



BC PharmaCare Newsletter

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FULL PAYMENT POLICY AND PLAN W

The [Full Payment Policy](#) applies to any 100% PharmaCare-paid claim, which includes most claims under Plan W.

Under the Full Payment Policy, pharmacies are not permitted to charge patients any part of a fee for a product or service that is fully covered. The policy is applicable to all pharmacies enrolled as PharmaCare providers.

The full payment policy applies when:

- The patient is receiving full PharmaCare coverage (i.e., all Plan W beneficiaries)
- The drug/product is a regular PharmaCare benefit
- The drug/product is an over-the-counter drug benefit under Plan W
- The patient has Special Authority for full coverage for a partial benefit
- The patient has Special Authority for exceptional coverage for a drug that is not a PharmaCare benefit

Pharmacies must accept as full payment an amount at or below the PharmaCare maximum dispensing fee plus the maximum drug cost PharmaCare will reimburse.

If a provider is able to determine at the time the medication is dispensed that a client's private insurer will cover any costs in excess of the amount PharmaCare covers, they can charge the private insurer. Providers may not attempt to claim amounts in excess of the amount PharmaCare covers through the federal Non-Insured Health Benefits system.

Exceptions to the Full Payment Policy do exist; however, Plan W beneficiaries should not be charged for any PharmaCare-covered item or service, even if PharmaCare policy permits such a charge. If a charge for a PharmaCare-covered item or service is inevitable for a Plan W beneficiary, please submit a [Transitional Coverage Request Form](#) to FNHA for reimbursement. Please do not charge Plan W beneficiaries directly.

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 | www.gov.bc.ca/pharmacareprescribers | www.gov.bc.ca/pharmacaredeviceproviders

For urgent questions, or if you are uncertain if manual billing is appropriate, please contact FNHA at 1-855-550-5454.

VETERINARY PRESCRIPTIONS

When dispensing veterinary medication, never assign a PHN to an animal. Instead, use the PHN of the pet's owner.

To prevent the drug from adjudicating on PharmaNet and to ensure the patient's medical record is correct:

- Use the veterinarian's license number as the Practitioner ID.
- Use V9 as the Reference Code.

This will ensure the drug does not appear on the pet owner's patient record, and will not affect their Drug Utilization Evaluation results. Failure to properly process veterinary medications on PharmaNet may result in inappropriate PharmaCare coverage, and may have serious implications for patient safety.

PATIENT CARE DURING WILDFIRES

The Province of British Columbia [declared a provincial state of emergency](#) on August 15, 2018, in response to the ongoing wildfires affecting the province.

Wildfires are creating challenges for patients and pharmacies. For example, 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 refer to the [Patient Care During States of Emergency and Evacuations](#) information on the PharmaCare website for detailed instructions on submitting claims for patients affected by wildfires.

PHARMACIST PRACTITIONER ID

When selecting your practitioner ID in your pharmacy's local software, please ensure the identifier is P1, which is the code for practicing pharmacists in B.C.

Selection of an incorrect ID will result in transaction errors on PharmaNet (such as mistaken dispensing under another practitioner's license), in which case your pharmacy may be subject to correction fees.

BENEFITS

Basaglar Now Covered as Preferred Insulin Glargine Brand

As of August 21, 2018, PharmaCare covers Basaglar™ brand of insulin glargine for all patients who [meet criteria](#) and have received Special Authority coverage for insulin glargine.

Patients starting on insulin glargine for the first time will receive Special Authority approval for Basaglar brand insulin glargine only. Patients starting insulin glargine will no longer be provided coverage for Lantus®.

For patients who currently receive coverage of Lantus, there will be no change to their coverage. These patients will also have coverage of Basaglar automatically available, should they choose to switch.

Basaglar has also been added as a regular benefit for patients covered under Plan W (First Nations Health Benefits); no Special Authority request is required for Plan W patients.

