



Published by the Pharmaceutical Services Division to provide information for British Columbia's health care providers

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PharmaCare Website

Our website address has now changed to...

www.health.gov.bc.ca/pharmacare

Still using old bookmarks to access the site? When using old bookmarks, you will be automatically referred to the relevant page on the new site.

To save time, update your bookmarks on your next visit.

PHARMANET CHANGES FOR FREQUENCY OF DISPENSING—PROGRESS REPORT

Timeline Update

The Interim Agreement Management Committee, comprised of representatives from the BC Pharmacy Association and Ministry of Health Services, recently agreed that, when a patient needs an interim supply of a new prescription until their next scheduled compliance package is prepared, the dispense would be exempt from frequency of dispensing fee caps.

The need to add this exemption to the PharmaNet system will delay implementation of the permanent PharmaNet solution until **July 23, 2009**. For the period up to that date, Frequency of Dispensing Transition Strategy adjustments will continue.

Details about the PharmaNet changes will be published in an upcoming newsletter.

**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.**

SPECIAL SERVICES FEES

The number of Special Services fees that PharmaCare paid each month over the past year:

May 2009.....	2,357	Jan 2009	2,131	Sep 2008	2,972
Apr 2009	2,347	Dec 2008	3,526	Aug 2008	2,373
Mar 2009	2,252	Nov 2008	3,079	Jul 2008	2,905
Feb 2009	2,100	Oct 2008.....	3,309	Jun 2008.....	2,689

LOW COST ALTERNATIVE (LCA) / REFERENCE DRUG PROGRAM (RDP) BOOKLET CHANGES

Effective **July 23, 2009**, the following LCA categories (including both existing and new PharmaCare benefits) will be revised.

Category		New LCA Price	New LCA Status
CHLORDIAZEPOXIDE/CLIDINIUM CAP 2.5/5 MG			
618454	APO-CHLORAX		F (no change)
115630	LIBRAX®	0.2418	P (no change)
CILAZAPRIL/HYDROCHLORO TAB 5/12.5 MG			
2284987	APO-CILAZAPRIL/HCTZ		F (no change)
2181479	INHIBACE PLUS®	0.6491	P (no change)
DOXEPIN CAP 10 MG			
2049996	APO-DOXEPINE		F (no change)
24325	SINEQUAN	0.1960	P (no change)
ERYTHROMYCIN ETHYLSUCCINATE TAB 600 MG			
637416	APO-ERYTHRO-ES		F (no change)
583782	EES®	0.3490	P (no change)
FLECAINIDE ACETATE TAB 50 MG			
2275538	APO-FLECAINIDE		F (no change)
1966197	TAMBOCOR	0.4106	P (no change)
FLECAINIDE ACETATE TAB 100 MG			
2275546	APO-FLECAINIDE		F (no change)
1966200	TAMBOCOR	0.8212	P (no change)
FLUNISOLIDE NASAL SPRAY 0.025%			
2239288	APO-FLUNISOLIDE	0.5129	P
878790	RATIO-FLUNISOLIDE		F (no change)
2162687	RHINALAR		P (no change)
1927167	PMS-FLUNISOLIDE	no change	P (no change)

F – Fully covered P – Partially covered

continued...

LCA/RDP BOOKLET CHANGES, CONTINUED

Category		New LCA Price	New LCA Status
IMIPRAMINE TAB 50 MG			
326852	APO-IMIPRAMINE		F (no change)
10480	TOFRANIL®	0.3951	P (no change)
KETOPROFEN CAP 50 MG			
790427	APO-KETO	0.1725	P
2150808	PMS-KETOPROFEN		p**
2044633	NU-KETOPROFEN	0.1725	P (no change)
KETOPROFEN EC TAB 50 MG			
790435	APO-KETO-E	0.1725	P
2150816	PMS-KETOPROFEN E 50		p**
2044781	NU-KETOPROFEN-E	0.1725	P
LEVODOPA/CARBIDOPA TAB 200/50 MG			
2245211	APO-LEVOCARB CR		F (no change)
870935	SINEMET® CR	0.9815	P (no change)
MEDROXYPROGESTERONE TAB 100 MG			
2267640	APO-MEDROXY		F (no change)
30945	PROVERA®	0.9500	P (no change)
METHYLPHENIDATE HCL TAB 20 MG SR			
2266687	APO-METHYLPHEN SR		F (no change)
632775	RITALIN® SR	0.4389	P (no change)
MIDODRINE HCL TAB 5 MG			
2278685	APO-MIDODRINE		F (no change)
1934406	AMATINE®	0.5843	P (no change)
MISOPROSTOL TAB 100 MCG			
2244022	APO-MISOPROSTOL		P
2240754	NOVO-MISOPROSTOL	0.1779	F
MISOPROSTOL TAB 200 MCG			
2244023	APO-MISOPROSTOL		P
2244125	PMS-MISOPROSTOL	0.2962	F
NAPROXEN SR TAB 750 MG			
2177072	APO-NAPROXEN SR	0.7892	P
2231327	NOVO-NAPROX SR		p**
2162466	NAPROSYN SR	0.7892	P (no change)

