



BC PharmaCare Newsletter

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QuickLinks

First Nations Health Authority Clients—PharmaCare Transition Update	1
Clinical Services Fees	3
Benefits	3

FIRST NATIONS HEALTH AUTHORITY CLIENTS—PHARMACARE TRANSITION UPDATE



As announced in the [previous PharmaCare Newsletter](#), on **October 1, 2017**, First Nations Health Authority clients will join the BC PharmaCare program. On that date, most FNHA clients who have been receiving benefits through Health Canada’s Non-Insured Health Benefits (NIHB) program will be eligible for coverage of prescribed medications and pharmacy services under the PharmaCare **First Nations Health Benefits Plan (Plan W)**.

Clarification—Medical supplies and equipment coverage

After October 1, 2017, FNHA clients will continue receiving NIHB coverage for medical supplies and equipment (“MS&E”) that require NIHB prior authorization. Please submit these claims to NIHB, not PharmaCare. For more information on NIHB MS&E benefits and the items that require prior authorization, see the list of [NIHB MS&E benefits](#).

Continued on page 2...

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.

FIRST NATIONS HEALTH AUTHORITY CLIENTS—PHARMACARE TRANSITION UPDATE, CONTINUED

Ensuring Continuity of Coverage for Clients taking Limited Coverage Drugs or Non-Benefits

To ensure continuity of coverage, the FNHA will notify PharmaCare of any client who will need PharmaCare Special Authority (SA) coverage when Plan W comes into effect. PharmaCare will enter most of these SAs in PharmaNet in advance, as described below.

SAs will be entered for FNHA clients currently taking a Limited Coverage Drug and for many FNHA clients taking drugs that PharmaCare does not normally cover. The approval period for many of the SAs for Limited Coverage Drugs will be indefinite, so prescribers will not need to request re-approval for the patient in the future. The SAs for selected non-benefit drugs will offer temporary, exceptional coverage in order to allow time for the client to consult their prescriber.

Once the SA is entered in PharmaNet, you can check a patient’s SA status before October 1, 2017:

- **Pharmacists** can call the Help Desk and select the self-service option
- **Prescribers** can call the Medical Practitioner Line.

After October 1, 2017, you can submit the claim to determine if it is adjudicating with SA coverage.

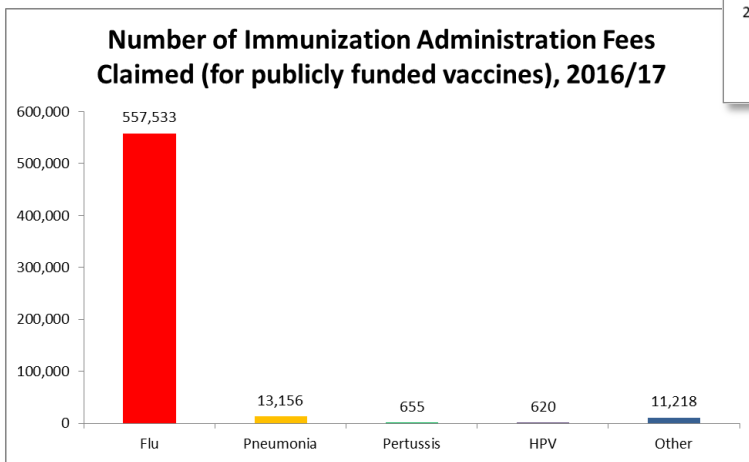
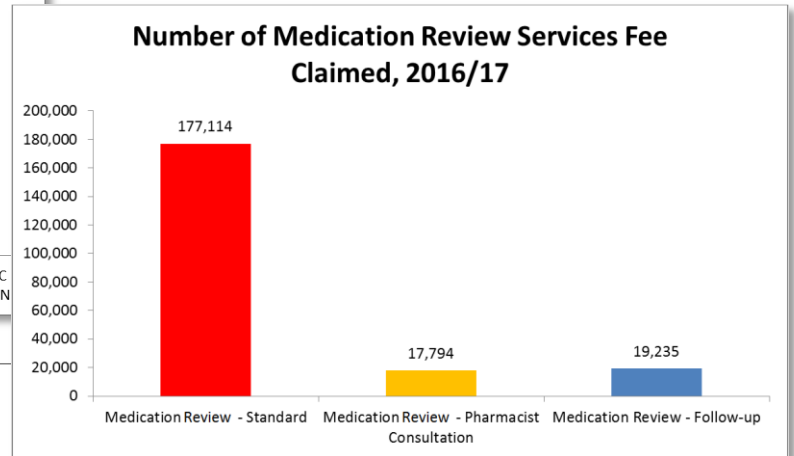
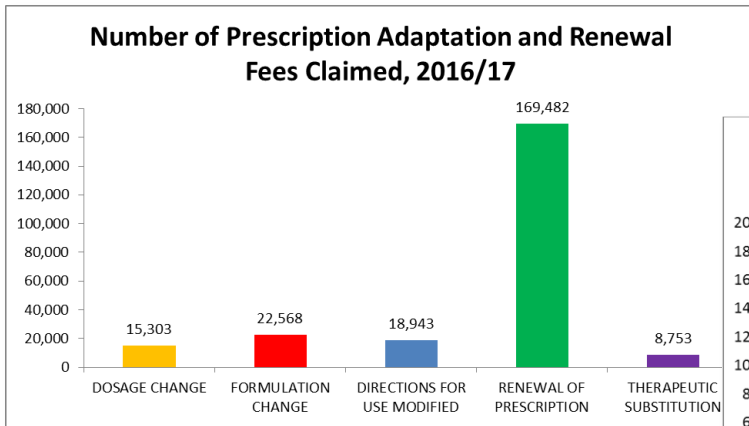
If you have any remaining questions about an FNHA client’s drug coverage needs, contact FNHA Health Benefits at 1-855-550-5454.