If a person is medically unable to use Basaglar, their prescriber can submit a new Special Authority request for exceptional coverage of Lantus, which will be reviewed on a case-by-case basis.

Limited Coverage Drugs

The following drug has been added as a Limited Coverage Drug under Fair PharmaCare and Plans B, C, and F. Basaglar is a Regular Benefit for Plan W.

COVERAGE EFFECTIVE	August 21, 2018		
DRUG NAME	Insulin glargine (Basaglar™)		
INDICATION	For the management of type 1 or type 2 diabetes mellitus		
DIN	02444844	STRENGTH & FORM	100U/mL 3mL cartridges, solution for injection
	02444852	STRENGTH & FORM	100U/mL 3mL Kwikpen® pre-filled pens (up to 60 units/injection) solution for injection
	02461528	STRENGTH & FORM	100U/mL 3mL Kwikpen® pre-filled pens (up to 80 unit/injection) solution for injection
PLAN G BENEFIT?	No		
PLAN P BENEFIT?	No		

The following drug has been added as a Limited Coverage Drug under Fair PharmaCare and Plans B, C, F, W.

COVERAGE EFFECTIVE	August 21, 2018		
DRUG NAME	infliximab (Renflexis™)		
INDICATION	As part of treatment for rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis, plaque psoriasis, Crohn's disease, and ulcerative colitis		
DIN	02470373	STRENGTH & FORM	100 mg/vial Powder for solution
PLAN G BENEFIT?	No		
PLAN P BENEFIT?	No		

Publicly Funded Vaccines: Seasonal influenza

For the 2018-19 influenza season, the following vaccines will be covered for eligible residents from September 1, 2018 to June 1, 2019. For information about when supplies will be available in your community, consult your local health unit or Health Authority.

PIN	VACCINE
66128074	FluMist® Quadrivalent PharmaCare does not pay an administration fee for FluMist
66124765	Fluviral®
66128073	Fluzone® Quadrivalent
66124777	Influvac®

More information is available at [PharmaCare Vaccine Resources for Pharmacists](#).

Insulin Pump Supplies

The following products have been added as benefits for eligible patients.

PIN	PRODUCT
46340030	AutoSoft 30 Infusion Set for Tandem Insulin Pumps
46340029	AutoSoft 90 Infusion Set for Tandem Insulin Pumps
46340031	TruSteel Infusion Set for Tandem Insulin Pumps
46340032	VariSoft Infusion Set for Tandem Insulin Pumps

Etidronate Delisting

Effective February 19, 2019, PharmaCare will no longer provide coverage of etidronate for the prevention of fractures due to osteoporosis.

Etidronate in combination with calcium carbonate is currently listed as a regular benefit, subject to the Low Cost Alternative pricing policy. The brand name etidronate product (Didrocal®) is no longer available in Canada, and there have been repeated shortages of generic etidronate products.

Etidronate's unrestricted access makes it available as a first-line therapy in primary and secondary prevention of fractures due to osteoporosis. This is contrary to current practice guidelines, which either do not recommend etidronate use, or recommend it as a second-line therapy only, in patients who have tried other oral bisphosphonates.

As such, a review was initiated by the Ministry of Health. The Drug Benefit Council recommended that PharmaCare no longer cover etidronate for primary or secondary prevention of fractures due to osteoporosis, and to provide Special Authority coverage for alendronate or risedronate for patients currently taking etidronate.

All patients currently taking etidronate have already been granted Special Authority coverage for both alendronate and risedronate.

Patients currently using etidronate should make an appointment with their prescriber to discuss available treatment options before coverage ends on February 19, 2019. In the interim, coverage for all three oral bisphosphonates will be available to patients currently using etidronate.

DIN	DRUG	STRENGTH & FORM	EFFECTIVE DELISTING DATE
02263866	etidronate/calcium carbonate (ACT Etidrocal)	400/1250mg tablet	February 19, 2019