## Appendix 1:

# Banding criteria and service payments for 'Monitoring of Drugs in Primary Care'

Banding	Payment per drug patient per year	Typical monitoring requirements
Band 1	£91.95	high intensity monitoring
Band 2	£45.97	intermediate
Band 2b	£26.56	anti-psychotics
Band 3	£7.15	closer to routine and/or infrequent

The following general definitions are used to assist determination of which banding specific drugs will fall into. The detail below is NOT the definition of monitoring requirements for each drug within that banding. For monitoring requirements for each drug, please refer to the current monitoring or shared care guidelines for the drug (or group of drugs) from the relative hospital provider.

### Band 1: £91.95 per drug per patient per year

Monitoring every one-two months of U&Es, LFTs, FBCs.

Include ECG, respiratory function tests etc. more than once a year.

Verbal interview and record keeping of symptom checklist.

Reporting of concerns to specialist.

#### Band 2: £45.97 per drug per patient per year

Monitoring more than twice a year up to and including every three months.

Include ECG, respiratory function tests etc. once a year.

Verbal interview and record keeping of symptom checklist.

Reporting of concerns to specialist.

# Band 2b: £26.56 per drug per patient per year

#### Excluding the use of these drugs for end of life care

Monitoring typically twice a year but may be up to and including every three months.

Include ECG, respiratory function tests etc. once or twice a year in relevant patients.

Verbal interview and record keeping of symptom checklist.

Reporting of concerns to specialist.

## Band 3: £7.15 per drug per patient per year

Monitoring twice a year or less often

Two or more of the following: U&Es, LFTs, FBCs

Verbal interview and record keeping of symptom checklist.

Reporting of concerns to specialist.

## **Appendix 2:**

#### Banding decisions on drugs included in the 'Monitoring of Drugs in Primary Care' service

Current versions of monitoring or shared care protocols should be accessed via the website of the relevant NHS commissioned provider, e.g.:

www.yorkandscarboroughformulary.nhs.uk/ • York and Scarborough Formulary: http://www.harrogateformulary.nhs.uk/ • Harrogate Formulary: http://joint-formulary.tees.nhs.uk/ County Durham and Tees Valley Formulary:

Tees, Esk & Wear Valleys NHSFT at:

https://joint-formulary.tees.nhs.uk/4-central-nervous-system/ Formulary status

Shared care and transfer of prescribing https://www.tewv.nhs.uk/policy-type/pharmacy/ Leeds Formulary: http://www.leedsformulary.nhs.uk/default.asp

http://www.northoftyneapc.nhs.uk/shared-care-group/ Newcastle Formulary:

The Retreat, York (prev. known as The Tuke Centre): TEWV protocols still to be added to website

### Band 1:

**Frequent blood testing,** in respect of the following specified drugs:

Aripiprazole (depot injection) Azathioprine (po) Ciclosporin (po) Degarelix (inj.) Flupentixol (inj.) Fluphenazine (inj.) Haloperidol decanoate (inj) Leflunomide (po)

Methotrexate (po and s/c) Mercaptopurine (po) Mycophenolate (po) Paliperidone (depot injection)

Penicillamine (po) Risperidone (inj.) Sulphasalazine (po) Tolcapone (po)

Zuclopenthixol (decanoate inj only)

#### Band 2:

Monitoring, including blood testing, or other special monitoring or other special circumstances, in respect of the following drugs:

> Atomoxetine (po) Dapsone (po)

Dexamfetamine (po) Denosumab (inj)

Dronedarone (po) Goserelin (imp)

Guanfacine (po) Hydroxycarbamide (po) (psoriasis only)

Leuprorelin (inj) Lisdexamphetamine (po)

Methylphenidate (po) Metyrapone (po) Riluzole (po) Sirolimus (po)

Tacrolimus (po) Triptorelin (inj)

Entecavir only when prescribed under a shared care agreement with tertiary centre

Lamivudine only when prescribed under a shared care agreement with tertiary centre

Tenofovir disoproxil fumarate only when prescribed under a shared care agreement with tertiary centre

#### Band 2b:

Oral anti-psychotics (excluding when used for end of life care), in respect of the following drugs (with regular anti-psychotic injections being moved to band 1):

Amisulpiride (po)

Benperidol (po)

Chlorpromazine (po)

Flupentixol (po)

Lurasidone (po)

Paliperidone (po)

Pimozide (po)

Quetiapine (po)

Risperidone (po)

Sulpiride (po)

Haloperidol (po)

Pericyazine (po)

Promazine (po)

Risperidone (po)

Trifluoperazine (po)

Zuclopenthixol (po)

#### Band 3:

# Routine monitoring of the following drugs:

Amiodarone (po)

Bromocriptine (po)

Darbepoetin alfa (inj)

Epoetin (inj)

Apomorphine (inj)

Cabergoline (po)

Donepezil (po)

Galantamine (po)

Hydroxychlorquine sulphate (po)

Ibandronic acid (po once daily prep.) ‡

Lanreotide (inj) Memantine (po)
Mexiletine (po) Modafinil (po)
Octreotide (inj) Pergolide (po)

Rivastigmine (po) Testosterone (inj only)

Ulipristal acetate 5mg (po)

‡ In the management of post-menopausal women with breast cancer initiated on ibandronic acid 50mg by secondary care specialists to improve breast cancer survival. Ibandronic acid is unlicensed for this indication.

Confirmed additions which are new for 2022/23 are underlined.

Confirmed banding changes for 2022/23 are marked with an \*

Sodium aurothiomalate was removed as there is zero usage in North Yorkshire and York practices.