



# BC PharmaCare Newsletter

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## SMOKING CESSATION PROGRAM—NRT INVENTORY

Earlier this month, using the PharmaCare Newsletter subscription list, pharmacies were informed of possible upcoming changes. In summary:

PharmaCare’s Smoking Cessation Program covers smoking cessation products for eligible B.C. residents who wish to stop smoking or using other tobacco products.

The agreement between the Ministry of Health and the providers of Nicotine Replacement Therapy products (NRTs) selected in 2011 has come to an end. The Ministry is currently selecting NRTs for a future agreement, and the process will be completed in December 2015.

As a result, the NRTs covered by the Smoking Cessation Program may or may not change in the new year. In early December, we will advise pharmacists of the specific products covered. Changes will come into effect on January 1, 2016.

**We recommend that pharmacies adjust their inventory of NRTs as needed to prepare for a potential change in the products.**



The use of PharmaNet is not intended as a substitute for professional judgment.  
Information on PharmaNet is not exhaustive and cannot be relied upon as complete.

The absence of a warning about a drug or drug combination is not an indication that the drug or drug combination is safe, appropriate or effective in any given patient.  
Health care professionals should confirm information obtained from PharmaNet, and ensure no additional relevant information exists, before making patient care decisions.

## 2015/16 PROVINCIAL INFLUENZA CAMPAIGN—FLULAVAL RELEASE

In the most recent [PharmaCare Newsletter 10-009](#), pharmacists were invited to participate in the 2015/16 Provincial Influenza Campaign.

Please note that the list of PINs for publicly funded vaccines has been updated to include the following:

PIN	VACCINE
66128005	FluLaval

Please see the full [list of PINs](#).

## PROVIDER ENROLLMENT—REMINDER

### Provider Duties and Obligations

Approved PharmaCare providers are required to abide by PharmaCare policies as published in PharmaCare policy manuals and in PharmaCare Newsletters and PharmaNet Bulletins.

In your Welcome Package, under the heading *Your Duties and Obligations*, you will find more detailed information on the Act, regulations, policies and procedures that govern all PharmaCare providers. It also explains your obligation to notify PharmaCare of specific business changes.

Please read the information. It is critical to maintaining your standing with the PharmaCare program. Failure to abide by your duties and obligations may result in delay or suspension of payments.

### Change Form Available Online—Reminder

As outlined in the [Enrollment Guide](#), the Provider Regulation requires providers to notify Health Insurance BC of changes in their enrollment information.

Use the [PharmaCare Provider Change \(HLTH 5433\)](#) to report any future changes to your enrollment information.

To submit a change, complete the first page of the form and any relevant parts (A through K) required.

**Important:** Failure to abide by your duties and obligations may result in delay or suspension of payments.

### Provider Enrollment Resources

All enrollment information, including the Enrollment Guide, enrollment forms, and the PharmaCare Provider Change form are available on the [Pharmacy Provider](#) web page and the [Device Provider](#) web page.

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### NEWSLETTERS/BULLETINS

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## BENEFITS

### Regular Benefits

The following new products are now eligible PharmaCare benefits for Fair PharmaCare and Plans B, C, F, and, if indicated below, Plan G and/or Plan P.

DIN	DRUG NAME	PLAN G	PLAN P
02435411	Simbrinza® (brinzolamide/brimonidine) 1% /0.2 % w/v ophthalmic suspension	N	N

### Limited Coverage Drug Program

The following products are eligible benefits under the Limited Coverage Program—by Special Authority only—for Fair PharmaCare and Plans B, C, and F and, if indicated, Plan G and/or Plan P.

For information on all Special Authority drugs, visit our [Special Authority](#) page.

For criteria and forms for a **specific** drug, click on the **drug name** below.

<b>COVERAGE EFFECTIVE</b>	November 10, 2015		
<b>DRUG NAME</b>	Aptiom™ ( <a href="#">eslicarbazepine acetate</a> )		
<b>INDICATION</b>	As adjunctive therapy in the management of partial-onset seizures in adult patients who are not satisfactorily controlled with conventional therapy.		
<b>DIN</b>	02426862	200 mg tablet	
<b>DIN</b>	02426870	400 mg tablet	
<b>DIN</b>	02426889	600 mg tablet	
<b>DIN</b>	02426897	800 mg tablet	
<b>PLAN G BENEFIT?</b>	No		
<b>PLAN P BENEFIT?</b>	No		

### Non-Benefits

The following products have been reviewed and will not be added as benefits under PharmaCare.

DIN	DRUG NAME
02247374	Metadol-D™ (methadone hydrochloride) 1 mg/ ml oral solution
02346672	Relaxa™ (Polyethylene glycol 3350) powder for oral solution