

BC PharmaCare Newsletter

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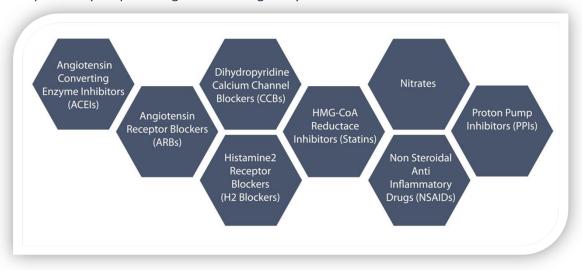
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FULL IMPLEMENTATION OF THE MODERNIZED REFERENCE DRUG PROGRAM

The six month transition to the Modernized Reference Drug Program (RDP), as announced in <u>PharmaCare Newsletter</u> <u>16-004</u> on Jun. 1, 2016, is nearing completion. The Modernized Reference Drug Program (RDP) will be fully implemented on **Dec. 1, 2016**.

Read more to help ensure your patients get the coverage they need.



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.



Assisting patients taking a drug that will be only partially covered

On **Dec. 1, 2016**, the drugs below will become partial benefits. If a patient requests a fill or refill of any of these drugs, you can assist them by determining if their coverage is affected and if they should consider switching to a drug that will continue to be fully covered.

Therapeutic Category	Drugs that will become partial benefits on Dec. 1, 2016				
Angiotensin Converting Enzyme Inhibitors (ACEIs)	- captopril				
	cilazapril with/without hydrochlorothiazide				
	quinapril with/without hydrochlorothiazide				
	• trandolapril				
Angiotensin Receptor Blockers (ARBs)	eprosartan with/without hydrochlorothiazide				
	■ irbesartan with/without hydrochlorothiazide				
	 olmesartan with/without hydrochlorothiazide 				
Dihydropyridine Calcium Channel Blockers (CCBs)	• felodipine				
Histamine₂ Receptor Blockers (H₂ Blockers)	• cimetidine				
Proton Pump Inhibitors (PPIs)	■ esomeprazole 20 or 40 mg ■ omeprazole 20 mg				
	■ lansoprazole 15 or 30 mg ■ pantoprazole sodium 40 mg				
HMG-CoA Reductase Inhibitors (Statins)	fluvastatin pravastatin				
	■ lovastatin ■ simvastatin				

Determining if a patient's coverage is affected

- Does PharmaCare usually pay any of the patient's annual drug cost? If not, they do not need to consider switching.
- Was the patient taking more than one of the partial benefits above on or before Jun 1, 2016? If so, they do not need to consider switching. Their drugs will continue to be eligible for full coverage subject to the rules of their PharmaCare plan, including any annual deductible requirement.
- Does the patient have the necessary Special Authorities for the drug they are currently taking? If so, they do not need to consider switching. Their current coverage will continue indefinitely.

Please note: To have full coverage of an ARB or PPI, a patient needs two Special Authorities—one granting coverage for a limited coverage drug, another granting full coverage of a partially covered RDP drug.

Patients who rely on PharmaCare coverage, are taking only one RDP drug, and do not have Special Authority coverage for that drug, may wish to consider switching. If a patient chooses to switch, you can adapt their prescription or refer them to their physician or nurse practitioner. If you undertake to adapt the prescription, please consult the Guide to the Modernized RDP (PDF) for guidance.

Key resources for health care professionals

- To find out if a patient has Special Authority coverage for their current drug—or to order additional printed copies of the <u>patient information sheet/rack card</u> (PDF) or prescription bag stuffers—contact the **PharmaCare Help Desk**.
- For a complete list of RDP drugs that will be fully covered after Dec. 1, 2016, see the RDP Master Spreadsheet (XLS).
- For information on switching a patient's medication, consult the <u>Guide to the Modernized RDP</u> (PDF).
- Looking for a 'refresher' on adapting RDP prescriptions? Visit the BC Pharmacy Association's RDP e-Training site.

BC SMOKING CESSATION PROGRAM

BC Smoking Cessation Program—Upcoming Product Format Changes



The manufacturer of the Nicoderm® and Nicorette® brands is introducing a new product format—Nicoderm Rx and Nicorette Rx. As this new format is rolled out, the PharmaCare BC Smoking Cessation Program will begin moving to coverage of the "Rx" line of products, as pictured above and indicated in the tables below.

