

1. Introduction to the BC PharmaCare Program

- What is BC PharmaCare? 2
- When is a person considered a B.C. resident for PharmaCare purposes? 2
- Are B.C. residents covered for travel supplies? 2
- Out-of-Province Coverage..... 3
- Who is responsible for BC PharmaCare? 3
- How does PharmaCare work?..... 3
- Which drugs and medical supplies does PharmaCare cover? 4
- Are there limits on what PharmaCare will cover? 4
- How are claims processed?..... 5
- Is BC PharmaCare part of the Medical Services Plan? 5
- Other insurers 5

[June 1, 2015: Updated to reflect Provider Enrollment Regulation terminology][October 1, 2017: Updated to reflect the addition of Plan W]

What is BC PharmaCare?

- PharmaCare is British Columbia’s prescription drug program.
- PharmaCare helps B.C. residents to pay for:
 - eligible prescription drugs
 - fees charged by pharmacy providers including:
 - eligible dispensing fees
 - clinical services fees (for renewal or adaptation of a prescription by a pharmacist)
 - medication management fees (for specific medication services)
 - fees for administering publicly funded vaccines
 - insulin pumps for [Effective April 1, 2014] persons age 25 or younger with insulin-dependent diabetes
 - specific insulin pump supplies
 - prosthetic devices (including mastectomy supplies)
 - orthotic devices for children 18 years or younger
 - ostomy supplies
 - certain over-the-counter smoking cessation products

When is a person considered a B.C. resident for PharmaCare purposes?

- A person is considered a B.C. resident and eligible for PharmaCare coverage if he/she has met the residency requirement for the Medical Services Plan and has valid, active B.C. Medical Services Plan coverage.

>>[Learn more about the MSP residency requirement.](#)

Are B.C. residents covered for travel supplies?

- Yes. B.C. residents are eligible for an early “top-up” refill under the Travel Supply Policy once every 6 months (180) days.

>>[Learn more in Section 5.4., Travel Supply Policy.](#)

Out-of-Province Coverage

- PharmaCare does not cover benefits for patients who are temporarily out of the province except:
 - under the Travel Supply policy;
 - **through the Plan W funding arrangement with the FNHA, under which out-of-province purchases of Plan W benefits may be reimbursed if the client submits a manual claim to PharmaCare; and**
 - for certain pre-approved out-of-province expenses when an individual requires treatment not available in British Columbia.
- For example, PharmaCare will provide coverage of usual PharmaCare benefit medications for patients undergoing transplant procedures out-of-province (subsequent to receiving faxed notification of the surgery from the British Columbia Transplant Society).
- In these cases, coverage of medications remains subject to PharmaCare pricing policies and the usual rules of the patient's PharmaCare plan.
- A request in writing should be made to Health Insurance BC.

Who is responsible for BC PharmaCare?

- The Medical Beneficiary and Pharmaceutical Services Division of the B.C. Ministry of Health is responsible for the PharmaCare program. The B.C. Ministry of Health sets all policies governing the program.
- [Health Insurance BC](#) administers the PharmaCare program on behalf of the Medical Beneficiary and Pharmaceutical Services Division of the Ministry of Health. Health Insurance BC can answer questions about both the [Medical Services Plan](#) and PharmaCare.

How does PharmaCare work?

- PharmaCare offers coverage through **11** plans.
 - **Fair PharmaCare Plan**—This plan covers the majority of B.C. residents and offers assistance based on family net income.
 - **Plan B**—Permanent residents of licensed residential care facilities
 - **Plan C**—Recipients of B.C. Income Assistance
 - **Plan D**—Individuals registered with one of four provincial Cystic Fibrosis Clinics
 - **Plan F**—Children eligible for benefits through the At Home Program
 - **Plan G**—Psychiatric Medications Plan
 - **Plan P**—BC Palliative Care Drug Plan (part of the BC Palliative Care Benefits Program)
 - **Plan W**—**First Nations Health Benefits**
 - Plan M—Medication Management Services
 - Plan S—Nicotine replacement therapies under the Smoking Cessation Program
 - Plan X—Antiretroviral medications through the BC Centre for Excellence in HIV/AIDS

- B.C. residents can be covered under more than one PharmaCare plan.

