2 Provider Enrollment in the PharmaCare Program

2.1 PharmaCare Enrollment

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2.2 Non-Pharmaceutical Supplier Participation Agreement (deleted)
2.1 PharmaCare Enrollment

[June 1, 2015: Updated to reflect Provider Regulation]

[August, 2019: Updated to reflect change in provider subclass to Opioid Agonist Treatment provider]

General Policy Description

The Provider Regulation (“the Regulation”) under the Pharmaceutical Services Act (“the Act”) came into force on December 1, 2014. The Regulation sets out enrollment criteria for pharmacies, facilities, and other places where drugs, devices, substances or related services are provided (“sites”).

To submit PharmaCare claims for their patients and to be eligible for any PharmaCare payments, a site (pharmacy or device provider) must apply for enrollment in the PharmaCare program.

Policy Details

Overview

PharmaCare makes payments on behalf of beneficiaries for eligible drugs, medical supplies and services, only to providers who:

- have submitted a Provider Enrollment Form (HLTH 5432) with any required documentation, and
- have subsequently been approved for enrollment in the appropriate class and/or sub-class by the B.C. Ministry of Health.

Provider Regulation Definitions

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beneficiary</td>
<td>A person enrolled in a PharmaCare drug plan.</td>
</tr>
<tr>
<td>Claim</td>
<td>A claim for payment that is submitted by a provider to PharmaCare in respect of a benefit provided to a beneficiary.</td>
</tr>
<tr>
<td>Benefit</td>
<td>A drug, device, substance or related service listed on a formulary or related services list.</td>
</tr>
<tr>
<td>Provider</td>
<td>A site (e.g., pharmacy, device provider) that is enrolled in PharmaCare for the purpose of receiving payment.</td>
</tr>
</tbody>
</table>
| Manager            | - For pharmacies, the manager as defined in the Pharmacy Operations and Drug Scheduling Act.  
                      - For other provider types, the manager of the site. |
| Class              | The two classes of provider established in the Provider Regulation:  
                      (a) pharmacy provider  
                      (b) device provider |
| Sub-class          | Sub-classes within each class, which includes:  
                      - for Pharmacy Provider class: Plan B and Opioid Agonist Treatment provider  
                      - for Device Provider class: compression garment provider, limb prosthesis provider, breast prosthesis provider, ocular prosthesis provider and orthosis provider; and other (ostomy supplier, diabetes supplier). |
Who should enroll?

- [Updated March 17, 2017] A Provider Enrollment Form (HLTH 5432) should be completed by any site wishing to enroll as a provider with PharmaCare in order for:
  - the site to receive payment for providing PharmaCare benefits to PharmaCare-eligible individuals, or
  - PharmaCare-eligible individuals to receive payment for PharmaCare benefits provided by their site.
- A separate Provider Enrollment Form must be submitted for each site.

Who does not need to enroll?

- Anyone who needs PharmaNet access only to view patient records (e.g., medical practitioners, emergency departments)
- In-patient–only hospital pharmacies
- Allergists and allergy laboratories
- Fertility clinics
- Dispensing physicians—unless the College of Physicians and Surgeons of British Columbia identifies the medical practitioner as a person who should be receiving payment for claims and it would be in the public interest for the medical practitioner to receive payment for claims.

Provider Obligations—Regarding Claims

- The Pharmaceutical Services Act, Provider Regulation and the College of Pharmacists bylaws establishes the following obligations for Providers:
  - The Provider must have, at all times, a designated pharmacy manager and a valid and subsisting pharmacy licence for the pharmacy.
  - All claims submitted to PharmaCare must be submitted in accordance with the provisions of applicable law and College of Pharmacists of British Columbia rules.
  - All claims submitted to PharmaCare must contain all information required by PharmaCare.
  - All claims submitted to PharmaCare must be true, accurate and complete to the best of the Provider’s knowledge.
  - The Provider shall not submit a claim to PharmaCare that the Provider knows or ought reasonably to know is false, inaccurate or misleading.
  - Except where the Provider pharmacy is expressly directed or permitted by PharmaCare to submit claims in another manner, the Provider must use PharmaNet to submit all claims. The Provider shall abide by conditions established by PharmaCare in respect of connection to and use of PharmaNet, including, but not limited to, PharmaNet Professional and Software Compliance Standards.
  - Providers cannot claim an amount for a benefit that exceeds what the provider would charge to any other person.

