

Scottish Executive

Consultations

Review of NHS Prescription Charges and Exemption Arrangements in Scotland: Consultation Response Form

Your Details

Please complete the details on the Respondent Information Form below. This will help ensure we handle your response appropriately.

Name: IAIN BROWNIE * Required

Organisation: (if applicable) NATIONAL ASSOCIATION FOR COLITIS & CROHNS DISEASE (NACC)

Postal Address:

<u>Home: 3 Holly Crescent Broughton Ferry Dunfermline DD5 2PS</u>	<u>NACC OFFICE: A Beaumont House Sutton Road, St. Albans Hearts AL1 5HH.</u>
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* Required

Post Code: DD5 2PS * Required

E-mail: IAIN@BROWNIE@AOL.COM

Telephone Number: 01382 774570

1. Are you replying as: (please tick one box) * Required

An individual (go to Q2a/b and then Q4)

on behalf of a group or organisation (go to Q3 and then Q4) *

2a. INDIVIDUALS

Do you agree to your response being made available to the public (in Scottish Executive library and/or on the Scottish Executive website)?

Yes (go to 2b below)

No, not at all (We will treat your response as confidential)

2b. Where confidentiality is not requested, we will make your response available to the public on the following basis (please tick one of the following boxes)

- Yes, make my response, name and address all available
- Yes, make my response available, but not my name or address
- Yes, make my response and name available, but not my address

3. ON BEHALF OF GROUPS OR ORGANISATIONS

The name and address of your organisation **will be** made available to the public (in the Scottish Executive library and/or on the Scottish Executive website). Are you also content for your response to be made available?

- Yes
- No We will treat your response as confidential

4. SHARING RESPONSES/FUTURE ENGAGEMENT

We will share your response internally with other Scottish Executive policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for the Scottish Executive to contact you again in the future in relation to this consultation response?

- Yes

~~No~~

Your Consultation Response

Section 4: Discussion and Change Possibilities

4.1 Review of Exemptions Related to Medical Conditions

Question 1: Whether exemption from all charges should continue to be given on medical grounds alone, and if so, whether the list of conditions should be reviewed?

NO. MEDICAL GROUNDS SHOULD NOT BE THE ONLY CRITERIA FOR EXEMPTION FROM CHARGES. THE ABILITY TO PAY SHOULD BE CONSIDERED. SUFFERERS OF INFLAMMATORY BOWEL DISEASE MAY BE PRESCRIBED A NUMBER OF MEDICATIONS TO CONTROL THEIR CHRONIC ILLNESS. LOW INCOME PATIENTS MAY NOT BE ABLE TO AFFORD ALL MEDICATIONS. THE LIST OF CONDITIONS SHOULD ALSO BE REVIEWED

Question 2: Whether, where exemption is given on medical grounds, that exemption should relate only to drugs for the treatment of the medical condition in question, rather than (as at present) covering all drugs whether or not they relate to the condition that gives rise to the exemption?

IDEALLY EXEMPTION SHOULD APPLY TO THE PARTICULAR CONDITION. IN REALITY THIS MAY BE COSTLY TO ADMINISTER/CONTROL AND THE REALISTIC SOLUTION WOULD BE TO ALLOW EXEMPTION ON ALL MEDICATIONS.

Question 3: Whether it makes more sense to provide exemption based on a list of drugs, or based on a list of conditions?

IT WOULD APPEAR THAT EXEMPTION BASED ON A LIST OF CHRONIC CONDITIONS WOULD BE THE EASIEST TO ADMINISTER AS A LIST OF DRUGS WOULD BE OF CONSIDERABLE SIZE AND SOME MEDICATIONS, LIKE STEROIDS THAT ARE PRESCRIBED FOR SOME CONDITIONS THAT ARE CHRONIC, MAY ALSO BE PRESCRIBED FOR SHORT TERM CONTROL OF A CONDITION.

4.2 ECONOMIC NEED – AFFORDABILITY

Pre-payment certificate scheme

Question 1: Whether prescription charge exemption should be extended to HC3 holders?

THIS WOULD BE A SIMPLE SOLUTION TO THE PROBLEM OF DETERMINING EXEMPTION FROM FEES. ONLY THOSE PATIENTS REQUIRING A LARGE NUMBER OF PRESCRIPTIONS WOULD PURCHASE A PPC.

Question 2: What changes to the PPC system would address current barriers to its use, particularly by those on low income, and maximise patients' benefit ?

IF THE LIST OF CHRONIC CONDITIONS ELIGIBLE FOR EXEMPTION IS NOT CHANGED, LOWERING THE COST OF THE PPC SHOULD BE CONSIDERED FOR THOSE ON LOW INCOMES

Flat Fee

Question 1: Whether there should be a reduced flat fee for all (with current income based exemptions) and, if so, the level at which affordability to the patient and cost to the NHS can be balanced?

No. A REDUCED FEE SHOULD ONLY APPLY TO THOSE ON LOW INCOMES.

HOWEVER IF THE COST OF ADMINISTERING A SCHEME IS GREATER THAN THE COST OF LOWERING THE FEE TO ALL PATIENTS REGARDLESS OF INCOME, A REDUCED FLAT FEE SHOULD APPLY TO ALL.

Question 2: Whether there should be a monetary cap to the charges that a patient is required to pay over a set period of time, after which prescriptions should be free within this period of time?

No. THIS WOULD BE DIFFICULT TO ADMINISTER AND AGAIN LIKELY TO BE MORE EXPENSIVE THAN ALLOWING COMPLETE EXEMPTION.

Question 3: Whether there should be a concessionary rate for patients who require frequent prescriptions, and whether the concession should be triggered by the costs incurred over a set

period of time?

THE CONCESSION ALREADY EXISTS IN THE PPC. THE MORE MEDICATIONS PRESCRIBED ON THE PPC, THE BIGGER THE DISCOUNT. THE ISSUE IS THE LEVEL THAT THE PPC IS SET AT AND THE ABILITY TO PAY.

Question 4: Whether there are other changes in the arrangements for pre-payments or caps that are not listed above and which would maintain charge income in general for NHS Boards?

NO COMMENT.

4.3 ABILITY TO PAY

Question 1: Whether there is a case for extending the current 'full time student' threshold to cover tertiary education

NO COMMENT.

Question 2: Whether exemption should be extended to all persons in full time education or training, regardless of their ability to pay?

YES.

Question 3: Whether there should be concessionary charge arrangements for full time students or trainees above set age thresholds?

IF CHARGES ARE NOT WAIVED AS IN QUESTION 2,
THEN CONCESSIONARY CHARGES SHOULD BE GIVEN, IN A
PPC AT THE SAME RATE AS THOSE THAT COULD BE
SET FOR THOSE ON LOW INCOMES.

Question 4: Whether there are other changes in the charging system that could remove the need for special arrangements for full time students or trainees?

I HAVE NO EXPERIENCE OF THE CHARGING SYSTEM TO MAKE
ANY COMMENT.

SECTION 5: SUMMARY OF CHANGE POSSIBILITIES AND VIEWS SOUGHT

5.1 REVIEW OF EXEMPTIONS RELATED TO MEDICAL CONDITIONS

Question 1: Whether exemption from all charges should continue to be given on medical grounds alone, and if so, whether the list of conditions should be reviewed?

Question 2: Whether, where exemption is given on medical grounds, that exemption should relate only to drugs for the treatment of the medical condition in question, rather than (as at present) covering all drugs whether or not they relate to the condition that gives rise to the exemption?