

Submission 1

I hereby claim payment in accordance with my terms of service for drugs and listed appliances ordered on the prescription forms submitted with this declaration and supplied, to the best of my knowledge and belief, by me during the month of _____ 2020

Signed: _____ Dated: _____

Pharmacy: _____

	<u>Contractor Use</u>	<u>BSO Internal Use Only</u>		<u>Contractor Use</u>	<u>BSO Internal Use Only</u>
A. Fully Coded *	_____	_____	I. Pharmacy Vouchers	_____	_____
B. Part Coded/Uncoded	_____	_____	J. SP1/2 Forms	_____	_____
C. Amended	_____	_____	K. Substitute Prescribing	_____	_____
D. Specially Manufactured	_____	_____	L. Repeat Dispensing	_____	_____
E. Claimed As Urgent	_____	_____	Complete *	_____	_____
F. Stock	_____	_____	Amended	_____	_____
G. Oxygen	_____	_____	M. Total Forms	_____	_____
H. Multiple Dispensing	_____	_____		_____	_____
Complete *	_____	_____	N. Previous Month Returns	_____	_____
Amended	_____	_____	O. PCD1 & Private Requisitions (CDRF1)	_____	_____
	_____	_____		_____	_____

* THESE BATCHES WILL BE SUBJECT TO BSO AUTOCODING PROCESSES

Contractor No. _____

For BSO Internal Use Only

Prepped By: _____ Date: _____

Scanned By: _____ Date: _____

Forms should be bundled according to these guidelines and all staples, sticky labels/tape and tear off slips removed.

The number of forms in each bundle and the total number of forms should be entered in the spaces provided.

A	FULLY CODED	Prescription forms where the pharmacist has been able to code each item on the form and there have been no amendments to the form.
B	PART CODED/ UNCODED	Prescription forms where the pharmacist has been unable to code any or all of the items on the form
C	AMENDED	Prescription forms where the prescriber has handwritten an additional item on the form.
		Prescription forms where the prescriber has made a handwritten amendment such as a change to a prescribed drug or quantity
		Prescription forms where the contractor has dispensed a different quantity to the prescribed quantity
		Prescriptions forms that have been completely or partly handwritten
		Prescription forms with an item that has not been dispensed. This item should be marked ND .
D	SPECIALLY MANUFACTURED	Prescription forms with an item that has been specially manufactured by a Specials Company
E	URGENT	Prescription forms claiming an urgent fee
F	STOCK	All stock forms
G	OXYGEN	All prescription forms containing oxygen gas, oxygen equipment or other gases
H	MULTIPLE DISPENSING	
	COMPLETE	Prescription forms where the pharmacist has been able to code each item on the form and there have been no amendments to the form.
	AMENDED	Prescription forms where the prescriber has handwritten an additional item on the form.
		Prescription forms where the prescriber has made a handwritten amendment such as a change to a prescribed drug or quantity
		Prescription forms where the contractor has dispensed a different quantity to the prescribed quantity
		Prescriptions forms that have been completely or partly handwritten
Prescription forms with an item that has not been dispensed. This item should be marked ND .		
I	PHARMACY VOUCHERS	All pharmacy vouchers
J	SP1/2 FORMS	All SP1 and SP2 forms
K	SUBSTITUTE Px HS21 FORMS	All HS21 forms for substitute prescribing
I	REPEAT DISPENSING	
	COMPLETE	Prescription forms where the pharmacist has been able to code each item on the form and there have been no amendments to the form.
	AMENDED	Prescription forms where the prescriber has handwritten an additional item on the form.
		Prescription forms where the prescriber has made a handwritten amendment such as a change to a prescribed drug or quantity
		Prescription forms where the contractor has dispensed a different quantity to the prescribed quantity
		Prescriptions forms that have been completely or partly handwritten
Prescription forms with an item that has not been dispensed. This item should be marked ND .		
Prescription forms where the pharmacist has made an intervention claim by code		
M	TOTAL FORMS	A count of the total number of forms submitted for payment
N	PREVIOUS MONTH RETURNS	Any returns being resubmitted for payment
O	PCD1 and PRIVATE REQUISITIONS (CDRF1)	All PCD1 and Private Requisitions (CDRF1)