



BC PharmaCare Newsletter

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The use of PharmaNet is not intended as a substitute for professional judgement.
 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 for any given patient.
 Health care professionals should confirm information obtained from PharmaNet, and ensure no additional relevant information exists,
 before making patient care decisions.

NEW PHARMACARE ENROLLMENT REQUIREMENTS

What is happening?

Important changes to the B.C. PharmaCare enrollment process are occurring. As a result of these changes, all pharmacies, facilities, and other places where drugs, devices, substances or related services are provided will need to re-apply for enrollment in the PharmaCare program if they wish to submit claims to PharmaCare.

We look forward to continuing our relationship with pharmacies and medical device suppliers throughout the province under the new enrollment process.

Why must sites re-apply to enroll?

In 2012, the Province enacted the *Pharmaceutical Services Act* (“the Act”) (www.bclaws.ca/civix/document/id/complete/statreg/12022_01). Among other things, the Act provides the Province with an opportunity to more clearly define the relationship between the PharmaCare program and those entities that provide associated benefits to British Columbians. The Provider Regulation (“the Regulation”) (www.health.gov.bc.ca/pharmacare/pdf/prov-reg.pdf) came into force on December 1, 2014. The Regulation sets out new enrollment criteria for pharmacies, facilities, and other places where drugs, devices, substances or related services are provided (“sites”). It also sets out the commercial terms for the Province of British Columbia’s relationship with enrolled providers.

Current PharmaCare Enrollment Agreements (PEAs) with the Province will expire on May 31, 2015. Sites that wish to continue submitting claims to the PharmaCare program after May 31, 2015, must be approved for enrollment.

To ensure your application for enrollment is processed by May 31, 2015, **please submit by March 1, 2015.**

How do I enroll?

To enroll, you must submit a PharmaCare Provider Enrollment form, relevant Schedules, and supporting documentation demonstrating that you meet the criteria prescribed in the Provider Regulation. The application will be reviewed, and must be approved, by the BC Ministry of Health in order for your site to submit claims to PharmaCare.

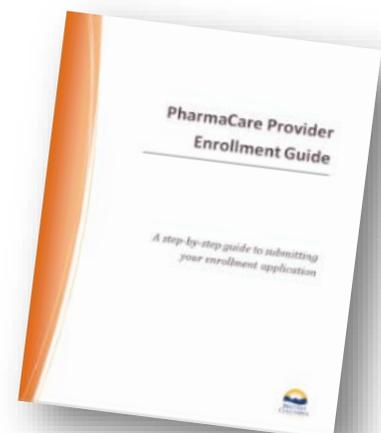
New enrollment packages will be mailed to all those currently enrolled under the PEA. You will need to complete the form(s) and provide any applicable additional documentation.

If you do not receive your enrollment package by mid-December, please contact Information Support at Health Insurance BC to ensure your address information is up to date.

The enrollment package

The package consists of:

- Cover letter providing specific information for each type of provider (e.g., pharmacy, device provider)
- PharmaCare Provider Enrollment Guide
- PharmaCare Provider Enrollment form (HLTH 5432) and related schedules



NEW PHARMACARE ENROLLMENT REQUIREMENTS, CONTINUED

The Enrollment Guide and forms are also available online. The online versions contain useful hyperlinks to relevant legislation.

FORM	LOCATION
PharmaCare Enrollment Guide	http://www.health.gov.bc.ca/pharmacare/pdf/enrollguide.pdf
PharmaCare Provider Enrollment form (HLTH 5432)	https://www.health.gov.bc.ca/exforms/pharmacare/5432fil.pdf
Schedule A—Owner Details (HLTH 5432A)	https://www.health.gov.bc.ca/exforms/pharmacare/5432Afil.pdf
Schedule B—Additional Sites (HLTH 5432B)	https://www.health.gov.bc.ca/exforms/pharmacare/5432Bfil.pdf
Schedule C—Additional Information (HLTH 5432C)	https://www.health.gov.bc.ca/exforms/pharmacare/5432Cfil.pdf

What are the key changes under the Regulation?

The Regulation results in significant changes to the relationship between providers and the Province, such as:

- **Establishment of classes and sub-classes of providers:** Your site must be enrolled in a specific class/sub-class for each type of benefits and services your site provides, such as Methadone Maintenance and Plan B.

Note: The Methadone Maintenance and Residential Care addenda to the PEA will no longer be used.

