EXPANSION OF HPV VACCINE ONE-TIME PROGRAM

The Human Papillomavirus (Cervarix®) Vaccine One-Time Program has been expanded to include women who are 26 years of age or younger when they receive the first dose in the series and who were born before 1994 (previously the program covered women born in 1991, 1992, and 1993). This program will continue until the current publicly funded supply is depleted or has expired. The expiry date for most of the inventory is August 2015.

Note: Women born in 1994 or later are still eligible for the Gardasil® vaccine program.

For up-to-date information on the status of this program and vaccine supply, please visit the Immunize BC website HPV page.

For resource information on these and other vaccines, visit the PharmaCare Vaccine Resources web section for pharmacists.

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.
CERTAIN SANDOZ INJECTABLE PRODUCTS ON ALLOCATION

The Ministry of Health has been informed that there may be upcoming supply disruptions with selected Sandoz injectable products, due to continuing remediation efforts at the Boucherville manufacturing facility. While some production is being maintained, Sandoz has advised that selected products are—or will be—going on back-order in the next 90 days. Sandoz has therefore reinstated a stock protection system for a number of their injectable products (also known as being “on allocation”).

Community and hospital pharmacies should have access to Sandoz injectable “on allocation” products through their usual suppliers. Both pharmacies and private clinics should place orders through their usual supplier and follow the detailed instructions for ordering as they may differ from usual processes (e.g., for pharmacies ordering through McKesson, please check PharmaClik).

Allocations to the community supply chain are based on historical use over the last calendar year. If you have concerns regarding your allocated amount of specific Sandoz products, please first contact your local Sandoz representative to determine the best course of action. Pharmacists may also want to contact the Sandoz Canada head office: Toll-Free: 1-800-361-3062 | Email: injectable.allocation@sandoz.com.

If you have a supply issue that cannot be resolved by your Sandoz representative (or the Sandoz head office), you can contact the PharmaNet HelpDesk. The Help Desk will take the details of your issue and the Ministry will assist wherever possible. For PharmaCare updates on the supply issue, visit www.health.gov.bc.ca/pharmacare/supplyissues.html.

PHARMACARE COVERAGE OF OSELTAMIVIR (TAMIFLU®) AND ZANAMIVIR (RELENZA®) FOR THE 2013/14 INFLUENZA SEASON

Effective September 1, 2013, PharmaCare will cover oseltamivir (Tamiflu®) and zanamivir (Relenza®) for the 2013/14 influenza season according to Limited Coverage criteria specified on the PharmaCare website:


Please note that coverage for the 2013/14 season has been expanded to include a broader age range, specifically healthy children from 6 to 59 months.

Actual coverage of these antivirals depends on the patient’s PharmaCare plan, including any annual deductible requirement.

Adverse Reaction Reporting

Please report suspected adverse reactions involving an antiviral medication to the Canada Vigilance Program:

- **Telephone**—Call a Canada Vigilance Regional Office at 1-866-234-2345 (toll-free).
- **Fax**—Download the Canada Vigilance Adverse Reaction Reporting Form. Complete the form and fax it to 1-866-678-6789.
- **Mail**—Download the Canada Vigilance Adverse Reaction Reporting Form and the postage paid label. Complete the form and mail it to a Canada Vigilance Regional Office, using the postage paid label.
- **Online**—Complete a report online.
OUR APPRECIATION…

We would like to extend our thanks to all those affected by the July 6/7 PharmaNet service interruption. The technical upgrade was completed ahead of schedule and, during the outage, no problems were reported with service to patients. We recognize that the continuity of care was due, in no small part, to the preparations pharmacies and medical clinics made to ensure patients would not be affected.

PharmaCare has now adjudicated all batched claims submitted after the service interruption—including those for emergency 3-day supplies. Payment information for these claims should have appeared on your remittance advice statement for the scheduled payment date of August 12, 2013.

For more information on how these claims were adjudicated, please see page 6 of PharmaCare Bulletin 13-001.

MONTHLY DEDUCTIBLE PAYMENT OPTION

Do you have patients who are worried about paying for their prescriptions before meeting their deductible?

The Monthly Deductible Payment Option (MDPO) can ease the financial burden early in the year. Families who enrol in the MDPO pay their Fair PharmaCare deductible in monthly instalments and receive assistance with their eligible prescription costs right away.

The option is designed to assist individuals or families who:
• are registered for Fair PharmaCare,
• do not have private health insurance with a drug benefit plan,
• have a deductible greater than $0, and
• expect their annual prescription costs to meet or exceed their Fair PharmaCare deductible.

Patients can enrol in the Monthly Deductible Payment Option for the current year only until the last business day of September.

