



# BC PharmaCare Newsletter

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## PATIENT CARE DURING WILDFIRES

BC is facing one of the worst wildfire seasons in more than a decade. As a result, the Province of British Columbia [declared a provincial state of emergency](#) on July 7, 2017.

Wildfires in the Northern Health Authority are creating challenges for patients and pharmacies. For instance, evacuees may have left home without their medications, may need medication when they do not have a prescription, and may not have access to a doctor.

Please see [Patient Care During Wildfires](#) on the PharmaCare website for detailed instructions on submitting claims for patients affected by wildfires.

## PHARMANET—REVISED PROCESS FOR PHARMANET PATIENT PROFILE REQUESTS

Effective **August 1, 2017**, the Ministry of Health will assume responsibility for printed PharmaNet profiles. The College of Pharmacists of BC will no longer distribute printed profiles.

If a client requests a copy of their own PharmaNet profile, continue to use the request function in your PharmaNet software as usual. The ministry will complete the request and send the printed profile directly to the patient.

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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.

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Non-pharmacy professionals (e.g. lawyers, physicians, WCB representatives) can request a PharmaNet profile using the [Consent for Release of PharmaNet Patient Record \(HLTH 5551\)](#) form.

Please direct completed forms or questions about this change to:

#### PharmaNet Profiles Services Team

Email: [PharmaNetProfiles@gov.bc.ca](mailto:PharmaNetProfiles@gov.bc.ca)

Toll-free: 1-855-952-1432

Fax: 1-250-953-0432

*Note: Contact information is for PharmaNet profile queries ONLY.  
For general PharmaNet inquiries, please contact HIBC.*

## PHARMANET—SYSTEM UPGRADE

Starting August 1, 2017, the Ministry of Health will begin upgrading PharmaNet infrastructure. This upgrade will replace certain hardware and software components to ensure that PharmaNet continues to be secure and supportable. Final deployment of the upgraded infrastructure is expected in early 2018.

### Will I see any changes?

No. There will be no changes for PharmaNet users. In fact, there will be a “change freeze” for the duration of the upgrade project, as all current PharmaNet functionality must remain stable until the upgrade is completed.

### Will there be outages?

Work related to the project will occur during the regularly scheduled change windows over the next several months. Should an extended, or additional, change window outage be needed for the final deployment in early 2018, details will be provided in a future edition of the PharmaCare Newsletter.

## REMINDER: CHECKING FOR A SPECIAL AUTHORITY



You can use the automated PharmaCare Information Line (or speak to a PharmaNet Help Desk representative) to find out if a patient’s drug has PharmaCare Special Authority (SA) approval.

To access the PharmaCare Information Line self-service options, when you call the PharmaNet Help Desk, select “1”.

To obtain coverage information, you will need:

- your College of Pharmacists ID number
- the patient’s PHN
- the DIN or PIN

The automatic system will let you know if an SA is in place, and, if yes, when it expires.

**Important:** If SA approval is not in place, before directing the patient to their prescriber, please check the PharmaCare SA coverage criteria for the drug. Just visit the [SA home page](#) and click on the drug name to access the criteria page for the drug. If the patient appears to meet the criteria, you can then direct the patient to speak to their prescriber about PharmaCare SA approval.

## REMINDER: SLOW-RELEASE ORAL MORPHINE

Prescriptions for Kadian® (slow-release oral morphine) for opioid agonist treatment must include the notation “for OAT” or “for opioid agonist treatment”. This notation is required in addition to dispensing instructions, such as daily dispensing and witnessed ingestion.

The claim entered in PharmaNet must match the prescription written by the prescriber. If you inadvertently enter a claim for Kadian using the DIN when the prescription is marked “for OAT”, reverse the claim using the procedure in the PharmaCare Policy Manual, [Section 3.16](#). After reversing the claim, re-enter it using the [appropriate PIN](#).

For more information on dispensing Kadian, see the BC Centre on Substance Use guest post, “[Slow-Release Oral Morphine \(Kadian®\) for Opioid Agonist Treatment: New Provincial Recommendation and Practical Guidance](#)” on the College of Pharmacists of BC website.

## BENEFITS

### Limited Coverage Drugs

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

For information on all Special Authority drugs, visit our [Special Authority](#) page.

For criteria and forms for a **specific** drug, click on the **drug name** below.

