



Fact Sheet – National Health Plan

A Guide for Prescribers

31/03/2023

Arrangements for prescriptions for supply of medicines: Supporting telehealth patients and healthcare professionals

Arrangements for image-based prescribing in hospitals outlined in the *National Health (COVID-19 Supply of Pharmaceutical Benefits) Special Arrangement 2020* (the Special Arrangement) ends on 31 March 2023. However, the requirement for a patient to provide written acknowledgment (e.g. a signature) for prescriptions will continue to not be enforced under the Special Arrangement until 31 March 2024.

Electronic prescribing is now widely available in Australia and provides an option for supporting telehealth consultations and enabling the supply of medicines. Other prescribing options, such as urgent supply arrangements which existed prior to the COVID-19 pandemic will continue.¹

Telehealth Medical Services

Doctors, nurses and mental health professionals are able to deliver services via telehealth via phone or video conferencing. More information on telehealth is available [here](#).

Prescribing process to support telehealth services

There are two legal forms of prescription in Australia – paper prescriptions and electronic prescriptions.

Electronic prescriptions

As a prescriber, you can create an electronic prescription as an alternative to a paper prescription in your enabled prescribing software during a consultation. You should ask your patient if they are happy to receive their prescription electronically.

When creating an electronic prescription, a unique electronic token (in the form of a QR code) will be created and sent to the patient as an SMS or email. The token is the key that unlocks the electronic prescriptions. Patients can present their token at their pharmacy of choice to enable dispense and supply of the medicines. Further information can be found [here](#).

¹ A summary of State and Territory arrangements, including links to relevant legislation, is available [here](#).

You can also print the electronic prescription token (also known as evidence of an electronic prescription) and fax/email to a pharmacy with the patient's consent. As long as the token is legible, pharmacists can scan it and safely dispense the electronic prescription. As the electronic prescription is linked to the token, the prescription can only be dispensed once. Therefore, the risk to safety and quality as well as fraudulent activity is greatly reduced.

For patients who are taking multiple medicines or do not want to receive a token, the Active Script List (ASL) is a token management solution for electronic prescriptions. It provides a consolidated list of all their active prescriptions. If a patient does not yet have an ASL, you can ask them to speak to their pharmacist about setting one up. If the patient already has an ASL, you need to check with them if you can add their prescription to it. Further information can be found [here](#).

Paper prescriptions

Prescribers can still create paper prescriptions during a telehealth consultation. The paper prescription will need to be signed by the prescriber.

Subject to state and territory laws, you may still be able to phone in a prescription or fax a copy of the paper prescription to the patient's pharmacy of choice. You must then arrange for the timely delivery of the original Pharmaceutical Benefit Scheme (PBS) paper prescription to the pharmacy. You can find the contact details for patient's pharmacy of choice [here](#). If your patient prefers to receive the legal paper prescription, you will need to mail it to them or have them, or someone known to them, pick it up from your location.

Information regarding options and specific legislation in your jurisdiction can be found [here](#).

Image-based prescribing in hospitals

Limited image-based prescribing activities for prescriptions written for hospital patients ends on 31 March 2023.

The image-based prescribing for hospital arrangements limited the supply of pharmaceutical benefits to hospital settings, as defined by section 94 of the *National Health Act 1953*, which is an approved hospital authority who is approved to supply pharmaceutical benefits. This included both public and private hospitals. However, this arrangement ends 31 March 2023.

Prescriptions written before 31 March 2023 with existing repeats that were dispensed under image-based prescribing hospital arrangements will continue to be honoured after 31 March 2023. These must continue to be retained by the pharmacist for subsequent supply of the medicine, until the prescription runs out or expires.

Special arrangements in jurisdictions²

While image-based prescribing arrangements will no longer be legally valid after 31 March 2023, you will continue to have other options such as urgent supply of medicines under section 48 of the *National Health (Pharmaceutical Benefits) Regulations 2017* (supply of pharmaceutical benefits before surrender of written prescription), which can enable remote medicines support for your patients. In this case, the prescriber must provide the prescription within seven (7) days to the pharmacy.

While the Australian Government Department of Health and Aged Care sets out some standards and restrictions on access to medicines, state and territory governments regulate medicines and prescriptions. Further information regarding options and specific legislation in your jurisdiction can be found [here](#). Please contact your respective jurisdiction authority for more details.

Special arrangements in residential aged care facilities

Although image-based prescribing ends 31 March 2023, residential care services can continue using copies of medication charts for PBS prescribing. This is allowed by section 45(2) of the *National Health (Pharmaceutical Benefits) Regulations 2017*, which specifies that an approved supplier may supply a pharmaceutical benefit on the basis of a medication chart prescription only if the supplier has seen a medication chart or a copy of the medication chart that includes all prescribing information requirements.

Medicine delivery services

Once the patient's chosen pharmacy has received the electronic or paper prescription, the pharmacy may deliver medicines to the address on the prescription. Prescribers should check that they have the correct address for patients during the telehealth consultation. Alternatively, the patient may pick up the medicine from the pharmacy or have someone do this on their behalf.

Existing paper prescriptions and repeats

If a patient is confined to their home with a paper prescription or repeat, they will need someone to visit the pharmacy on their behalf with the paper prescription. If this is not possible, patients can seek a new prescription and follow the steps above.

While the vast majority of healthcare providers do the right thing, fraudulent and inappropriate practice against Medicare and the PBS should be reported to the Department of Health on 1800 314 808. More information is available [here](#).

² A summary of State and Territory arrangements, including links to relevant legislation, is available [here](#).