

DISPENSARY MARGIN REVIEW · PARTNER REPORT

Ashcombe Medical Practice — finding the margin *quietly leaking* from the dispensary.

PREPARED FOR

The Partners, Ashcombe Medical Practice

PERIOD

Oct 2025 – Mar 2026

PREPARED BY

RxMargin

STATUS

Sample · illustrative

£57,200

in recoverable margin identified across six months — before any change to

prescribing.
rxmargin.co.uk

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01 Executive summary

Dispensing is one of Ashcombe's largest income streams and the hardest to see clearly. Reimbursement, Drug Tariff changes, Category M, monthly price concessions, supplier rebates and procurement all move independently — so a line that made money last quarter can quietly turn into a loss without anyone noticing.

We reconciled six months of dispensing data, wholesaler invoices and remittances against the Drug Tariff and monthly concessions, line by line. The headline:

≈ £57,200 of recoverable margin was identified over the six-month period — roughly £9,500 a month — none of which requires any change to what the practice prescribes. The largest single lever is the wholesaler rebate position; the most urgent is a set of shortage and procurement losses that recur every month.

MONTHLY CONTRIBUTION	RECOVERABLE / MONTH	LINES REVIEWED
£28,400	≈ £9,500	1,940

02 The five findings, ranked

£2,100/mo	Rebate below scheme rate. Wholesaler rebate is running at ~13% against a ~25% achievable rate. A procurement conversation, not a clinical one — and the biggest single lever.
£1,850/mo	Genuine shortage losses. Lines bought above reimbursement during shortages; ≈ £11,100 over six months versus what the Tariff actually paid back.
£1,600/mo	Concession-dependent margin at risk. ≈ £19k a year of contribution that disappears if specific concessions are withdrawn — worth hedging.
£3,200/6mo	Procurement anomalies. A cheaper same-month source existed on several lines — ordering discipline, quick to fix.
£700/mo	Structural GLP-1 loss. Clawback erodes ~£20 a pack on a high-volume line; worth flagging to the dispensary team.

03 Drug-level ledger — selected lines

Net cost versus what was actually reimbursed, February 2026. A representative extract; the full workbook covers every dispensed line.

ITEM	ITEMS	NET COST	REIMBURSED	MARGIN	FLAG
Atorvastatin 20mg tab	420	£372	£466	+£94	On margin
Tirzepatide 5mg inj	36	£1,486	£1,402	-£84	Loss
Metformin 500mg tab	540	£506	£452	-£54	Loss
Ethosuximide 250mg cap	18	£548	£472	-£76	Loss
Colecalciferol 800u cap	210	£196	£318	+£122	Over-tariff
Estradiol 100mcg patch	140	£352	£470	+£118	Concession
Melatonin 2mg MR tab	60	£412	£360	-£52	Loss
Apixaban 5mg tab	150	£968	£1,118	+£150	On margin
Extract total	1,574	£4,840	£5,058	+£218	

04 How we got here

Every figure traces back to source. We reconcile your dispensing data (PD4(PxQ)) against the Drug Tariff Part VIIIA, the month's price concessions and your wholesaler invoices and remittances. Margin is calculated per line as reimbursement (net of clawback) less true net acquisition cost, then aggregated by therapeutic class and by loss type. Nothing is estimated where a source figure exists; anything provisional is labelled.

05 Recommended next steps

In priority order:

- 1 · Re-open wholesaler rebate (APM) terms — the largest recoverable lever.
- 2 · Submit the prepared over-tariff lines for price-concession review.
- 3 · Tighten ordering on the flagged procurement anomalies.
- 4 · Hedge concession-dependent lines and review the GLP-1 structural loss with the team.

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