The first change will occur **Jan. 1, 2017**, when PharmaCare will cover the Nicoderm Rx products. The second change will happen **Apr. 1, 2017**, with the introduction of the Nicorette Rx format and the shift to the mint flavor only.

Please note...

- The manufacturer intends these products to be dispensed by a healthcare professional only, rather than for retail sale.
- We recommend that pharmacies adjust their inventory, keeping in mind that existing product can continue to be sold but cannot be claimed under the BC Smoking Cessation Program after the dates indicated below.
- PharmaCare will cover the products at their new, lower retail cost. The manufacturer is providing pricing information in its direct communications to pharmacies.
- The new "Rx" product can be dispensed only under the BC Smoking Cessation Program. For regular retail sale, you must use other formats/products.
- If, after Jan. 1, 2017, you dispense a non-"Rx" Nicoderm product under the BC Smoking Cessation Program, you will be reimbursed only up to cost of the new "Rx" product.
- If, after Apr. 1, 2017, you dispense any non-"Rx" products under the BC Smoking Cessation Program, you will be reimbursed only up to cost of the new "Rx" product.
- There are no other changes to the BC Smoking Cessation Program. For full details about the program, please see Smoking Cessation Program Information for Pharmacists.

Changes to products covered as of Jan. 1, 2017 (changes in red)

Product Name	Туре	Strength	Pack Size	Natural Product Number (NPN)	Max Units over 12 weeks	Max boxes over 12 weeks	Max per dispense
Nicorette	gum ¹	2 mg	105	2091933	945	9	3 boxes
Nicorette	gum ¹	4 mg	105	2091941	945	9	3 boxes
Nicorette	lozenge	2 mg	88	2247347	792	9	3 boxes
Nicorette	lozenge	4 mg	88	2247348	792	9	3 boxes
Nicoderm Step 1 Rx	patch	21 mg	7	2093146	84	12	4 boxes
Nicoderm Step 2 Rx	patch	14 mg	7	2093138	84	12	4 boxes
Nicoderm Step 3 Rx	patch	7 mg	7	2093111	84	12	4 boxes
Nicorette	inhaler	10 mg ²	42	2241742	504	12	4 boxes

¹Nicorette gum flavours: Cinnamon, Extreme Chill Menthol, Fresh Fruit, Fresh Mint, Ice Mint. ² 4 mg delivered

Changes to products covered as of Apr. 1, 2017 (changes in red)

Product Name	Туре	Strength	Pack Size	Natural Product Number (NPN)	Max Units over 12 weeks	Max boxes over 12 weeks	Max per dispense
Nicorette Rx	gum ¹	2 mg	105	2091933	945	9	3 boxes
Nicorette Rx	gum ¹	4 mg	105	2091941	945	9	3 boxes
Nicorette Rx	lozenge	2 mg	88	2247347	792	9	3 boxes
Nicorette Rx	lozenge	4 mg	88	2247348	792	9	3 boxes
Nicoderm Step 1 Rx	patch	21 mg	7	2093146	84	12	4 boxes
Nicoderm Step 2 Rx	patch	14 mg	7	2093138	84	12	4 boxes
Nicoderm Step 3 Rx	patch	7 mg	7	2093111	84	12	4 boxes
Nicorette Rx	inhaler	10 mg ²	42	2241742	504	12	4 boxes

¹Nicorette gum flavour: **Ultra Fresh Mint only**. ² 4 mg delivered

Important Reminder—Nicotine Replacement Therapies (NRTs) for the Federally Insured

PharmaCare covers NRTs for all residents of British Columbia, of any age, who have active MSP coverage, use tobacco, and have not already exhausted their yearly limit on NRTs covered by PharmaCare.

This includes individuals who do not have PharmaCare plan coverage and those with active MSP and federal coverage under, for instance:

- Interim Federal Health Program (delivered through Citizenship and Immigration Canada)
- Veterans Affairs Canada
- Canadian Forces
- Non-Insured Health Benefits Program patients
- RCMP members (retired)

Residents covered by federal drug plans may choose whether to use PharmaCare coverage or their federal coverage.

Please note: The prescription smoking cessation drugs, Zyban® and Champix®, are covered only for individuals with Fair PharmaCare coverage or coverage under PharmaCare plans B (Residential Care), C (Income Assistance) or G (Psychiatric Medications).