- **Increased record retention period:** Your site must now keep relevant records for **four years** instead of three.
- **Additional information required with enrollment application:** The Regulation requires that specific documentation and information that establishes an applicant's eligibility for enrollment (e.g., details of outstanding audit amounts and prior cancellations of billing privileges) be included with each application. The Enrollment Guide itemizes the documentation you need to include.

New enrollments

New sites are required to apply using the new forms and process. Please note that new sites must:

- ensure their enrollment application is submitted well in advance of their opening date to allow time for processing.
- apply to the College of Pharmacists of BC for their licence as early as possible so that their licence must be included with their enrollment application.

NEW PHARMACARE QUANTITY LIMITS FOR BLOOD GLUCOSE TEST STRIPS

Effective January 1, 2015

Did you know clinical evidence demonstrates that most people with type 2 diabetes who do not use insulin do not need to test their blood glucose as often as they do?

Reducing the frequency of self-monitoring of blood glucose (SMBG) can have positive effects on patients and on the health system. Reduced SMBG can result in:

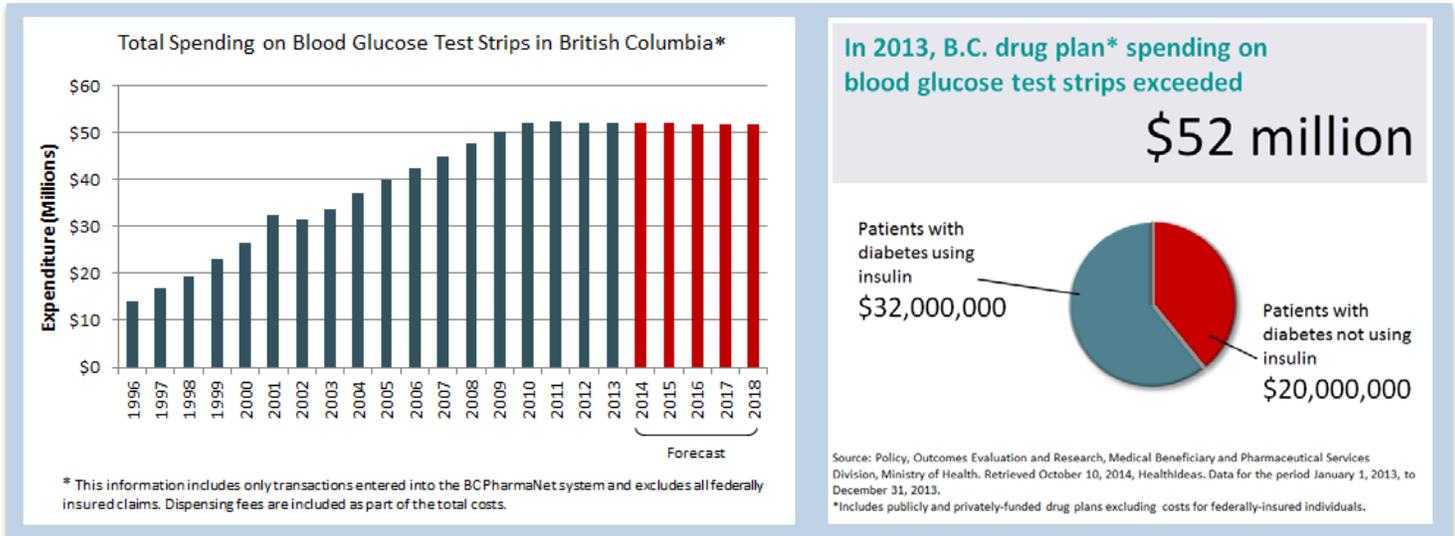
- Decreased lifestyle disruption for patients
- Greater focus on overall diabetes management, rather than monitoring
- Significant savings for the health system



PHARMACARE QUANTITY LIMITS FOR BGTS...CONTINUED

Understanding the cost to the health care system

As the graphs below illustrate, **total spending on blood glucose test strips in B.C. consistently exceeds \$52 million a year.** \$20 million of that cost is for patients not on insulin.



New BC PharmaCare quantity limits

As a result of this evidence, on **January 1, 2015**, PharmaCare is introducing annual quantity limits of blood glucose test strips. A patient’s annual limit will be based on the diabetes treatment they are receiving.

The annual limits provide enough strips to account for normal variations in self-monitoring of blood glucose (SMBG) necessitated by common health changes (e.g., colds, influenza).