When will SA information for FNHA clients be accessible?

Scenario	Schedule/Action
FNHA clients taking a Limited Coverage or select non-benefit drug before July 25, 2017	SAs will be entered in PharmaNet by September 22, 2017. If no SA is in place, and the client began therapy before July 25, 2017, advise the client to call the FNHA at 1-800-550-5454 to make sure the current and correct information has been sent to PharmaCare. <i>Note: Although the SAs will be entered in PharmaNet, claims will not adjudicate under Plan W until October 1, 2017.</i>
FNHA clients who begin taking a Limited Coverage or select non-benefit drug on or after July 25, 2017, but before October 1, 2017	SAs will be entered in PharmaNet in late October 2017. Most clients who began therapy after this date should have a sufficient supply of medication to last until SAs are entered. If no SA is in place, advise the client to call the FNHA at 1-800-550-5454 to make sure the current and correct information has been sent to PharmaCare.
FNHA clients who begin therapy with a Limited Coverage Drug on or after October 1, 2017.	Prescribers will need to submit an SA request to PharmaCare as they would for any other PharmaCare patient.

CLINICAL SERVICES FEES

The following charts show the number of B.C. clinical services claimed by pharmacists in the fiscal year 2016/17.



BENEFITS

Publicly Funded Vaccines—Resources for Pharmacists

On behalf of the Pharmacists and Immunization Working Group (which includes representatives from the College of Pharmacists of BC, the BC Centre for Disease Control, the BC Pharmacy Association and B.C. health authorities), PharmaCare maintains [Vaccine Resources for Pharmacists](#).

Check the web page for the most up-to-date clinical information on the publicly funded vaccines that authorized pharmacists can administer, the criteria for use by pharmacists, as well as the required PINs for claims submission.

Publicly Funded Vaccines

Effective September 1, 2017, the following publicly funded vaccine is eligible for a fee when administered by an authorized pharmacist.

PIN	VACCINE
66128152	Nimenrix®

Limited Coverage Drugs

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. As of October 1, 2017, these products are an eligible benefit under Plan W (by Special Authority only).

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.

COVERAGE EFFECTIVE	August 15, 2017		
DRUG NAME	deferasirox (Jadenu®)		
INDICATION	transfusion-dependent iron overload		
DIN	02452219	90 mg oral tablet	
DIN	02452227	180 mg oral tablet	
DIN	02452235	360 mg oral tablet	
PLAN G BENEFIT?	No		
PLAN P BENEFIT?	No		

Insulin Pumps

The following product has been added as a benefit for eligible patients.

PIN	PRODUCT NAME
45230014	MiniMed™ 630G

Non-Benefits

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

DIN	PRODUCT NAME
02445727	teduglutide (Revestive®) 5 mg/vial powder for solution