



# BC PharmaCare Newsletter



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## FIRST NATIONS HEALTH BENEFITS (PLAN W) UPDATE

### Special Authority (SA) Expiration Dates

To ensure continuity of care as FNHA clients moved from Non-Insured Health Benefits (NIHB) coverage to Plan W, PharmaCare and FNHA provided Special Authorities (SAs) for some drugs. Some of these SAs have recently expired, or will expire in the near future. After an SA expires, prescribers can apply for another SA for that client.

SPECIAL AUTHORITY FOR	EXPIRES ON
non-benefit oral antifungals*	February 1, 2018
non-benefit topical antifungals*	February 1, 2018
clopidogrel	February 1, 2018
ticagrelor	February 1, 2018
prasugrel	February 1, 2018
imiquimod	February 1, 2018

\* Pharmacists may request fluconazole 150 mg for the indication of vaginal yeast infection. Some preparations of clotrimazole, and most preparations of miconazole, are regular benefits.

### Full Payment Policy

The PharmaCare full payment policy applies to Plan W claims. Under the full payment policy, no portion of a Plan W claim, including dispensing fees, can be allocated to the patient. Patients are not to be charged for any amount in excess of the accepted reimbursement by PharmaCare. This is applicable to regular benefits, and to Limited Coverage or exceptional coverage drugs for which a Special Authority is in place.

The policy applies to all pharmacy providers that submit claims, and is subject to review and audit. For details on this policy, please see the PharmaCare Policy Manual, [Section 5.10](#).

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.

[www.gov.bc.ca/pharmacarepharmacists](http://www.gov.bc.ca/pharmacarepharmacists) | [www.gov.bc.ca/pharmacareprescribers](http://www.gov.bc.ca/pharmacareprescribers) | [www.gov.bc.ca/pharmacaredeviceproviders](http://www.gov.bc.ca/pharmacaredeviceproviders)



Ministry of Health

## KADIAN® SHORTAGE

Pharmacists may be encountering a shortage of slow-release oral morphine (Kadian®), used for pain indications and opioid agonist treatment (OAT). The shortage is primarily of higher-dose capsules. The 100 mg and 50 mg capsules are back-ordered until mid-February, with a limited supply of 50 mg capsules currently available. The 20 mg and 10 mg capsules are available. (Note that order filters may be in place for all strengths, prioritizing the distributor's existing customers.)

Recent communication from the British Columbia Centre on Substance Use (BCCSU) advised that M-ESLON® could be used instead of Kadian. As a reminder, M-ESLON is not a benefit under PharmaCare Plan G, and there is no PIN for M-ESLON for OAT, so please use all reasonable means to obtain Kadian for your OAT patients.

Do not dispense M-ESLON under the [Kadian PINs](#).

If you receive a prescription for Kadian and do not have appropriate strength capsules in stock, please contact your distributor for information on their Kadian stock. If your distributor has none, please contact nearby pharmacies to obtain stock, and ensure procedures for emergency narcotics stock transfer are followed. If you have Kadian stock on hand and do not regularly dispense to your patients, or if you have more stock than you need in the short term, please contact the BCCSU during regular office hours (Monday through Friday, 8:30 a.m. to 5:30 p.m.) at 604-416-1535, so they can assist in ensuring there are no treatment gaps for OAT patients.

We are working with the manufacturer and distributors to resolve the shortage as quickly as possible.

## REMINDER: DRUG SHORTAGES WEBSITE

All drug shortages in B.C. are reported and detailed in a [spreadsheet](#) available on the [Drug Shortages page](#) of the PharmaCare website. This file is updated daily, and contains information on the expected duration of the shortage, and available alternate drugs, if appropriate.

## BENEFITS

### Limited Coverage Drugs

The following drugs have been added as Limited Coverage Drugs under Fair PharmaCare and Plans B, C, F, W, and, if indicated, G and P.

COVERAGE EFFECTIVE	January 23		
DRUG NAME	<a href="#">sodium phenylbutyrate</a> (Pheburane®)		
INDICATION	urea cycle disorders		
DIN	02436663	STRENGTH/FORM	483 mg/g oral granules
PLAN G BENEFIT?	No		
PLAN P BENEFIT?	No		

COVERAGE EFFECTIVE	January 23		
DRUG NAME	<a href="#">glycerol phenylbutyrate</a> (Ravicti™)		
INDICATION	urea cycle disorders		
DIN	02453304	STRENGTH/FORM	1.1 g/mL oral liquid
PLAN G BENEFIT?	No		
PLAN P BENEFIT?	No		

## Insulin Pumps

The following products have been discontinued and the PINs have been deactivated.

PIN	PRODUCT NAME	EFFECTIVE DATE
45230001	Animas 2020	January 1, 2018
45230006	Animas OneTouch Ping Glucose Management System	January 1, 2018
45230013	Animas Vibe	January 1, 2018

## Hydromorphone HCL – Change in benefit status

Effective January 26, 2018, the benefit status of Hydromorphone HCL (50 mg/mL injection) will change as described in the table below, to accommodate its use for iOAT (injectable Opioid Agonist Treatment). Prescribers wishing to use hydromorphone HCL injection for iOAT must enter into a Collaborative Prescribing Agreement (CPA) with PharmaCare Special Authority. Please contact the British Columbia Centre on Substance Use (BCCSU) at [bccsu\\_education@cfenet.ubc.ca](mailto:bccsu_education@cfenet.ubc.ca) for information on entering into a CPA.

DRUG NAME	Hydromorphone HCL		DIN	02146126
PLAN	INDICATION	BENEFIT STATUS		
B – Residential Care	analgesia	regular benefit		
C – Income Assistance	analgesia	Limited Coverage (see <a href="#">criteria</a> )		
C – Income Assistance	iOAT	exceptional coverage only via Collaborative Prescribing Agreement		
G – Psychiatric Medications	iOAT	exceptional coverage only via Collaborative Prescribing Agreement		
F – At Home Program	analgesia	Limited Coverage (see <a href="#">criteria</a> )		
I – Fair PharmaCare	analgesia	Limited Coverage (see <a href="#">criteria</a> )		
I – Fair PharmaCare	iOAT	exceptional coverage only via Collaborative Prescribing Agreement		
P – Palliative Care	analgesia	regular benefit		
W – First Nations Health Benefits	analgesia	Limited Coverage (see <a href="#">criteria</a> )		
W – First Nations Health Benefits	iOAT	exceptional coverage only via Collaborative Prescribing Agreement		