



BC PharmaCare Newsletter



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QuickLinks

Mifegymiso® Ordering Process	1
New Pricing Agreement on Generic Drugs.....	2
Modernized Reference Drug Program – Monitoring Report.....	2
Benefits.....	2

MIFEGYMISO® ORDERING PROCESS

As detailed in [PharmaCare Newsletter 18-001](#), the distribution of Mifegymiso® in British Columbia is now managed by the BC Centre for Disease Control (BCCDC). To ensure adequate ongoing supply, most pharmacies are asked to order from BCCDC only when presented with a prescription. High-volume pharmacies may order routinely from BCCDC to meet clinical needs. Pre-stocked rural and remote pharmacies may request replacement pre-stock as stock is used.

The BCCDC provides a Drug Supply Manifest for each shipment of Mifegymiso. Please retain this manifest in your pharmacy records, as you will be asked to provide it for any audits or reconciliations.

If you receive a time-sensitive prescription for Mifegymiso and do not have stock on hand, please explore transfer options from neighbouring pharmacies, or contact the BCCDC for stock availability in your area. Please do not refer patients directly to the BCCDC.

Dispensing Mifegymiso

As a reminder, Mifegymiso is available free of charge to any B.C. resident with a valid prescription. Please do not use publicly funded Mifegymiso supplies from the BCCDC to fill private-pay prescriptions for non-B.C. residents.

Until February 16, claims for Mifegymiso a pharmacy had obtained before the publicly funded stock became available may be entered using the DIN for patients covered under PharmaCare Plans C, B, F, or W. Please do not use BCCDC stock for these claims. If you are using BCCDC stock, enter claims using the PIN, not the DIN, for patients covered under any PharmaCare plan. The PIN will allow PharmaCare to pay the dispensing fee to the pharmacy.

PIN	66128174	Use when dispensing BCCDC stock
DIN	02444038	Use when dispensing private stock – only for Plans B, C, F, W until Feb. 16, 2018

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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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Ministry of Health

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For patients covered under Plan I (Fair PharmaCare), enter claims using the PIN as you would for a publicly funded vaccine. Using the DIN for a patient covered under Fair PharmaCare could result in a cost to the patient.

NEW PRICING AGREEMENT ON GENERIC DRUGS

The pan-Canadian Pharmaceutical Alliance (pCPA) recently signed an agreement with the Canadian Generic Pharmaceuticals Association (CGPA) for a 5-year initiative to reduce the pricing on nearly 70 commonly prescribed generic drugs. Effective April 1, 2018, pricing on these drugs will be set at 10-18% of brand-name equivalents.

Generic drugs represent over 70% of all prescriptions reimbursed by PharmaCare. By reducing the prices on generic drugs, public drug plans are better able to afford coverage for newer, frequently more expensive drug treatments for all beneficiaries and continue to improve Canada's position in relation to international generic prices.

A key component of this initiative is that tendering will not be pursued over the next five-years.

Details on the changes from the agreement, including a revised [LCA spreadsheet](#), will be available as of March 1, 2018.

On April 1, 2018, changes to PharmaCare reimbursement limits for Low Cost Alternative (LCA) drugs, including drugs subject to pan-Canadian pricing, will take effect.

NOTE: Suppliers will not reduce pricing for these drugs until April 1, 2018. This is consistent with the participating jurisdictions, and our commitment to the new jointly developed pan-Canadian Pharmaceutical Alliance five-year generic initiative.

MODERNIZED REFERENCE DRUG PROGRAM – MONITORING REPORT

The first [monitoring report for the Modernized Reference Drug Program](#) (RDP) is now available on the PharmaCare website. This report contains data to the end of May 2017.

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	February 6		
DRUG NAME	alemtuzumab (Lemtrada™)		
INDICATION	multiple sclerosis		
DIN	02418320	STRENGTH/FORM	10 mg/mL (1.2 mL) concentrated solution for IV infusion
PLAN G BENEFIT?	No		
PLAN P BENEFIT?	No		
NOTE: Please refer to Section 3.18 of the PharmaCare Policy Manual for information on entering claims for drug costs exceeding \$9,999.99.			

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COVERAGE EFFECTIVE	February 6		
DRUG NAME	nintedanib (Ofev®)		
INDICATION	idiopathic pulmonary fibrosis		
DIN	02443066	STRENGTH/FORM	100 mg capsules
DIN	02443074	STRENGTH/FORM	150 mg capsules
PLAN G BENEFIT?	No		
PLAN P BENEFIT?	No		

COVERAGE EFFECTIVE	February 6		
DRUG NAME	pirfenidone (Esbriet®)		
INDICATION	idiopathic pulmonary fibrosis		
DIN	02393751	STRENGTH/FORM	267 mg capsules
DIN	02464489	STRENGTH/FORM	267 mg tablets
DIN	02464500	STRENGTH/FORM	801 mg tablets
PLAN G BENEFIT?	No		
PLAN P BENEFIT?	No		

COVERAGE EFFECTIVE	February 6		
DRUG NAME	icatibant (Firazyr®)		
INDICATION	hereditary angioedema		
DIN	2425696	STRENGTH/FORM	30 mg/3 mL pre-filled syringe
PLAN G BENEFIT?	No		
PLAN P BENEFIT?	No		

COVERAGE EFFECTIVE	February 6		
DRUG NAME	rifaximin (Zaxine)		
INDICATION	hepatic encephalopathy		
DIN	02410702	STRENGTH/FORM	550 mg oral tablet
PLAN G BENEFIT?	No		
PLAN P BENEFIT?	No		