F – Fully covered P – Partially covered P** – Drug is a full benefit if RDP Special Authority is in place when the prescription is filled.

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LCA/RDP BOOKLET CHANGES, CONTINUED

Category		New LCA Price	New LCA Status
OXYCODONE HCL TAB 5 MG			
789739	SUPEUDOL®		F (no change)
2231934	OXY IR®	0.1843	P (no change)
OXYCODONE HCL TAB 10 MG			
443948	SUPEUDOL®		F (no change)
2240131	OXY IR®	0.2864	P (no change)
OXYCODONE HCL TAB 20 MG			
2262983	SUPEUDOL®		F (no change)
2240132	OXY IR®	0.4523	P (no change)

F – Fully covered P – Partially covered P** – Drug is a full benefit if RDP Special Authority is in place when the prescription is filled.

New Drugs Categorized to LCA and/or RDP

The following newly-approved benefits have been added to existing LCA/RDP categories as eligible benefits for Fair PharmaCare and Plans B, C, F, and, if applicable, Plan G. (For the Plan G formulary, please visit the [Special Authority Information](http://www.health.gov.bc.ca/pharmacare) page on the PharmaCare website at www.health.gov.bc.ca/pharmacare.)

DIN	DRUG NAME	RDP	LCA STATUS	SPECIAL AUTHORITY ONLY
2321149	GEN-NIFEDIPINE XL 60 mg tablet	Yes	P**	No

P** – Drug is a full benefit if RDP Special Authority is in place when the prescription is filled.

BENEFITS

The following new products are now eligible PharmaCare benefits for Fair PharmaCare and Plans B, C, F and, if indicated below, Plan G and/or Plan P. Products are eligible for partial coverage subject to maximum allowable cost which is currently set at \$2.6177/mL.

DIN	DRUG NAME	PLAN G	PLAN P
2279460	APIDRA® (INSULIN GLULISINE) 100 IU/mL vial	No	Yes
2294346	APIDRA® (INSULIN GLULISINE) 100 IU/mL pen	No	Yes

LIMITED COVERAGE PROGRAM

The following products are eligible benefits under the Limited Coverage Program—by Special Authority only—for Fair PharmaCare and Plans B, C, F and, if indicated below, Plan G and/or Plan P.

For the Special Authority criteria, please visit the [Special Authority Information](http://www.health.gov.bc.ca/pharmacare) page on the PharmaCare website at www.health.gov.bc.ca/pharmacare.)

DIN	DRUG NAME	PLAN G	PLAN P
2305933	STALEVO® (LEVODOPA – CARBIDOPA – ENTACAPONE) 50 mg/ 12.5 mg/ 200 mg tablet – same coverage criteria as entacapone	No	No
2305941	STALEVO® (LEVODOPA – CARBIDOPA – ENTACAPONE) 100 mg/ 25 mg/ 200 mg tablet – same coverage criteria as entacapone	No	No
2305968	STALEVO® (LEVODOPA – CARBIDOPA – ENTACAPONE) 150 mg/ 37.5 mg/ 200 mg tablet – same coverage criteria as entacapone	No	No
2298465	RISPERDAL® CONSTA® (RISPERIDONE) 12.5 mg powder for injection	Yes	No

NON-BENEFITS

The following products have been reviewed and will not be added as benefits under PharmaCare.

DRUG NAME
AC GIRLZ® AEROCHAMBER
AC BOYS® AEROCHAMBER