

BCPharmaCare Newsletter

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# H1N1 FLU VIRUS INFORMATION – UPDATE #1 ANTIVIRALS & VACCINATIONS

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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.



#### **ANTIVIRAL MEDICATIONS**

#### **Appropriate Use of Antiviral Medications**

#### Provincial Pandemic Supply — For Treatment of Symptomatic Patients Only

It is important that the provincial pandemic supply of oseltamivir be used only for treatment (i.e., a five day supply) and only for patients with influenza symptoms. Antiviral medications should be dispensed for prophylaxis only in limited situations such as outbreaks in closed facilities (in accordance with the established protocol of the relevant health authority).

For more information on appropriate use, refer to the October 23, 2009, letter to health care providers posted in the Pharmacists' section of the **H1N1 Flu Virus Information website** at <a href="https://www.hls.gov.bc.ca/pho/pharmh1n1.html">www.hls.gov.bc.ca/pho/pharmh1n1.html</a>.

# PharmaCare Coverage of Commercial Antivirals Ends

To support the priority indications for use communicated to physicians and pharmacists, as of **October 21, 2009**, PharmaCare is no longer covering oseltamivir or zanamivir dispensed from the commercial supply. PharmaCare continues to cover dispensing and compounding fees for the provincial pandemic supply. Patients who do not have symptoms can choose to pay to have their prescription filled from the commercial supply.

## Use of Zanamivir (Relenza®)

The provincial pandemic supply of zanamivir (Relenza®) is not being released at this time as the Province would like to reserve this stock for cases in which oseltamivir is not an option (documented oseltamivir resistance or intolerance, or inability to take oral medication).

# Re-Ordering Oseltamivir from the Provincial Pandemic Supply

Re-order supplies of oseltamivir from your primary warehouse when you have approximately two days stock left.

To maintain the availability of the provincial pandemic supply, the BC Centre for Disease Control requests that you order a maximum of:

- 50 packages oseltamivir 75 mg
- 10 packages oseltamivir 30 mg
- 5 packages oseltamivir 45 mg

Both oseltamivir usage and re-ordering patterns are being monitored daily. Individual pharmacies with consistent variances from expected patterns may be called upon to ensure appropriate antiviral use.

#### **Claims and Fees**

#### **Correct Quantity for Treatment Dose**

In most cases, treatment dose of oseltamivir is 75 mg twice daily for five days. Therefore, for each prescription filled, 10 doses should be entered in **Quantity** field for the PharmaNet claim.

#### **Compounds of Antivirals**

#### When is Compounding Warranted?

The provincial pandemic supply of oseltamivir does not contain any stock of oral suspension and dispensing from the commercial supply results in a cost to the patient. Pharmacists are therefore asked to compound oral suspensions only for patients who:

- cannot swallow capsules, and
- cannot open the capsule and mix the contents with sweetened liquids immediately prior to administration.

#### Ora-Sweet® Alternative

A shortage of **Ora-Sweet®** underscores the need to compound antivirals only when absolutely necessary. When compounding is necessary, and **Ora-Sweet®** is not available, please see the options presented in Ora-Sweet Alternatives available at <a href="https://www.hls.gov.bc.ca/pho/pdf/os-alt.pdf">www.hls.gov.bc.ca/pho/pdf/os-alt.pdf</a>

#### Increase in Compounding Fees for Antivirals and Additional Product Identification Number (PIN) for 60 ml

#### PharmaCare has:

- increased the compounding fees for oseltamivir to cover the cost of Ora-Sweet® used in oral suspensions. The increased fees shown below will apply to all claims for compounds submitted after October 1.
- created new PINs for 15 mg/ml 60 ml compounded oral suspensions.

#### **Product Identification Numbers - Pandemic Supply Compounded Oral Suspensions**

PIN	Drug name	Compounding Fee
22123059	oseltamivir 15 mg/ml – 30 ml compounded suspension	\$23.05
22123060	oseltamivir 15 mg/ml – 40 ml compounded suspension	\$23.53
22123061	oseltamivir 15 mg/ml – 50 ml compounded suspension	\$24.00
NEW 22123067	oseltamivir 15 mg/ml – 60 ml compounded suspension	\$24.45

#### Product Identification Numbers - Commercial Supply Compounded Oral Suspension

PIN	Drug name	Compounding Fee
22123055	oseltamivir 15 mg/ml – 30 ml compounded suspension	Not Covered
22123056	oseltamivir 15 mg/ml – 40 ml compounded suspension	Not Covered
22123057	oseltamivir 15 mg/ml – 50 ml compounded suspension	Not Covered
NEW 22123068	oseltamivir 15 mg/ml – 60 ml compounded suspension	Not Covered

#### **Please Note!**

- PharmaCare Special Authority is not required for compounded suspensions of antivirals.
- Do not enter the compound fee when submitting a claim.

#### Payment of Dispensing/Compounding Fees for Antiviral Claims

Payment of fees for claims for the provincial pandemic antiviral supply and for compounding of antivirals is made one week later than the usual pharmacy payment.