For instance, a B.C. resident with Cystic Fibrosis may be covered under Fair PharmaCare for the majority of their prescription costs but receive coverage through Plan D for additional items.

Which drugs and medical supplies does PharmaCare cover?

- PharmaCare covers a broad range of prescription drugs. For specific patients, it also covers certain medical devices and supplies, prosthetics, orthotics, and non-prescription medications.

More about drug coverage

- The drugs PharmaCare covers include eligible medications (as determined by PharmaCare) prescribed by a physician, dentist, midwife, nurse practitioner, naturopath, podiatrist, or optometrist licensed and practising in B.C.

>> See the [PharmaCare Formulary Search](#) for information on the medications that PharmaCare covers.

- **Smoking cessation products** — Specific nicotine replacement therapy products are fully covered for all B.C. residents with active MSP coverage.

More about medical supply coverage

- PharmaCare covers the following medical supplies for the patients identified below:
 - **Insulin, needles, syringes and blood glucose test strips and specific pump supplies** —for adults and children with insulin-dependent diabetes
 - **Insulin pumps**—[Effective April 1, 2014] for persons age 25 or younger only, with insulin-dependent diabetes
 - **Prosthetic devices (including mastectomy supplies)**—for patients of any age
 - **Orthotic devices**—for patients age 18 or younger
 - **Ostomy supplies**—for ostomy patients of any age

>>Learn more about [Medical Supplies Coverage](#).

Are there limits on what PharmaCare will cover?

- Yes. To ensure the PharmaCare program is financially sustainable, PharmaCare does not cover all prescription drugs. Instead, it covers drugs based on their **effectiveness** and **cost**.
- PharmaCare fully covers some drugs (subject to the rules of a patient’s PharmaCare plan) but only partially covers other drugs.

For instance, if several versions of a drug contain the same medically active ingredients, PharmaCare may cover only the lower cost versions. If several different drugs can be used to treat the same condition, PharmaCare may cover the more expensive drugs only if the patient has not been helped by the lower cost standard treatment.

>> Learn more about [PharmaCare General Coverage Policies](#).

- Coverage also may be limited by the rules of a patient’s PharmaCare plan.

For instance, under the Fair PharmaCare plan, if a patient and their spouse has annual net income above \$15,000, they will have to meet a deductible (that is, pay their own drug costs) until the deductible is met. Once it is met, PharmaCare covers 70% of their additional costs for the rest of the year or until the Family Maximum is met. If the Family Maximum is met, PharmaCare pays 100% of drug costs for the rest of the year.

Are there items PharmaCare does not cover at all?

- Yes, there are items that are not part of the PharmaCare program, items that PharmaCare has decided not to include as benefits, and medications that are already provided through other agencies.

>> Learn more about What is not covered through PharmaCare on our “About PharmaCare” web page.

- [June 1, 2015] PharmaCare covers benefits only if they are dispensed by providers enrolled in the PharmaCare program.

How are claims processed?

- Most claims for prescription drugs and most medical supplies are submitted by a pharmacy or device provider on the province-wide computer network called **PharmaNet**.
- Claims are automatically reviewed on PharmaNet and the PharmaCare portion of the cost is deducted from the amount a patient pays when they pick up their product. Patients do not have to submit receipts to PharmaCare.

Prescription claims: Any amount PharmaCare is contributing is printed on the pharmacy receipt.

- PharmaNet adjudicates both product cost and pharmacy fees.
- Pharmacy claims for services to residential care facilities and certain medical supplies must be submitted manually.

Is BC PharmaCare part of the Medical Services Plan?

- No. The B.C. Medical Services Plan insures medically required services provided by physicians and supplementary health care practitioners, laboratory services and diagnostic procedures. PharmaCare covers prescription drugs and some medical devices and supplies.

Other insurers

- PharmaCare does not normally cover costs that are fully reimbursed by another payer.

>>For more information, see Section 3.4 Patients—Other Insurers.