>> For further details, see Section 17 of the Provider Regulation.
**Provider Obligations—Regarding Adherence to PharmaCare Policy**

- The Provider shall abide by all PharmaCare policies and procedures, provided that the Provider is given reasonable notice of new or revised policies and procedures in advance of implementation through PharmaCare Newsletters or PharmaNet Bulletins.

**Provider Obligations—Regarding Inducements**

- Except as may be permitted by PharmaCare policy, no inducements shall be provided by the Provider, or by an agent on behalf of the Provider to any other person to secure prescription orders, or in relation to the provision of a drug, medical supply, or service on the portion of the cost of that drug, supply or service paid for or reimbursed by PharmaCare. “Inducement” means consideration including, but not limited to, cash, points, loyalty points, coupons, discounts, goods, rewards and similar schemes which can be redeemed for a gift or other benefit.

  >> Refer to the *Pharmaceutical Services Act, Part 5, Section 51, Sub-section (2).*

**Records and Audit**

- Refer to Section 10, Audit for details.

**Ministry Change to, or Termination of, a Provider’s Enrollment**

- Subject to 30 days' notice and an opportunity to be heard, the Minister may:
  - change or cancel a designation made under the Act, or
  - cancel a provider's enrollment.

- The minister must give to a provider notice of the following:
  - an intention to change or cancel a provider's enrollment in a class or sub-class
  - an intention to change or add limits and conditions on a provider's enrollment.

- A provider who receives a notice described above may respond to the notice by delivering to the minister, within the period set out in the notice, a written submission respecting why the minister should accept the applicant's application for enrollment, should not change or cancel the provider's enrollment, or should resume payments to the provider, as applicable, and any relevant records or other evidence to support the position of the applicant or provider.

  - On receipt of a response from the provider, the minister must consider the submission, records and evidence provided; may vary, confirm or reverse the decision to deny the applicant's enrollment, change or cancel the provider's enrollment, or take any action the minister must or may take under section 45 of the Act, as applicable, and; must give notice to the applicant or provider of the decision or action taken.

- A notice given by the minister under the Act is deemed to have been received:
  - if sent by registered mail or any other form of delivery, other than personally or electronically, 3 days after the date the notice was sent;
  - if sent electronically, 24 hours after the time the notice was sent.
Suspension

- The minister, without giving notice or an opportunity to be heard, may suspend payments owing under the Pharmaceutical Services Act by the government to a provider if:
  - the provider has engaged in conduct that could be the subject of enforcement action, or has been convicted of a prescribed offence (see below) under an enactment of British Columbia or Canada,
  - prescribed circumstances exist (see below), or
  - it would be in the public interest to suspend payment.

- As soon as reasonably practicable after suspending payments, the minister must give notice of the suspension and an opportunity to be heard.

- The minister must resume payments and pay any amounts owing during the suspension period if
  - on the grounds set out in an enforcement action that is not commenced within 3 months of the suspension, or
  - following a hearing, and the minister determines that
    - the grounds for suspending the payments no longer exist, or
    - suspension of payments is unnecessary for any reason, or is not required to protect the public interest.

- If a provider does not respond within 21 days after notice is given or if the minister does not resume payments after giving an opportunity to be heard,
  - the minister, if applicable, may cancel the enrollment of the provider without giving further notice or an opportunity to be, and
  - despite any provision of the Pharmaceutical Services Act or a regulation or an agreement made under it no further amounts are owing to the provider, and any agreement with the provider is terminated without notice or compensation of any kind.

- The prescribed offences for suspension of payments are as follows:
  - section 5 [trafficking] of the Controlled Drugs and Substances Act (Canada);
  - section 46 of the Controlled Drugs and Substances Act (Canada), as it relates to a contravention of any provision of
  - Part 2 [permitted activities and general obligations of pharmacists] of the Benzodiazepines and Other Targeted Substances Regulations (Canada), SOR/2000-217, or
  - sections 30 to 45 of the Narcotic Control Regulations (Canada), C.R.C., c. 1041.

The prescribed circumstances for suspension of payments are as follows:

- if the provider is a corporation and an officer or a director of the provider has been convicted of an offence referred to above;
- if a provider becomes ineligible to be enrolled as a provider, except in the circumstances relating to an outstanding audit amount;
• in the case of the **Opioid Agonist Treatment Provider** sub-class: if the pharmacy provider's site is no longer served by pharmacists who are appropriately qualified to dispense medications for opioid agonist treatment (OAT);

• in the case of a device provider sub-class: if the device provider's site is no longer served by a person who is appropriately qualified as described by that section to provide the applicable type of benefit.