The payment for the period of October 7 - 12 will include the retroactive increase in the compounding fee and reflect the new compounding fee amounts.

Payment Schedule				
	Claims period	Payment Issue Date		
	October 1 – 6	October 16		
	October 7 – 12	October 23*		
* Includes additional compound fee amounts for October 1 to 7				

Note about claim reversals: It may take up to three weeks for a reversal of a claim for pandemic supply antivirals to be deducted from a pharmacy's payment.

On remittance advices, payments for claims for antivirals will bear the adjustment code "H1" and the descriptor "Provincial Pandemic Antiviral Fees." This adjustment is for the total of fees payable for all PINs less any reversals processed.

#### **Adverse Reaction Reporting**

Health Canada recently issued the following advice: Reports of adverse reactions to antiviral medications are important. This information will be used to guide the safe and effective use of these drugs, particularly in certain patient groups (e.g., pregnant women and children < 1 year of age) for which only limited safety data may be available.

Health care professionals are encouraged to report any suspected adverse reaction involving an antiviral medication to the Canada Vigilance Program:

- by calling toll-free at 1-866-234-2345
- by reporting online
- by completing a form that you can send by: postage-paid mail or fax toll-free to 1-866-678-6789

The form and postage-paid label are available at <a href="https://www.healthcanada.gc.ca/medeffect">www.healthcanada.gc.ca/medeffect</a> or by calling 1-866-234-2345.

#### **Guidelines for Pandemic Influenza-related Infection Control for Community Pharmacies**

This practical how-to guide will help community pharmacy owners, managers and their staff to understand and improve infection control practices for pandemic influenza. The guidelines will include space management and administrative approaches as well as personal protection and disinfection procedures. Included in the appendices will be examples of scripts, messages, signs, checklists and handouts that will help to minimize the impact of the H1N1 Flu Virus on patients and staff alike.

The guidelines will be posted on the H1N1 Flu Virus Information website's Pharmacist Section at <a href="https://www.hls.gov.bc.ca/pho/pharmh1n1.html">www.hls.gov.bc.ca/pho/pharmh1n1.html</a> as soon as they are completed.

#### **Antibiotics for Secondary Pneumonia in Community and Acute Care Settings**

A report was recently completed to characterize the antibiotics that may be required for treatment of secondary bacterial pneumonia during an influenza pandemic and to project the potential demand for these antibiotics in the community and acute care settings. The full report, available at <a href="https://www.hls.gov.bc.ca/pho/pdf/response\_plan\_antibiotics\_secondary\_pneumonia.pdf">www.hls.gov.bc.ca/pho/pdf/response\_plan\_antibiotics\_secondary\_pneumonia.pdf</a>, can be summarized by the following four recommendations:

1. Antibiotic stockpiling during the current 2009-2010 influenza season is not necessary in community and acute care settings, due to low anticipated demand relative to baseline demand and sufficient anticipated capacity in the current supply chain. A very small incremental increase in the monthly antibiotic demand is expected for the

Note: In keeping with Recommendation #1 in the Response Plan, there should be no need to increase your pharmacy's normal supply of antibiotics. Simply ensure your stock is adequately replenished. community setting. Since the current supply chain is expected to manage demand increases well above the expected demand (with seasonal adjustments), antibiotic stockpiling should not be necessary. The projection and conclusion in the acute care setting are expected to be similar.

- 2. Community and acute care pharmacies should check their antibiotic inventories and adequately replenish, as required, those recommended antibiotics that are typically dispensed by individual pharmacies (see "Antibiotic Therapy Guidance" available at <a href="www.hls.gov.bc.ca/pho/pdf/antibiotic therapy guidance.pdf">www.hls.gov.bc.ca/pho/pdf/antibiotic therapy guidance.pdf</a>. This recommendation is precautionary to ensure that pharmacies are prepared with their typical inventory. In consideration of Recommendation #1 and the relatively broad array of recommended antibiotics for secondary bacterial pneumonia, pharmacies are <a href="moitto:not begin stocking recommended">not typically inventoried at the individual pharmacy</a>.
- 3. Clinicians should be reminded and/or educated on the appropriate antibiotic use for secondary bacterial pneumonia (see "Antibiotic Therapy Guidance" at <a href="www.hls.gov.bc.ca/pho/pdf/antibiotic\_therapy\_guidance.pdf">www.hls.gov.bc.ca/pho/pdf/antibiotic\_therapy\_guidance.pdf</a>). Appropriate antibiotic use is expected to lead to optimal outcomes and lower rates of resistance.
- 4. Appropriate bacterial vaccination should be encouraged and aligned with direction from the British Columbia Centre for Disease Control. Bacterial vaccination (pneumococcal vaccine and *Hemophilus influenzae* type b vaccine) in appropriate individuals may reduce the incidence of pandemic-related secondary bacterial pneumonia.