TREATMENT CATEGORY	NOTES	ANNUAL QUANTITY LIMIT
Managing diabetes with insulin	If a patient takes insulin, this higher limit applies whether or not they are also taking other diabetes medications.	3,000
Managing diabetes with anti-diabetes medications with a high risk of causing hypoglycemia	Drugs with a higher risk of hypoglycemia include insulin secretagogues (e.g., sulfonylureas such as glyburide and meglitinides such as repaglinide)	400
Managing diabetes with anti-diabetes medications with a low risk of causing hypoglycaemia	Drugs with a lower risk of hypoglycemia include alpha-glucosidase inhibitors such as acarbose; biguanides such as metformin; dipeptidyl peptidase-4 inhibitors (DPP4I) such as linagliptin; incretin mimetics/glucagon-like peptide (GLP-1) agonists such as liraglutide; sodium-glucose cotransporter 2 (SGLT2) inhibitors such as canagliflozin; and thiazolidinediones (TZDs) such as pioglitazone.	200
Managing diabetes through diet/lifestyle	—	200

Important: If a patient is in more than one of the categories above, the higher limit always applies.

How will a patient know which category they are in?

PharmaNet will identify the type of treatment a patient is receiving for their diabetes and assign the correct limit. **For this reason, patients must have insulin entered in PharmaNet so they are assigned the correct annual limit.**

Patients can contact Health Insurance BC to obtain their limit status.

PHARMACARE QUANTITY LIMITS FOR BGTS...CONTINUED

What if more frequent testing is warranted?

BC PharmaCare will cover 100 extra strips per year on receipt of a Special Authority Request from a prescriber or from a health professional at a ministry-recognized Diabetes Education Centre if a patient meets one of the criteria below **and is not on insulin**.

Patient has:

- not met glycemic targets, as determined by a physician, for three months or more;
- an acute illness or co-morbidities that may impact blood glucose control;
- had changes in drug therapy that may impact blood glucose control (e.g., starting or stopping medications that induce hypo- or hyperglycemia, or drug-to-drug or drug-disease interactions);
- a job where hypoglycemia presents a significant safety risk (e.g., pilots, air traffic controllers, commercial drivers); or
- gestational diabetes.

Note: In the rare case that a patient has a medical need for even more frequent testing, or when a patient on insulin needs to test more frequently, an endocrinologist may submit a written request to PharmaCare for additional strips. Requests will be considered on a case-by-case basis. The letter should outline the need for the additional strips and the quantity required.

For patients who have been approved for additional strips, Special Authority coverage will be in place on PharmaNet.

Advising patients and entering claims

**Patient information sheets are being mailed to
pharmacies, physicians, and Diabetes Education Centres throughout BC**

Until these arrive, patients can get more information by visiting the PharmaCare Blood Glucose Test Strip Web page at www.health.gov.bc.ca/pharmacare/bgts.html or by viewing the patient information sheet at <http://www.health.gov.bc.ca/pharmacare/pdf/bgts.pdf>.

Before submitting the claim

- Pharmacists are asked to ensure that test strips dispensed have viable expiry dates for the duration needed.
- Be aware that PharmaNet can only assign the appropriate annual limit if an insulin-dependent patient's medication history includes claims for insulin.
- For a list of the BGTS currently covered, visit www.health.gov.bc.ca/pharmacare/pins/bgpins.html.

Submitting the claim

- **Limit is per strip**, regardless of package size. When submitting the claim, enter the number of individual strips.
- If a claim for BGTS exceeds the patient's annual limit for BGTS, PharmaNet will send the response code **LO - benefit maximum exceeded** and adjudicate the claim to the maximum number of strips remaining within the patient's annual limit.
- Pharmacies can bill patients for strips above their annual limit (for instance, for extra 'patient pays' strips or strips in boxes not in the standard 50 or 100 strip quantities).
- The [Full Payment Policy](#) does not apply to blood glucose test strips.

PHARMACARE QUANTITY LIMITS FOR BGTS...CONTINUED

The evidence for reducing the frequency of SMBG

Read the Canadian Agency for Technology and Health's Summary Report: Optimal Prescribing and Use of Blood Glucose Test Strips for Self-Monitoring of Blood Glucose

www.cadth.ca/en/products/optimal-use/self-monitoring/reports

Read the CDA Commentary on Self-Monitoring of Blood Glucose for Healthcare Providers

http://guidelines.diabetes.ca/CDACPG_resources/CJD--Sept_2011--SMBG.pdf

PRESCRIPTION RENEWALS FOR RESIDENTIAL CARE PATIENTS



As you may be aware, earlier this year, the BC Pharmacy Association (BCPhA), the Ministry of Health Audit Team, and the Medical Beneficiary and Pharmaceutical Services Division

discussed the challenges pharmacist face in obtaining timely prescription renewals for patients in residential care. The discussions focused on improving clarity of the responsibilities of providers.

