture of a signature from collectors of Schedule 2 or 3 Controlled Drugs a token may be necessary in these cases, and so printing of tokens by default for these prescriptions should be configurable.

Where no exemption is found the system must indicate that the service has been unable to find an exemption but that an exemption may still exist and the dispenser must defer to the normal exemption checking process.

7.2.1 Failed Calls to Real Time Exemption Checking Service

The prescription exemption service is built to offer a high degree of availability but as it does not provide clinical data, and failure will not have clinical impact or prevent the patient from receiving prescribed items it is not necessarily hosted to the same standard as, for example, the Spine EPS components. Systems must gracefully handle failed prescription exemption checks in a way that 'fails fast' and does not delay the user or disrupt dispensary workflow. The paper exemption declaration and any pre-existing exemption evidence must continue to be available.

7.2.2 Audit Logging

A system audit log recording and monitoring which users performed which action on which resources is required to meet information governance requirements. Prescription exemption checks are to be included in this log.

Ref	Requirement
PEC-FR-35	Systems must apply prescription exemptions returned by an exemption check to prescriptions by default.
PEC-FR-36	Systems must not allow the user to override the prescription exemption check response where an exemption has been found by the exemption checking service.
PEC-FR-40	Systems must not indicate to the user that no exemption *exists* where a prescription exemption check shows no exemption is *found*
PEC-FR-41	Systems must inform the user of the need to obtain an exemption declaration including signature where a prescription exemption check shows no exemption is found.
PEC-FR-42	Systems must inform the user of the need to obtain an exemption declaration including signature where a call to the service fails.
PEC-FR-43	Systems must inform the user that they need not obtain evidence or an exemption declaration where a prescription exemption check has shown an exemption applies.
PEC-FR-44	Systems must include prescription exemption checks in scope of the system audit log.

PEC-FR-45	Systems must allow prompts for obtaining declaration and signature and token printing to be configurable as toggled on or off.
PEC-FR-49	Systems should allow printing of tokens for Schedule 2 & 3 Controlled Drugs to be configurable as toggled on or off.
PEC-FR-49.1	Systems should allow printing of tokens by default for prescriptions where an exemption has been confirmed to be configurable as toggled on or off.
PEC-FR-49.2	Systems must inform the user of the specific exemption type where this is provided in a prescription exemption check response.
PEC-FR-49.3	Systems should make information on whether they need to obtain an exemption declaration available to users when handing prescriptions to patients such as by showing on token overprint, bag labels, delivery tablets or Point of Sale system.

7.3 Updating Patient Record

As no expiry date is returned by the Real Time Exemption Checking Service the exemption information returned must not be applied to other prescriptions or permanently update the patient record although it must be stored to apply to the prescription claim.

8 Prescription Reimbursement Claims

Prescription exemption information retrieved from the Real Time Exemption Checking Service must be distinguished from exemption information retrieved from the patient in reimbursement claims to the Pricing Authority in order to focus counter-fraud effort.

8.1 EPS Claim Message

The existing EPS Claim message is to be used when submitting reimbursement claims with exemptions confirmed by the Real Time Exemption Checking Service. In order to differentiate patient exemptions confirmed by the service an extended *PrescriptionChargeExemption* vocabulary must be used for indicating patient prescription charge exemption. This vocabulary is included at Annex A.

Prescription exemptions must be current at the point where the patient is asked to pay for the prescription. A prescription exemption check only reflects the patient's exemption at the point in time at which it is carried out. Claims, including claim amendments which include the exemption type and are likely to be sent some time after the prescription is dispensed to the patient. This means that the exemption type for a prescription will need to be stored locally for the period between dispensing and claiming rather than running an exemption check at the point of claiming; similarly if claims are later amended the same exemption type must be included.

8.2 Claims for Paper Prescriptions

EPS R1 and paper FP10 prescriptions are reimbursed by submission of the prescription form, so there is no opportunity to indicate where a prescription exemption has been confirmed by the Real Time Exemption Checking Service.

Ref	Requirement
PEC-FR-50	Systems must implement version 03 of the *PrescriptionChargeExemption* vocabulary
PEC-FR-51	Systems must use any value returned in a prescription exemption check as the Charge Exempt value in reimbursement claims for EPS R2 prescriptions.
PEC-FR-52	Systems must not carry out a prescription check when amending claims for EPS prescriptions unless the amendment is being made at the point of dispensing.

Annex A: PrescriptionChargeExemption vocabulary

Assigned OID: 2.16.840.1.113883.2.1.3.2.4.16.33

Describes possible reasons for someone not having to pay prescription charges.

The age exemption category (0002 and 0004) will be calculated by the system based upon the patient's date of birth contained within the prescription message. Message code 0001 is dependent upon the value entered for medication payment charge codes.

This will generally be present in an Observation act where the code attribute has an id value of "EX" from the Prescription Annotation vocabulary.

Values:

Version:	03
Date:	20 Sep 2018

Value	Description	Note
0000	Patient has paid appropriate charges at old rate	
0001	Patient has paid appropriate charges	
0002	is under 16 years of age	
0003	is 16, 17 or 18 and in full-time education	

0004	is 60 years of age or over	
0005	has a valid maternity exemption certificate	
0006	has a valid medical exemption certificate	
0007	has a valid prescription pre-payment certificate	
0008	has a War Pension exemption certificate	
0009	is named on a current HC2 charges certificate	
0010	was prescribed free-of-charge sexual health medication	
0011	gets income support (IS)	
0012	gets income based Job Seeker's Allowance (JSA (IB))	
0013	is entitled to, or named on a VALID NHS tax credit exemption certificate	
0014	has a partner who gets Pension Credit Guarantee Credit (PGCC)	
0015	Patient does not need to pay the prescription charge	This allows the exemption status to be recorded without actually stating the reason for the exemption.
0016	gets Universal Credit (and meets eligibility criteria)	
9005	has a valid maternity exemption certificate - confirmed by source	
Any other value	Patient does not need to pay the prescription charge - confirmed by source	This allows the exemption status to be confirmed and included in the reimbursement claim without informing the dispenser of the specific exemption