PharmaCare will soon be accepting enrolments for the MDPO for 2014. Enrolling at, or before, the start of the calendar year offers eligible individuals and families the smallest monthly payment.

In the fall, letters will be sent to those who enrolled for 2013 advising them that enrolment for 2014 is not automatic. If they wish to re-enrol, they must respond as directed in the letter.

For more information, patients can visit www.health.gov.bc.ca/pharmacare or contact Health Insurance BC.

RESIDENTIAL CARE FACILITIES—PROCEDURES FOR PHARMACIES

Many pharmacies provide services for patients living in residential care facilities who are covered under PharmaCare Plan B. PharmaCare has recently updated the information and procedural requirements related to residential care facilities.

Policy and procedures information regarding residential care facilities can now be found in the PharmaCare Policy Manual, Section 7.3. The applicable section is shown in red.
**BENEFITS**

**Somatropin—Important Dispensing Information**

PharmaCare covers somatropin, used in the treatment of true growth hormone deficiency or chronic renal insufficiency, for children 20 years of age and under, when prescribed by an endocrinologist at the British Columbia Children's Hospital. Prescriptions for these patients have been dispensed only by the BC Children’s Hospital.

**Effective immediately**, patients who live outside the Vancouver area will be able to pick up their somatropin prescriptions from their community pharmacy if their endocrinologist at the British Columbia Children’s Hospital submits a Special Authority request on their behalf.

This change has been put in place to address the long-distance refrigeration challenges that exist when shipping temperature-sensitive drug products, such as somatropin, to rural areas of the province.

Somatropin prescriptions for patients who live in the Vancouver area* will continue to be dispensed from the British Columbia Children's Hospital.

**Please note:** PharmaCare does not cover somatropin when it is prescribed for the treatment of adults or for the treatment of children with Turner's Syndrome, Prader-Willi Syndrome, or Noonan's Syndrome.

*The Vancouver area includes the following municipalities:

<table>
<thead>
<tr>
<th>Burnaby</th>
<th>Langley</th>
<th>Port Coquitlam</th>
<th>Surrey</th>
<th>White Rock</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coquitlam</td>
<td>New Westminster</td>
<td>Port Moody</td>
<td>Vancouver</td>
<td></td>
</tr>
<tr>
<td>Delta</td>
<td>North Vancouver</td>
<td>Richmond</td>
<td>West Vancouver</td>
<td></td>
</tr>
</tbody>
</table>

**New DINs for Humalog/Humulin Kwik Pens**

**Effective July 26, 2013**, Health Canada assigned new DINs for Kwipens. To avoid possible confusion, Humalog KwikPen, Humalog Mix 25 KwikPen, Humalog Mix 50 KwikPen and Humulin N KwikPen have been added to PharmaNet. Please note that DINs for Humalog and Humulin cartridges will remain the same. PharmaCare coverage of the new DINs will be the same as for corresponding insulin cartridges.

<table>
<thead>
<tr>
<th>New DIN</th>
<th>KwikPen</th>
<th>Corresponding Cartridge</th>
<th>Size</th>
<th>Old DIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>02403412</td>
<td>Humalog KwikPen (insulin lispro)</td>
<td>Humalog Cartridge</td>
<td>5 x 3 mL</td>
<td>02229705</td>
</tr>
<tr>
<td>02403420</td>
<td>Humalog Mix 25 KwikPen (insulin lispro—insulin lispro protamine)</td>
<td>Humalog Mix 25 Cartridge</td>
<td>5 x 3 mL</td>
<td>02240294</td>
</tr>
<tr>
<td>02403439</td>
<td>Humalog Mix 50 KwikPen (insulin lispro—insulin lispro protamine)</td>
<td>Humalog Mix 50 Cartridge</td>
<td>5 x 3 mL</td>
<td>02240297</td>
</tr>
<tr>
<td>02403447</td>
<td>Humulin N KwikPen (insulin isophane)</td>
<td>Humulin N Cartridge</td>
<td>5 x 3 mL</td>
<td>01959239</td>
</tr>
</tbody>
</table>

**Limited Coverage Drug Program Benefits**

**Effective May 30, 2013**, the following product became an eligible benefit under the Limited Coverage Program—by Special Authority only—for Fair PharmaCare and Plans B, C, and F. 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.

<table>
<thead>
<tr>
<th>DIN</th>
<th>DRUG NAME</th>
<th>PLAN G</th>
<th>PLAN P</th>
</tr>
</thead>
<tbody>
<tr>
<td>02376938</td>
<td>indacaterol (Onbrez® Breezehaler®) 75 mcg inhalation powder</td>
<td>N</td>
<td>N</td>
</tr>
</tbody>
</table>