Delays in prescription authorizations can reduce the quality of care that a residential care patient receives and challenge a pharmacist's ability to comply with applicable legislation and PharmaCare requirements, and this has resulted in PharmaCare audit recoveries.

In consultation with the BCPhA, a standard renewal notification process was developed, as described below.

It is hoped that, by standardizing the renewal notification period and emergency prescription refill period, all members of the health care team will be able to do their part to provide patients in residential care with the highest quality of care possible. For pharmacists, that means taking the appropriate level of responsibility within their scope of practice and ensuring they meet the legal requirements, including documentation.

The renewal notification process proposed gives physicians and pharmacists 44 days (30 days' notice prior to expiration of the original prescription + 14 days emergency prescription refill) to work within PharmaCare payment policies and College of Pharmacists of BC practice guidelines to obtain a prescriber's renewal authorization.

Standard Renewal Notification Process— Residential Care Patients

It is recommended that pharmacies serving residential care patients employ the following protocol.

- Pharmacists should not dispense medications beyond the expiry date of a patient's prescription.

Doing so is neither appropriate nor legal. Therefore, regardless of the motivation a pharmacist may have for doing this, it is not acceptable.

- Pharmacists should give prescribers **30 days' advance notice** that a residential care patient's prescription is set to expire.
- If renewal authorization is not received before the prescription expires the pharmacist can use the emergency prescription refill provisions (if they complete the documentation required by the College of Pharmacists of BC to support that action) and dispense a **14-day supply of the medications**.
- If the prescriber has not authorized renewal at the end of the 14-day emergency prescription refill period, the pharmacist should no longer dispense the medication to the patient.

Note: There is no legal basis to continue dispensing a medication if a prescription has expired. PharmaCare cannot reimburse pharmacies for medications or dispensing fees until a valid prescription is in place.

REMINDER TO DRUG MANUFACTURERS—PRICE CHANGE DEADLINE

Submitting price increases

A reminder that, manufacturers can submit price increases only once a year to ss.pricechanges@gov.bc.ca and must use [PharmaCare's Excel price change spreadsheet template](#).

- The annual deadline for submissions is **January 31, 2015**.
- Price changes come into effect **April 1** of the same year.
- Requests for price increases received on or after **February 1** are effective **April 1** the following year.
- Manufacturers receive an e-mail confirming that their request for a price increase has been received.
- Prices of new products that PharmaCare has reviewed and added as benefits are effective on the same date that the drug listing becomes effective.

Submitting price decreases

Similar to price increases, manufacturers can submit price decreases to ss.pricechanges@gov.bc.ca and must use the [PharmaCare's Excel spreadsheet template](#). However, price decreases can be sent throughout the year.

Price decreases will be effective in PharmaNet 30 days after manufacturer's price decrease. This will allow pharmacies time to clear the stock purchased at higher prices.

This process for price increases and decreases does not apply to price changes for generic drugs that are part of the Low Cost Alternative (LCA) Program.

EBOLA INFORMATION FOR HEALTH CARE PROVIDERS



The Provincial Health Officer recently issued guidance for primary care health professionals who may see patients who have been exposed to, or have concerns about, Ebola. As patients may also express concerns to pharmacists, we are sharing the information that was issued.

Please visit www.health.gov.bc.ca/pho/pdf/guidance-document-for-clinical-staff-in-primary-care.pdf for information on how Ebola is transmitted, incubation periods, symptoms, as well as diagnosis and reporting protocols.

NEW MSP COMPUTER SYSTEM EFFECTIVE DECEMBER 10, 2014

The Ministry of Health is replacing the Medical Services Plan (MSP) computer system December 6–9, 2014. The legacy Registration and Premium Billing (R&PB) system will be replaced by the new Registration and Premium Information Determination (RAPID) system, **effective December 10, 2014**.

The MSP system is a critical piece of the Health IT infrastructure because it:

- holds MSP and Premium Assistance enrolment information for all British Columbians; and
- provides eligibility information to PharmaCare, MSP Medical Claims, medical practitioners, and many others.

Please note that the deployment period December 6–9 will **NOT** impact:

- MSP eligibility requests;
- MSP Medical Claims processing; or
- PharmaCare.

The replacement of the R&PB system is a large and complex project, and is part of the Ministry of Health's overall plan to improve the Health IT infrastructure.

CLINICAL SERVICES FEES 2013/14

The following charts show the number of BC clinical services claimed by pharmacists in fiscal year 2013/14.