**Provider Requests for Changes to Enrolment**

• Once you have submitted your application, as owner of the site, you are required to notify Health Insurance BC of any of the following in accordance with the notification requirement specified in the table below.

• Failure to abide by your duties and obligations may result in delay or suspension of payments.

<table>
<thead>
<tr>
<th>CHANGE</th>
<th>NOTIFICATION REQUIREMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in provider contact information</td>
<td>Minimum 7 days before change</td>
</tr>
<tr>
<td>Change of operating/business or corporate name</td>
<td>Minimum 7 days before change</td>
</tr>
<tr>
<td>Change in owner information</td>
<td>Minimum 7 days before change</td>
</tr>
<tr>
<td>Change of manager</td>
<td>Minimum 7 days before change</td>
</tr>
<tr>
<td>Change of location</td>
<td>Minimum 7 days before change</td>
</tr>
<tr>
<td>Changes to a Power of Attorney</td>
<td>Minimum 7 days before change</td>
</tr>
<tr>
<td>Cancellation of sub-class</td>
<td><strong>Opioid Agonist Treatment</strong> — 30 days before services will end</td>
</tr>
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<td></td>
<td><strong>Plan B</strong>— No later than the last day of the month before the final full month in which service will be provided</td>
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<tr>
<td></td>
<td><strong>Device Provider</strong>— as soon as reasonably practicable</td>
</tr>
<tr>
<td>Request to add a sub-class</td>
<td>Recommended notification period: Submit the request at least 21 days in advance of requested effective date to allow for processing.</td>
</tr>
<tr>
<td>Notice of certain action or event(s)*</td>
<td>Immediately</td>
</tr>
<tr>
<td>Notice of disposition (sale) or closure</td>
<td>Minimum 30 days before change.</td>
</tr>
</tbody>
</table>

*Actions or events include: order, suspension and/or cancellation of billing privileges, judgment or conviction; suspension or cancellation of pharmacist’s registration and/or pharmacy licence; disciplinary action taken by a governing body or action or proceeding taken by the Canadian Board for Certification of Prosthetists and Orthotists; instances in which an owner of the site has been the director of a corporation that has declared or been petitioned into bankruptcy; and, a requirement to pay an amount to a public insurer, other than BC PharmaCare.

>> Please refer to Changing your enrollment information for instructions on how submit notice of changes to your enrollment information.
Procedures

Procedures for enrolling as a PharmaCare provider

How to enroll

• For information on the PharmaCare enrollment process and requirements, see the PharmaCare Provider Enrollment Guide.

• The following enrollment forms are available on the PharmaCare website at www.gov.bc.ca/pharmacarepharmacists or www.gov.bc.ca/pharmacaredeviceproviders:
  - PharmaCare Provider Enrollment Form (HLTH 5432)
  - Schedule A (HLTH 5432A)—Owner Details
  - Schedule B (HLTH 5432B)—Additional Sites
  - Schedule C (HLTH 5432C)—Additional Information

• Approved sites become PharmaCare providers and are issued a Site ID—a unique identification code issued by Health Insurance BC (e.g. A01) and formerly known as the “Pharmacy/PharmaCare Code/ID.”

Changing your enrollment information

• Notify PharmaCare Information Support at Health Insurance BC of changes to your enrollment information using the PharmaCare Provider Change Form (HLTH 5433).

  >> For information on notification requirements regarding changes to PharmaNet connections, see Section 2.5 of this manual.

  >> For contact information, see Section 11, of this manual.

Tools & Resources

• PharmaCare Provider Enrollment Guide
  - PharmaCare Provider Enrollment Form (HLTH 5432)
    - Schedule A (HLTH 5432A)—Owner Details
    - Schedule B (HLTH 5432B)—Additional Sites
    - Schedule C (HLTH 5432C)—Additional Information

• PharmaCare Provider Change Form (HLTH 5433)

• Pharmaceutical Services Act

• Provider Regulation

• Prosthetic and Orthotic Program (device providers only):
  - General statement of program policy
  - Detailed policy and procedural requirements
  - Information sheet—Quick Facts for Health Care Professionals

• College of Pharmacists of British Columbia Pharmacy Licensure

• Patient Information Sheet—Inducements
2.2 Non-Pharmaceutical Supplier Participation Agreement (deleted)

Content deleted as non-pharmaceutical suppliers now enroll as device providers under the Provider Regulation.