#### **COVERAGE OF PUBLICLY-FUNDED VACCINATIONS**



As of October 27, 2009, 188 pharmacists had completed the training program sponsored by the BC Pharmacy Association/B.C. Centre for Disease Control (BCCDC) for administration of injections. Over 180 additional pharmacists have registered to complete training by the end of December 2009. To date, 76 pharmacists have been authorized by the College of Pharmacists of B.C. to administer injections.

The Pharmaceutical Services Division congratulates pharmacists who have successfully completed their training and are now authorized to give injections, and is pleased that they will assist in this year's H1N1 and seasonal flu vaccination campaigns.

Following is information to assist pharmacists who administer vaccines.

## **Ordering Vaccine**

Pharmacists **authorized by the College of Pharmacists of BC** to administer injections may order vaccine by telephone through the Biological Products Monitor in their Local Health Unit (LHU).

Telephone numbers for LHUs can be found on the **Immunize BC** website at <a href="https://www.immunizebc.ca/NR/rdonlyres/E14E7B65-C7AD-41B8-8FC9-9B70C62D99A9/42302/BCHEALTHUNITS.doc.">www.immunizebc.ca/NR/rdonlyres/E14E7B65-C7AD-41B8-8FC9-9B70C62D99A9/42302/BCHEALTHUNITS.doc.</a>

Vaccine must be picked up in person and a CPBC "Authorization to Administer Injections" registration card must be presented for the first pick up. The authorized pharmacist may also be asked to sign a Private Provider Agreement at pick-up. Because pick-up procedures vary between LHUs, pharmacists should verify the correct procedure by telephone.

During the initial phase of vaccine release, priority distribution will be to Mass Public Health Clinics and physician offices. It is anticipated that authorized pharmacists who have contacted their LHU will receive vaccine after November 9, 2009. To preserve cold chain, a cooler approved by the BC Centre for Disease Control is needed for pickup.

For specifications for coolers, see the BC CDC Immunization Manual, Section VI available at <a href="https://www.bccdc.ca/dis-cond/comm-manual/CDManualChap2.htm">www.bccdc.ca/dis-cond/comm-manual/CDManualChap2.htm</a>).

All pharmacists planning to offer vaccinations should order the injection supplies they will need in advance as shortages have been reported by some suppliers.

#### **Payment for Pharmacist-administered Publicly-funded Vaccinations**

Pharmacists participation in providing vaccinations is part of Immunize BC, the Strategic Framework for Immunization in BC that supports the principle of an immunization delivery system that includes health service providers from different disciplines who deliver programs in different settings. Under the framework, the Province will pay authorized pharmacists \$10 for each **publicly-funded** vaccination they provide. As this is a public health initiative, there is no mechanism in PharmaNet for charges above this amount. However, private-pay vaccination pricing remains at the discretion of the providing pharmacy.

Payment will be made in a manner similar to payments for the provincial pandemic supply of antivirals. That is, a report of the specially-assigned Product Identification Numbers (PINs), below, will be run after the close of each weekly pay period and, after a delay of one week, will be added to the pharmacy payment.

#### **Entering Claims for Publicly-funded Vaccinations by Pharmacists**

Claims can be made only for publicly-funded vaccines administered by an authorized pharmacist. Vaccinations provided by other health care professionals, such as nurses hired for pharmacy clinics, cannot be claimed.

Submit claims using the Product Identification Numbers below. Do not enter a drug cost or fee.

Please also record the lot number for the vaccine provided to each patient in your pharmacy records. Recording vaccine lot numbers is required in case of rare events such as a vaccine recall or an Adverse Event Following Immunization (AEFI).

#### **Vaccine Product Identification Numbers**

PIN	Description
66124733	H1N1 vaccination for pregnant females
66124734	H1N1 vaccination for health care workers who are not Health Authority employees
66124735	H1N1 vaccination for patients with chronic conditions
66124736	H1N1 vaccination for all others
66124737	Seasonal flu vaccination for patients eligible for publicly-funded vaccine
66124738	Pneumococcal vaccination for patients eligible for publicly-funded vaccine

Patients wishing to be vaccinated who do not meet the criteria for the public health supply of the seasonal or pneumococcal vaccine may choose to pay to be immunized using the commercial supply. Claims for the commercial supply should not be entered on PharmaNet.

PharmaCare Product Identification Numbers for other publicly-funded vaccinations will be created at a later date.

#### Not providing vaccinations?

If your pharmacy is not offering H1N1 Flu vaccinations, you can refer your patients to the flu locator at <a href="https://www.health.gov.bc.ca/flu">www.health.gov.bc.ca/flu</a> for information on the nearest vaccination clinic.

#### **Need more information?**

See the B.C. government's **H1N1 Flu Virus Information** website at www.gov.bc.ca/h1n1/healthcareproviders.

When you visit the site, remember....you can sign up to receive an e-mail whenever a substantive update to the website information is made.

To be updated soon with **Vaccination Information** for pharmacists.