<b>COVERAGE EFFECTIVE</b>	June 20, 2017		
<b>DRUG NAME</b>	Humira® ( <a href="#">adalimumab</a> )		
<b>INDICATION</b>	ulcerative colitis (UC)		
<b>DIN</b>	02258595	<b>STRENGTH/FORM</b>	40 mg/0.8 mL
<b>PLAN G BENEFIT?</b>	No		
<b>PLAN P BENEFIT?</b>	No		

### Coverage of Brenzys™ Etanercept

Effective **July 18, 2017**, PharmaCare covers the Brenzys™ brand of [etanercept](#) as a Limited Coverage Drug through the [Special Authority](#) (SA) program for new patients (i.e., patients not granted SA for etanercept prior to July 18, 2017) who require treatment of Rheumatoid Arthritis and Ankylosing Spondylitis.

Effective **July 18, 2017**, PharmaCare covers only the Brenzys brand for new SA requests for etanercept for the treatment of Rheumatoid Arthritis and Ankylosing Spondylitis.

Please note that PharmaCare will continue to cover patients already approved for the Enbrel® brand of etanercept. Additionally, based on the clinical information currently available, PharmaCare will continue to cover Enbrel for pediatric patients who have been diagnosed with rheumatoid arthritis and are under the care of a pediatric rheumatologist.

Brenzys is a “biosimilar” version of etanercept based on Enbrel. On August 31, 2016, Health Canada approved Brenzys for use in the treatment of Rheumatoid Arthritis and Ankylosing Spondylitis.

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The British Columbia Drug Benefit Council recommended that:

- PharmaCare cover Brenzys for these indications when etanercept is considered the most appropriate treatment option.
- If a patient is currently being treated with Enbrel, they should consider switching to Brenzys after discussing it with their physician.

The Merck Harmony™ Patient Support Program (PSP) provides support services, including self-injection training, to patients taking Brenzys. To enrol in the program, both the prescriber and patient must sign a completed Merck Harmony PSP Enrollment Form. To find out more about the Merck Harmony PSP:

Phone: 1 866 556-5663 (Monday to Friday 8 am to 8 pm EST)

Fax: 1 866 240-4076

E-mail: [info@merckharmony.ca](mailto:info@merckharmony.ca)

<b>COVERAGE EFFECTIVE</b>	July 18, 2017		
<b>DRUG NAME</b>	Brenzys® ( <a href="#">etanercept</a> )		
<b>INDICATION</b>	rheumatoid arthritis and ankylosing spondylitis		
<b>DIN</b>	02455323	<b>STRENGTH/FORM</b>	50 mg/mL (pre-filled syringe)
<b>DIN</b>	02455331	<b>STRENGTH/FORM</b>	50 mg/mL (pre-filled auto-injector)
<b>PLAN G BENEFIT?</b>	No		
<b>PLAN P BENEFIT?</b>	No		

### Criteria change—ciprofloxacin-dexamethasone

The Special Authority (SA) criteria for ciprofloxacin-dexamethasone (Ciprodex®) has changed. The requirement for the patient to have experienced “failure or intolerance to an aminoglycoside antibiotic” has been removed. See the [updated SA criteria page](#) for the full criteria.

### High-Cost Drugs

The following products will be added to the list of designated high-cost drugs. For details on the High-Cost Drug policy, see [Section 5.8](#) of the PharmaCare Policy Manual. The [complete list of high-cost drugs](#) is available online.

DIN	DRUG NAME	Effective Date
02292165	levodopa-carbidopa intestinal gel (Duodopa®) 20 mg/mL – 5 mg/mL	August 24, 2017
02436841	vedolizumab (Entyvio®) 300 mg vial	August 24, 2017

### Regular 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.

DIN	DRUG NAME	PLAN G	PLAN P
02444038	mifepristone and misoprostol (Mifegymiso®) 200 mg / 200 µg	No	No

## Ostomy Benefits

Coloplast Brava® elastic barrier strips have been added as a benefit under Fair PharmaCare and Plans B, C, and F.

PIN	PRODUCT	Effective Date
88123642	Coloplast Brava® elastic barrier strips	June 19, 2017

## Non-Benefits

The following drug has been reviewed and will not be added as a benefit under PharmaCare.

DIN	DRUG NAME
02455889	budesonide (Cortiment®) 9 mg oral tablet