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PRICE CHANGE PROCESS FOR BRAND NAME AND SINGLE-SOURCE GENERIC DRUGS

After consulting with manufacturers, PharmaCare has improved its procedures for implementing price changes received from drug manufacturers for brand name and single-source generic drugs.

Price changes for multiple-source generics continue to be handled through the existing process.

As of January 1, 2014, manufacturers can submit price increases only once a year to ss.pricechanges@gov.bc.ca and must use PharmaCare’s Excel spreadsheet template.

Price decreases will continue to be accepted throughout the year and will be effective in PharmaNet 30 days after the manufacturer’s price decrease. This will allow pharmacies time to clear the stock purchased at higher prices.

Price decreases must be also submitted to ss.pricechanges@gov.bc.ca using PharmaCare’s Excel spreadsheet template.

For more information, visit the PharmaCare web section for Health Industry Professionals.

INTRODUCTION OF METHADOSE™

What is changing?

New Product Coverage

- Effective February 1, 2014, PharmaCare will begin covering Methadose 10mg/ml\(^1\) for maintenance and for pain.
- Effective March 1, 2014, PharmaCare will cover only Methadose 10mg/ml for maintenance and for pain.

This change to the pre-mixed product will reduce the risks associated with manual compounding.

Coverage exceptions

- Methadone tablets will continue to be covered for patients covered under Plan P (Palliative Care).
- If a shortage of Methadose occurs, PharmaCare will cover compounded methadone of 10mg/ml. Pharmacists must follow the required procedures for reporting the shortage (as detailed on page 14 of the PharmaCare Policy Manual, Section 5.11) to PharmaCare before dispensing compounded methadone.
- PharmaCare will continue covering compounded methadone suppositories and topical preparations for pain on an exceptional case-by-case basis.

New Product Identification Numbers

- The Product Identification Numbers (PINs) for methadone for maintenance will also change. The new list of the PINs to be used starting February 1, 2014, will be published in late January 2014.

\(^1\) Methadose dye-free, sugar-free, unflavored 10 mg/ml solution, DIN 02394618, will not be covered as a regular benefit as the amount of sugar in the regular liquid is minimal and unlikely to affect blood sugar.
METHADOSE, CONTINUED

Methadose delivery

- Please also note that, as stated by the College of Pharmacists of BC Professional Practice Policy-71, delivery of methadone for maintenance is limited to patients who have restrictions in mobility for whom the prescribing physician has provided written authorization on the prescription by signing the declaration.
- Neither the pharmacy manager nor the staff pharmacist may authorize home delivery for methadone in the absence of the prescriber’s authorization on the prescription.

What is not changing?

- Eligible pharmacies will continue to receive a dispensing fee and interaction fee for witnessed ingestion.
- Methadose will be reimbursed at the manufacturer price plus 8% (which currently equals $0.162 per ml).
- Pharmacies will not need to sign a new Methadone Maintenance Payment Program Addendum. More information on this topic will be provided in the next edition of the PharmaCare Newsletter.

How will the change affect patients?

- Methadose at 10mg/ml is 10X the concentration of usual compounded methadone 1mg/ml solution. Careful management of the transition to Methadose is therefore necessary.
- The following actions have been taken to address patient and public safety:
  - The Ministry of Health and the College of Pharmacists of BC have informed health authorities of the change.
  - The College of Physicians and Surgeons has informed physicians of the change.

How will the changes to the policy be communicated?

- PharmaCare will mail pharmacies information sheets for their patients early in January 2014 to help pharmacists inform patients about the new product.
- PharmaCare Policy Manual, Section 8.8, will be updated and posted to the PharmaCare website on February 1, 2014.

Reminders

Reminder re: Batch Claims

- As stated in the PharmaNet Compliance Standards, it is acceptable to submit batch claims only if you are submitting claims for:
  - residential care facility patients
  - prescriptions filled during a network outage (within 24 hours of reconnecting to the network)

Reversals

- Normally, medications not picked up by the patient must be reversed and returned to stock within 30 days of the dispensing date. However, as required by the CPBC, if a Methadose prescription is not picked up, it must be reversed in PharmaNet on the same day.
BC CLINICAL SERVICES 2012/13

The following charts show the number of BC clinical services claimed by pharmacists in 2012/13.
**BENEFITS**

**Special Authority Coverage of apixaban (Eliquis®) for prophylaxis of venous thromboembolism (VTE)**

*Effective December 10, 2013,* apixaban (Eliquis®) for prophylaxis of VTE will be available as a Limited Coverage benefit through PharmaCare’s Special Authority (SA) program.

Detailed criteria and a link to the collaborative prescribing agreement are available on the PharmaCare website at [www.health.gov.bc.ca/pharmacare/sa/criteria/restricted/apixaban-vte.html](http://www.health.gov.bc.ca/pharmacare/sa/criteria/restricted/apixaban-vte.html).

Coverage for this drug is subject to the rules of a patient's PharmaCare plan, including any annual deductible requirement. Retroactive coverage cannot be provided for prescriptions filled before SA approval is in place.

**Limited Coverage Drug Program Benefits**

The Special Authority criteria for the following products have been modified. For the revised Special Authority criteria, please visit the Special Authority Information page on the PharmaCare website at [www.health.gov.bc.ca/pharmacare/sa/saindex.html](http://www.health.gov.bc.ca/pharmacare/sa/saindex.html).

<table>
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<th>DIN</th>
<th>DRUG NAME</th>
<th>PLAN G</th>
<th>PLAN P</th>
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<tbody>
<tr>
<td>02377233</td>
<td>apixaban (Eliquis®) 2.5 mg tablet</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td>02397714</td>
<td>apixaban (Eliquis®) 5 mg tablet</td>
<td>N</td>
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The Special Authority criteria for the following products have been expanded to include patients co-infected with HIV/HCV. For the revised Special Authority criteria, please visit:


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<tbody>
<tr>
<td>02370816</td>
<td>boceprevir (Victrelis™) 200 mg capsule</td>
</tr>
<tr>
<td>02371553</td>
<td>telaprevir (Incivek®) 375 mg tablet</td>
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**Non-Benefits**

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

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<tr>
<td>02396971</td>
<td>isotretinoin (Epuris™) 10 mg capsule</td>
</tr>
<tr>
<td>02396998</td>
<td>isotretinoin (Epuris™) 20 mg capsule</td>
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<tr>
<td>02397005</td>
<td>isotretinoin (Epuris™) 30 mg capsule</td>
</tr>
<tr>
<td>02397013</td>
<td>isotretinoin (Epuris™) 40 mg capsule</td>
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