

Dietitians Board

Te Mana Matanga Matai Kai

Prescription subsidies Coding of prescriptions

The prescription subsidy is aimed at reducing costs for families and people who are prescribed a lot of medicines. You become eligible for the subsidy once you have paid for 20 new prescription medicine items from 1 February each year. Once you're eligible, you do not have to pay any more prescription charges for the rest of that year (to 31 January). You can reach the 20-item threshold by combining prescription items for your partner and dependent children aged from 14 up to 18. Just tell your regular pharmacist the names of all the people in your family to help them keep track of how many items you've paid for. This information is gathered electronically so you no longer need to keep your receipts. Please note, as there is no prescription charge on items for children 13 years and under, these items can't be counted as part of the 20-item threshold. The information is only collected by an individual pharmacy – if you pay a co-payment for a prescription at another pharmacy, then you must tell your usual pharmacy the prescription number/s and the name of the pharmacy that dispensed that prescription in order for it to count towards your 20 items for that year.

In summary:

- Y = Child 13 years and under No co-payment
- **J** = 14-17 years old (18 year old only if still at school. If they are younger than 18 years old and have left school then they are considered to be an adult)
 - ➤ J1 or J4 = Co-payment of \$5.00, when prescription is written by a prescriber from the PHO the person/child is registered with. This applies to patients aged 14-18 years for prescriptions coming from a PHO practice in which they are enrolled. This also applies to hospital prescriptions. Child or parent/guardian has a community services card (C.S.C.)
 - > J3 = Co-payment of \$10 (no C.S.C. card) or not enrolled into a PHO or prescribed by a hospital prescriber
- A = adult 18+
 - ➤ A1 = co-payment of \$5. Person has a C.S.C card. Students are entitled to CSC's, but they must apply for one.
 - ➤ A4 = co-payment \$5 when prescription is written by a prescriber from the PHO the person is registered with. Does not apply to prescription forms from other prescribers outside the PHO (e.g. specialists, dental prescriptions). This also applies to hospital prescriptions.
 - ➤ A3 = co-payment \$15 (no C.S.C. card or PHO registration)i.e. dentist, specialist not working at a hospital
 - Anyone who has left school is considered an adult so a 16 year old school leaver would be A4 or A1 or A3.
- **Z** = high user card holder. Prescriber applies for this card on behalf of the person providing they fit the criteria depending on their medical condition(s). It is valid for one year from date of issue. This code can also apply to those patients who fit certain criteria defined by a PHO as attracting extra funding for their health services (GP visits, prescription co-payments). This code MUST be written on the prescription by the prescriber.
 - > Z1, Z3, Z4, = co-payment \$5
- O = contraceptive oral or otherwise = co-payment \$5
- X means that a family (1 or 2 adults living together plus or minus children) has paid the co-payment for 20 prescription items in a year. A family of separated parents may only have the children listed at one address (i.e. only on 1 family card, not counted on each parents' card). Same sex partnerships are regarded as a family, provided that they live at the same address.
 - \rightarrow X1, X4 = no co-payment
 - > X3 = \$2.00 co-payment
 - \rightarrow XZ3 = \$2.00 co-payment