

Subject:	Descriptions of pharmaceutical care provisions 2012 (BR/CU-5056) – clarification within the framework of health insurance.
Summary:	<p>The Dutch Healthcare Authority (<i>Nederlandse Zorgautoriteit</i>, NZa) has approved a new ‘Descriptions of pharmaceutical care provisions’ (BR/CU-5046) policy regulation for 2012. It describes which provisions can be invoiced as pharmaceutical care on the basis of unrestricted tariffs. CVZ has assessed which of the 11 provisions included in the policy regulation can be regarded as insured pharmaceutical care.</p> <p>Pharmaceutical care encompasses advice and guidance normally provided by pharmacists with a view to assessing medication and the responsible use of medicines. The point of departure here is: if the drug is not insured care, then the accompanying advice that is given is not insured care either.</p> <p>Five provisions can be deemed pharmaceutical care within the framework of the <i>Zorgverzekeringswet</i> (Zvw, Health Insurance Act). These are: handing over a PO¹-medicine, instructions regarding a drug-related device; medication-assessment of chronic drug-consumption; pharmaceutical guidance during admission into hospital or when visiting an out-patients’ clinic and pharmaceutical guidance upon discharge from hospital.</p> <p>Five other provisions are not regarded as pharmaceutical care within the framework of the Zvw.</p> <p>Lastly, the policy regulation contains a facultative provision which is intended to provide leeway for innovation. In relation to innovation, care-providers and health care insurers can submit a joint request to the NZa to approve another described provision. It is impossible to state in advance whether such a provision will or will not be regarded as insured care.</p>
Type of ruling:	SpZ = Zvw Outcome of Assessment
Date:	29 August 2011
Issued to:	The Dutch Healthcare Authority (NZa)
Care form:	Pharmaceutical care

The full text can be found below.

In the ‘Funding pharmaceutical care provisions’ policy regulation (BR/CU-5045), the NZa described the pharmaceutical care normally provided by pharmacists in 14 provisions. On 31 May 2010, at the request of the NZa, the *College voor zorgverzekeringen* (hereafter; CVZ) published the report ‘Descriptions of pharmaceutical care provisions, clarification within the framework of health insurance’. In this report CVZ indicated which of the 14 provisions could be regarded as insured care.

After the pilot phase, interested parties suggested various points for improvement. Based on these, and also as requested by the Minister, for 2012 the NZa drew up a new ‘Descriptions of pharmaceutical care provisions’ policy regulation (BR/CU-5046) and a

¹ PO= prescription only.

new 'Declaration and Transparency Obligations relating to pharmaceutical care' policy regulation (NR/CU-509). This policy regulation stipulates which provisions based on unrestricted tariffs can be declared as of 1 January 2012.

The new policy regulation relates to 11 provisions, including a facultative provision on the grounds of which a care-provider and a health insurer can jointly ask the NZa to approve a new provision.

The way in which provisions are categorised and defined has altered for 2012. In response to a verbal request made by the NZa, CVZ has assessed which of the provisions can be regarded as insured pharmaceutical care.

Points of departure for the clarification

The policy regulation applies to pharmaceutical care encompassing advice and guidance for the purpose of medication assessment and responsible use of PO-medicines or the issue of these medicines. This relates to pharmaceutical care subject to articles 50 to 56 incl. of the Health Care Market Regulation Act (WVG).

However, the scope of the WVG is broader than that of the *Zorgverzekeringswet* (Zvw, Health Insurance Act). This means that not all provisions covered by the WVG are necessarily designated as (pharmaceutical) care in the sense of the Zvw.

For this clarification too, the Zvw acts as a statutory framework for the assessment. For an explanation of this framework, CVZ refers the reader to paragraphs 2a and 2b of the report 'Descriptions of Pharmaceutical Care Provisions, clarification within the framework of health insurance'.

Clarification of the provisions

Two questions were asked in relation to this clarification:

- Is this provision covered by the *Zorgverzekeringswet* (Zvw)?
- Does it involve pharmaceutical care (PC) within the framework of the Zvw?

The following is CVZ's clarification, whereby the article of the policy regulation is cited. For the full text of the articles, CVZ refers the reader to the policy regulation. The Declaration and Transparency Obligations policy regulation relating to pharmaceutical care was not involved in this clarification. That regulation provides instructions relating to declarations and providing consumers with information about the tariffs that care-providers charge for provisions.

Provision	Zvw?	PC?	Comment
Article 5 Issuing a PO ² -medicine, including sub-provisions: - standard issue - weekly issue - first issue - providing an OOH ³ -service - exceptional magistral preparation - regular magistral preparation - at-home service provided	Yes	Yes	Only pharmacies can issue a PO-medicine. This care can only be provided by a pharmacist or a G.P. with his/her own dispensing pharmacy.
Article 6 Patient instructions on a PO-medicine-related device	Yes	Yes	
Article 7 Medication assessment of	Yes	Yes	

² PO= prescription only.

³ OOH= out-of-hours.

chronic PO-medicine consumption, including at-home service as sub-provision			
Article 8 Pharmaceutical guidance during admission to hospital or visit to an out-patients' clinic, including OOH-service as sub-provision	Yes	Yes	
Article 9 Pharmaceutical guidance in relation to discharge from hospital, including OOH-service and at-home service as sub-provisions	Yes	Yes	
Article 10 Information on pharmaceutical self-management for patient group	No	No	General group information does not focus on individual care demands. This provision is not pharmaceutical care within the framework of the Zvw.
Article 11 Advice on pharmaceutical self-care	No	No	Advice on self-care may be a task for pharmacists, but it is not pharmaceutical care within the framework of the Zvw.
Article 12 Advice on using PO-medicines when travelling abroad	No	No	In principle, advice on most PO-medicines is given when they are issued (art. 5 and 6). Thus, from the point of view of the basic insurance, this provision is duplication. In the event the PO-medicine is not insured care, this provision may be provided (not insured care).
Article 13 Advice on the risk of illness when travelling abroad	No	No	The Health Insurance Decision explicitly excludes the risk of illness when travelling. Advice when travelling is not pharmaceutical care within the framework of the Zvw.
Article 14 Providing services for one another	Not applicable	Not applicable	Providing services for one another is intended as support for the requesting care-provider when care is given to a patient. This provision is not intended to recompense the health insurer, which is why it is not covered by the Zvw.
Article 15 Facultative provision	Not applicable	Not applicable	In his instruction to the NZa dated 16 May 2011 (GMT/VDG/3063109), the Minister indicated that, alongside the newly described provisions which apply to all providers and

		<p>health insurers, there must also be room for approving other descriptions of provisions. Care-providers and health insurers can submit a joint request to the NZa. Advance clarification of such a provision by CVZ is possible. The fact that the NZa grants a request does not automatically mean that the provision concerned will be regarded as insured pharmaceutical care. A separate clarification by CVZ will be necessary.</p>
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This clarification needs regular maintenance as pharmaceutical care is in a constant state of flux.

The introduction of the facultative provision can improve the dynamics. If new developments demand the addition of other activities, then re-assessment will be necessary.