

PROCEDURE FOR PROCUREMENT OF MEDICINES BY ENTITLED PATIENTS OF IIT KANPUR FROM THE HC PHARMACY AND THE OUTSOURCED PHARMACY

An Outsourced pharmacy dispensing the non-available reimbursable medicines in a cashless manner is going to be operational in the HC premise from 1st September 2014. The Outsourced pharmacy is located on the rear side of the HC building and is maintained by M/s Naveen Medical stores, Kanpur. This pharmacy will be operating in addition to the existing HC pharmacy. This document summarize the existing and revised procedures for procurement and reimbursement of medicines:

Current procedure

The current procedure of dispensing the medicines and their reimbursement is as follows:

- (a) Patient visits the treating MO who prescribes the medication.
- (b) Patient goes to the HC pharmacy and gets the **Available (A)** medicines. The pharmacist writes **Not Available (NA)** for remaining medicines.
- (c) Patient goes to a medical shop, buys the **Not Available (NA)** medicines and gets the bill.
- (d) Institute employee/student then fills the reimbursement form for himself/herself (or family member), signs on the cash memo and submits the form with cash memo and prescription to the HC office.
- (e) The medical reimbursement form goes to the treating MO (who had written the prescription), he/she categorizes the medicines as **Reimbursable** and **Non-reimbursable** and certifies the same. After this, the form goes to Accounts section.
- (f) Accounts section processes the form and calculates the amount to be reimbursed based on the certification from the treating MO and by consulting, if required, the lists available to them for **Reimbursable** and **Non-reimbursable** medicines.
- (g) The amount to be reimbursed is transferred to the bank account of the institute employee.

THE TIMING OF THE OUTSOURCED PHARMACY WILL BE AS FOLLOWS:

Time: From 09.00 AM to 09.00 PM

Days: Monday to Saturday (Sunday closed)

Following procedure is suggested for implementation:

Revised procedure

- (a) Patient visits the MO and who prescribes the medication as per the present practice. **Available (A)** medicines in HC pharmacy will be written on one paper whereas the **Not-available (NA)** medicines will be written in another paper. The **NA** medicines will also be categorized as **Reimbursable (R)** or **Non-reimbursable (NR)** on the spot by the treating MO.

To begin with this arrangement, the list of reimbursable/non-reimbursable medicines currently available with the HC and all MOs will be used. The same list will be available with the Outsourced pharmacy and the Accounts section. The **In-charge HC** will **update** the list as and when required. For any new medicine, the issue of reimbursement (on the basis of information such as composition of medicine, therapeutic/non-therapeutic, dual use, etc.) will be settled on basis of information available on the internet. **As a guideline, all medicine under the Schedule H and X will be reimbursable.** In case of any doubt, the recommendation of the treating MO will be final.

- (b) With the referral slip, the patient (or his/her representative) goes to HC pharmacy and gets the medicines available in the HC by handing over the paper listing all available medicines in HC.
- (c) The pharmacist dispenses **available** medicines in the HC. For **not-available** medicines (written on another paper), he writes **NA (not-available)** for reimbursable medicines only and signs. For the remaining NA but non-reimbursable medicines (as marked by the treating MO), the pharmacists will not write anything on this paper.
- (d) The patient (or his/her representative) with the list of medicines on NA paper then goes to the Outsourced pharmacy in HC and receives only the **Not-available Reimbursable (NA-R)** medicines in a cashless manner. However, the **Not-available non-Reimbursable (NA-NR)** medicines can be procured at 13% discount on MRP by making cash payment to the Outsourced pharmacy

- (e) The outsourced pharmacy will retain the prescription of NA medicines with proof of delivery of medicine (bill of the dispensation) signed by the user and will raise the consolidated bill to the institute in periodical basis (every 15 days). This **consolidated bill** must have the following information:
1. Name of the patient (available on the prescription slip)
 2. PF number (available on the prescription slip)
 3. Registration number as assigned by the HC registration desk (available on the referral slip)
 4. Name of the treating MO/consultant/advisor, etc.
 5. Cash memo of dispensed NA medicines, clearly indicating the details of the dispensing made such as name of the patient, treating MO, name and quantity of the drug/medicine/item, batch number, date, etc. and verified by the concerned employee/patient/representative that the NA-R medicines have been received by him/her. The cash memo must also indicate the MRP of each medicine and the discounted price (after 13% discount) on overall bill.
 6. Signed copy of the prescription slip having signatures of the treating MO, the HC pharmacist and employee with the particular PF No.
- (f) A consolidated statement (on fortnightly basis) with all information/attachments will be verified by the **In-charge HC/PMO** and dispatched to the Accounts section for payment. The payment will be made directly to the Outsourced pharmacy by the Account section.
- (g) As mentioned earlier, the **Not-available Non-reimbursable (NA-NR)** medicines may be dispensed by the Outsourced Pharmacy after receiving the payment directly from the patient/employee. However, these medicines will also be dispensed on discounted price @ 13% discount on MRP. The Accounts section will not be responsible in any manner for payment of such NA-NR medicines.
- (h) This aforementioned arrangement is especially useful in non-emergency cases. In case of non-availability of certain medicines, the outsourced Pharmacy will ensure to arrange the same within 24 hours. In case of any specific difficulty in procurement of such medicines, the Outsourced Pharmacy will immediately get in touch with the treating Medical Officer first & if required with I/C Health Centre.
- (i) In case the medicine are needed urgently and are not available even at the Outsourced Pharmacy, the same can be procured by the patient/employee by following the "**Current Procedure**" in which the reimbursement is obtained after filling up the reimbursement form.
- (j) For all **Indoor patients**, the medicines will be procured by following the same aforementioned procedure. In these cases also, now the treating MO will write the required medicines. After this, **Not Available (NA) oral medicines** will be written by the Pharmacist and **NA injectable medicines** by the nursing staff on regular prescription slip (the only difference being that the **Indoor No.** is written on the slip instead of the **OPD registration No.**). The Indoor prescription slip should be used

by the Indoor patients in exactly the same manner as described above for OPD patients to procure the medicines from the Outsourced Pharmacy.

- (k) Retired employees with their spouse will continue to get regular available medicines from the HC pharmacy. However, they will have to purchase **Not-Available** medicines at their own cost. They will also get benefit of 13% discount on MRP for **Not-Available medicines** if they opt to purchase these from the Outsourced pharmacy.
- (l) If the employee/student is not satisfied with the aforementioned categorization (Reimbursable/non-reimbursable) of medicines or medicine procurement from the Outsourced pharmacy for any reason, he/she is allowed to follow the "**Current Procedure**" for medical reimbursement where the treating MO decides the reimbursability in a **post facto** manner. It needs to be emphasized that this arrangement for cashless medicines is not to completely stop the current procedure of medical reimbursement but to supplement the same. This is purely individual decision of user whether to pay for the medicines and get the reimbursement later or use the cashless facility for **NA-R** medicines from the Outsourced pharmacy. For example, he/she may decide to go for the existing reimbursement procedure in emergency cases or when he/she does not have access to the proposed cashless facility (the Outsourced pharmacy is closed). Once the cashless scheme is in operation, more and more employees/students would like to avail this facility since it will save their time in filling up and submitting the reimbursement form and they do not have to pay the money upfront. Just like any other scheme, this proposal may also have some teething troubles but procedures can be further improved with experience. Any suggestion to improve dispensing of medicines from the Outsourced Pharmacy may be given to the In-charge HC.