BC PHARMACARE Newsletter

Edition 20-017 September 21, 2020



In this edition

COVID-19 MINISTERIAL ORDERS ENSURE SAFE OAT DELIVERY, RECORDKEEPING AND TRAINING	. 1
Delivery and Witnessed Ingestion of Methadone by Non-Pharmacists	. 1
Recordkeeping Requirements	. 2
Pharmacist OAT Training	. 2
NEW PRACTITIONER IDs FOR PODIATRISTS COMING SOON	. 2
24/7 ADDICTION MEDICINE CLINICIAN SUPPORT LINE NOW AVAILABLE	. 3
PHARMACARE POLICY MANUAL: UNIFIED VERSION NOW AVAILABLE	. 3

COVID-19 MINISTERIAL ORDERS ENSURE SAFE OAT DELIVERY, RECORDKEEPING AND TRAINING

Three recent ministerial orders (M211, 212 and 213) changed <u>Provider Regulation</u> requirements to align with public health guidance on COVID-19 and reflect Health Canada's COVID-19—related temporary exemptions to the *Controlled Drugs and Substances Act* (CDSA).

M211, M212, and M213 relate to PharmaCare claims for delivery and witnessed ingestion of methadone, recordkeeping requirements, and pharmacist opioid agonist treatment (OAT) training. The orders came into effect on July 9, 2020.

Delivery and witnessed ingestion of methadone by non-pharmacists

<u>M211</u> allows for payment of claims when methadone is delivered to a patient's residence (or other non-pharmacy location) and ingestion is witnessed by a non-pharmacist in accordance with <u>Professional Practice Policy-71 (PPP-71)</u> (PDF, 386 KB) Delivery of Opioid Agonist Treatment. The non-pharmacist who delivers and witnesses the ingestion of



The PharmaCare Newsletter is published by the Pharmaceutical Services Division to provide information to British Columbia's health care providers.

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.

www.gov.bc.ca/pharmacarepharmacists | www.gov.bc.ca/pharmacareprescribers | www.gov.bc.ca/pharmacaredeviceproviders

methadone must be suitably qualified, employed by a pharmacist, and authorized by a pharmacist to do so. Note that within a pharmacy, witnessing ingestion must still be performed by a pharmacist.

The claim must be submitted by a pharmacy enrolled in the OAT provider sub-class. The non-pharmacist employee must record their name and signature in the beneficiary's patient record.

<u>M211</u> aligns with the College of Pharmacists of BC's April 2020 amendments to <u>PPP-71 (PDF, 386 KB)</u>, which allow pharmacists to authorize non-pharmacist pharmacy staff to deliver and witness ingestion of methadone where it is not possible for a pharmacist or regulated health professional to do so. Those amendments were enabled by <u>Health</u> Canada's COVID-19—related CDSA exemptions.

Recordkeeping requirements

As a health and safety precaution during the COVID-19 pandemic, <u>M212</u> temporarily waives <u>subsections 13(2)(a)(vii) and</u> (b)(v) of the Provider Regulation ("Additional records to be kept by pharmacy providers") so that:

- original OAT prescriptions do not need to be signed by the beneficiary, as long as the order is in effect; and
- patients do not need to sign an accountability log.

Please note that the College of Pharmacists of BC's existing signature requirements are still in effect and are being reviewed at this time. Please see the College's FAQ for more information.

The College of Pharmacist's amendments to Section 8(3.1) of the <u>Community Pharmacy Standards of Practice</u> allow for the transfer of a prescription for controlled drug substances to another pharmacy if the transfer is permitted under a section 56 exemption to the Controlled Drugs and Substances Act. To align with these amendments, <u>M211</u> also temporarily waives the requirement for a pharmacy provider enrolled in the OAT sub-class to keep the transferred prescription form, despite section 13(2)(a) of the Provider Regulation. Note the original prescription must still be retained by the first pharmacy.

Pharmacist OAT Training

<u>M213</u> waives the requirement of <u>subsection 3.1(3)</u> of the <u>Provider Regulation ("Transition—opioid agonist treatment provider sub-class")</u> for one pharmacist per pharmacy to have completed pharmacist OAT training by March 31, 2021. The in-person training workshops were suspended in March 2020 due to COVID-19 safety concerns. The BC Pharmacy Association is currently developing virtual training and will re-launch the training later this fall.

NEW PRACTITIONER IDS FOR PODIATRISTS COMING SOON

The College of Physicians and Surgeons of British Columbia (CPSBC) <u>amalgamated</u> with the College of Podiatric Surgeons of British Columbia (CPodSBC) on August 31, 2020. The amalgamated colleges are continuing under the name College of Physicians and Surgeons of British Columbia. New CPSBC practitioner ID numbers for podiatric surgeons will be imported into PharmaNet in early October. Until then, the CPodSBC licence number can be used on prescription claims.

After October 7, 2020, pharmacists must submit prescription claims for podiatric surgeons with the:

• Practitioner ID Reference Code 91, and

• Podiatrist's 5-digit CPSBC licence number (practitioner ID). If you do not have this, either use the Prescriber Identification Transaction (TIP) or call the PharmaNet Help Desk to obtain the practitioner ID.

24/7 ADDICTION MEDICINE CLINICIAN SUPPORT LINE NOW AVAILABLE

Launched in June 2020, a new 24/7 Addiction Medicine Clinician Support Line offers addiction medicine support for B.C. pharmacists, physicians, nurse practitioners and nurses caring for patients with substance use concerns.

Healthcare providers may call the line to connect to a specialist in addiction medicine, including emergency, acute and community care. The consultation can support screening, assessment, treatment and management of substance use and substance use disorder(s).

Support is available for a wide range of substance use concerns, such as opioids, alcohol, stimulants and benzodiazepines.

The support line doesn't provide:

- Appointment bookings
- Residential treatment referrals or personal clinical care
- Arrangements for laboratory or diagnostic investigations
- Patient care transfer
- Consultation for inquiries unrelated to substance use
- Coordination of prescribing and pharmacy services

If code requirements are met, physicians can bill MSP.

The support line was created in response to the ongoing dual public health emergencies of opioid overdoses and the COVID-19 pandemic. It responds to gaps in addiction care services in rural and remote communities, and the lack of pharmacists and clinicians trained in addiction medicine.

To speak to an addiction medicine specialist, call the 24/7 Addiction Medicine Clinician Support Line at 778 945-7619.

PHARMACARE POLICY MANUAL: UNIFIED VERSION NOW AVAILABLE

A unified version of the PharmaCare Policy Manual is now <u>available online</u> under PharmaCare Publications. As mentioned in <u>PharmaCare Newsletter 20-015 (PDF, 240 KB)</u>, the unified version offers the entire PharmaCare Policy Manual on a single web page for convenient research.

Please note the original PharmaCare Policy Manual in HTML remains available here.