



Writing a CTG Script

For general practices registered for the
Indigenous Practice Incentive Program (PIP)
Patient eligibility, registering patients, writing CTG Scripts

Patient Eligibility

Indigenous PIP	CTG Scripts (the PBS Copayment Measure)
Self identifies as being of Aboriginal and Torres Strait Island decent	Self identifies as being of Aboriginal and Torres Strait Island decent
Over 15 years old	Any age
Usual patient of the practice (you provide their majority of care)	Has chronic disease or is at risk of chronic disease? <i>And:</i>
Has a chronic disease	Would experience setbacks in the prevention or ongoing management of chronic disease if they did not take the prescribed medicine, and unlikely to adhere to their medicines regimen without assistance through the measure?

REGISTERING patients

The PIP and PBS Copayment measure are **independent measures**.
 Patients can:

- Register for both
- Register for PIP but not PBS Copayment
- Register for PBS Copayment but not PIP

All combinations are acceptable as long as the patients are eligible. This should be guided by the patient's choice. These options are included in both the patient **registration** form **AND** the patient **consent** form.

For example, your patient would not like to participate in the PIP (or is under 15) but would still like to receive CTG scripts:

Patient CONSENT form:
(to be signed by patient and stored in hard copy or electronically at the practice):

Patient REGISTRATION form:
(To be submitted to Medicare)

9 I have been told how participation in the **PIP Indigenous Health Incentive** will help my practice provide better care for my chronic disease. I understand what I have been told, and I want this practice to register me for this program.

No Yes

10 I have been told how participation in the **PBS Co-payment Measure** will make my PBS medicines cheaper. I understand what I have been told, and I want this practice to register me for this program.

No Yes

14 Has this patient provided informed consent to participate in the:

a) **Indigenous Health Incentive?**
 No Yes

and/or

b) **PBS Co-payment Measure?**
 No Yes

15 When did the patient sign the Patient Consent Form?
 / /

AUTOMATED annotation:

Automation is different depending on your practice's software. Contact the Division's Closing the Gap team for assistance.

Example: 'CTG82K', where the '82' relates to the prescription number for the day and the 'K' is a check digit. In no way is the annotation linked to the personal details of your patient, or to you or your practice.

Dr Adonis Larver
1 Best Avenue
Practiceland 4001
Prescriber no.: 07 7779 0210 Fax 07 7820 9677

Patient's Medicare no.: 660967

Pharmaceutical benefits endorsement number: 2633 11401 1

404 678 340 X

Patient's name: Kenneth "Ken" Allen
Address: 6 Quay Street, Freemantle 5150

Date: 05/07/2010

Send to patient: Script ID 001101

Brand substitution not permitted

Authority Form No: 08600712

Plavix 75mg Tablet
1 in the morning
Quantity 28 5 repeats

CTG80K

Manual annotation:

Write the letters 'CTG' and sign next to the annotation. Make sure it's on the right hand side of the prescription to the right of the "Patient's name and address" area.

DR GARY HOLMES
34 GILMOUR CRESCENT
RIVERSIDE NSW 2015

12103

Pharmaceutical Benefits Endorsement Number

SAFETY NET ENTITLEMENT CARD HOLDER CONCESSIONAL OR SEVERELY AFFECTED PERSONS PROGRAM OR SAFETY NET CONCESSIONAL CARD HOLDER

PATIENT'S NAME: MR JOHN CITRON

ADDRESS: 123 HIGH STREET

DATE: 2, 7, 10 MAINVILLE NSW 9023

PBS RPBS

ATORVASTATIN 20mg tabs
1 tab p.o. daily.
Send 30 tabs + 5 repeats

Dr. Holmes

PLEASE NOTE:

If you are referring a CTG patient to a **specialist**, that specialist is able to annotate prescriptions with CTG. It may be useful to include this information on the referral. Remember -

- The patient must be registered for at least PBS Copayment Measure
- Your practice must be Indigenous PIP registered

This resource is only a guide. It should be used in conjunction with the Practice Incentive Program guidelines available online here:

<http://www.medicareaustralia.gov.au/provider/incentives/pip/forms-guides.jsp>

You can call for more information Medicare Australia's PIP hotline on 1800 222 032.