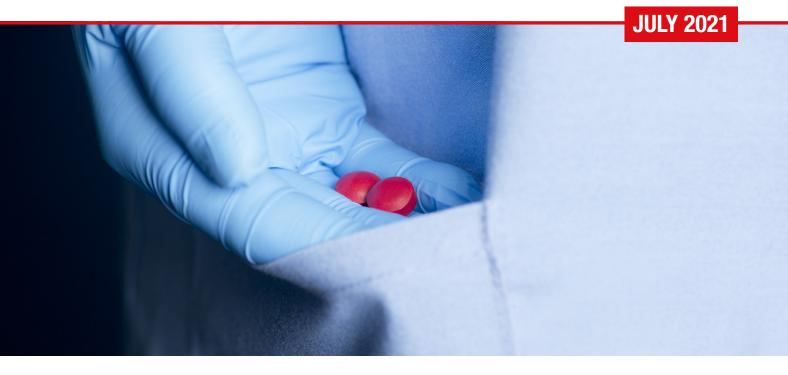
Prescription Fraud Newsletter



Prescription fraud can take many forms and can be very challenging to identify. This newsletter provides details of a small sample of investigated prescription frauds and highlights the potential opportunities for these frauds to occur. At the end of the newsletter there is some advice on the actions that Practices can take to mitigate these risks.

Case Study: Prescription Drugs Obtained by Deceased Patient's Son

A patient was repeatedly issued with prescriptions for a number of drugs including insulin. However, the patient wasn't actually seen at the surgery for several years and contact was always with the patient's son. An investigation established that the patient had left the country around two years before suspicions were raised and prescriptions were stopped, and had passed away a year before prescriptions ceased, with the prescription items sent abroad by the son for use by others. In total, 370 prescription items were issued to the patient after they had permantently left the country, with the medication costing the CCG approximately £2,400. This was also a joint investigation with the Department for Work and Pensions, as the son continued to claim benefits on behalf of the patient when they left the country. The matter was referred to the Crown Prosecution Service and is ongoing.

This case highlights the importance of seeing the patient face-to-face periodically before issuing further repeat prescriptions. This case was pre-pandemic, but the inability to conduct face-to-face appointments during the pandemic is likely to result in further cases of this type of fraud.



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Case Study: Patient Registers at Multiple GP Practices

A patient registered at more than twenty GP practices to obtain prescriptions for controlled drugs. At first the patient would advise that they were temporarily staying in the area and needed an urgent prescription. The patient was also known to report that they had lost the prescription to obtain another. This continued for around one year, and once the patient's name became known to practice managers in the area, the patient tried another method to get their hands on medication. The patient found out which practice their friends were registered at, and phoned the practice pretending to be their friend, updating their mobile phone number in the process. Prescriptions would then be issued to the patient in the name of their friend. With assistance from the local police, the patient was arrested and prosecuted for fraud by false representation.

Anti-Crime Specialists often receive patient multi-registration referrals. In many of the cases, the patient is seeking drugs such as benzodiazepines or opioids to sell on and is already known to the Police.

Case Study: Patient Registers Using ID of Deceased Friend

A patient registered at a GP practice using the ID of a deceased friend. While the patient fraudulently obtained prescription items using the false ID, their real motive was to obtain Fit Notes in order to make a false claim for Employment Support Allowance in the name of their deceased friend. A joint investigation between NHS and Department for Work and Pensions (DWP) investigators resulted in the patient being prosecuted for fraud.

While the majority of the financial loss was with the DWP in this case, NHS investigators often work closely with other organisations to prosecute prescribing fraud offenders.

Case Study: Doctor Forged Prescriptions in the Name of Patients

A doctor forged over 400 prescriptions in the names of three of their patients and obtained medicines to treat themselves for depression. In total, the doctor forged 243 prescriptions in the name of one of their male patients, 173 in the name of another, and 24 using a third patients' identity. The total value lost to the NHS was over £10,000. Each of the patient identities used by the doctor were entitled to free prescriptions so not only did the doctor fraudulently obtain medication they didn't pay the prescription fees for that medication either.

The doctor was given a four month jail sentence suspended for 12 months, and ordered to pay £10,047 compensation to the NHS within a year, after they pleaded guilty to three charges of fraud. In addition, the doctor was referred to the General Medical Council to consider their fitness to practice.

Think Prevention

- Are patient records being updated accordingly if they are no longer with the practice or are deceased?
- Do local practice policies specifically state that self-prescribing is unlawful?
- Is there enough separation of duties and adequate management of prescription forms throughout the practice?
- Do practice staff question temporary patients who are seeking controlled drugs?
- Are patients seen face to face periodically, to ensure that repeat prescription requests are required?

Disclaimer: The content of this document is intended to give general information only. Its contents should not, therefore, be regarded as constituting specific advice, and should not be relied on as such. No specific action should be taken without seeking appropriate professional advice.

If you suspect that patients or NHS staff are committing fraud, contact your Anti-Crime Specialist in confidence to report your concerns.

Melanie Alflatt, Director of Anti-Crime Services

Call: 07899 981 415 Email: melanie.alflatt@tiaa.co.uk

Alternatively, contact the NHS Counter Fraud Authority on 0800 028 4060 or at **www.cfa.nhs.uk/reportfraud**

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