



BC PharmaCare Newsletter

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REDUCED MARK-UP FOR HIGH-COST DRUGS – UPDATE

In [PharmaCare Newsletter 11-003](#) (March 17, 2011), it was announced that starting April 1, 2011, PharmaCare would reimburse certain high-cost drugs eligible for PharmaCare coverage to a maximum price based on the manufacturer list price plus a five percent mark-up.

High-cost drugs subject to this policy are defined as those for which the expected daily cost of the drug at typical dosing is equal to or greater than \$40 (\$14,600 annual cost). For a current list of the drugs subject to this policy, please visit the PharmaCare website at: www.health.gov.bc.ca/pharmacare/pdf/hi-cost-mrkup.pdf.

As a result of discussions with the British Columbia Pharmacy Association (BCPhA), PharmaCare has decided to help mitigate the short-term impact of this policy by providing additional reimbursement to eligible pharmacies.

Eligible pharmacies are those that can establish, with clear documentary evidence, that:

1. they purchased high-cost drugs (subject to this policy) between March 1, 2011 and March 17, 2011 that were not sold prior to April 1, 2011.
2. their actual net wholesale costs for these high-cost drugs purchased between March 1, 2011 and March 17, 2011 exceeded five percent.

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.

In order to be considered for reimbursement, eligible pharmacies must send an email to pharma@gov.bc.ca by May 13, 2011. This email must:

1. include the subject heading “High Cost Drug Maximum Mark-Up and Reimbursement Eligibility”, and
2. identify the specific pharmacy by its name, address, and “Pharmacy ID” code.

By **May 20, 2011**, PharmaCare will respond by sending eligible pharmacies the specific documentary requirements needed to qualify for this reimbursement.

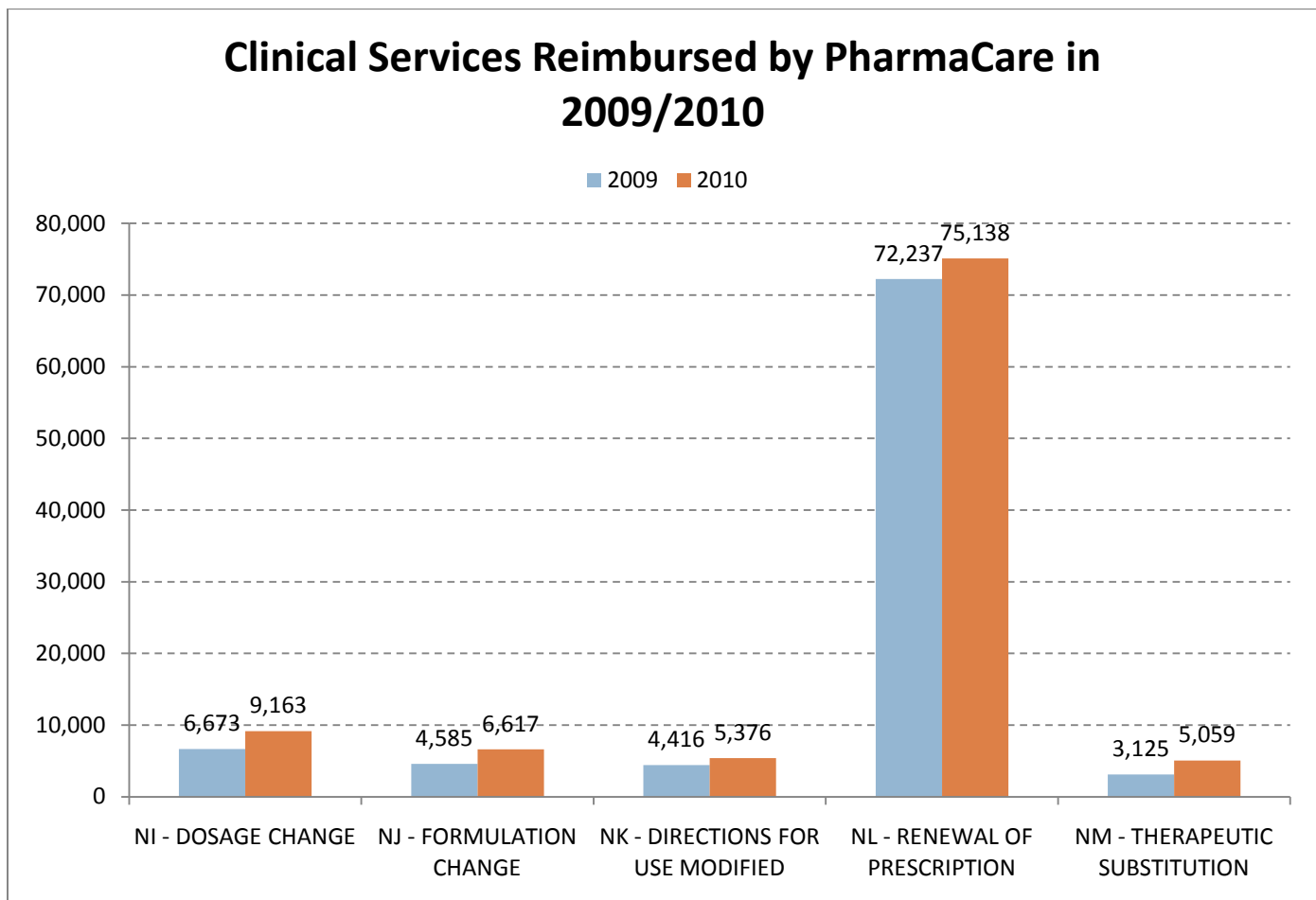
NEW PAYMENT SCHEDULE FOR CLINICAL SERVICES FEES

PharmaCare is switching from a quarterly to a monthly payment schedule for clinical service fees. The payment method remains unchanged.

- Fees for clinical services delivered between January 1 and March 31, 2011 will be paid out in May 2011 as a quarterly payment in the usual fashion.
- Fees for clinical services delivered in April will be paid for in the first week of June, services delivered in May will be paid for in the first week of July, and so on.

CLINICAL SERVICES REIMBURSED BY PHARMACARE IN 2009 AND 2010

The total clinical services reimbursed by PharmaCare increased from 91,036 in 2009 to 101,353 in 2010. The graph below details the number of reimbursements by clinical service type.



SPECIAL SERVICES FEES

The number of Special Services fees that PharmaCare paid each month over the past year:

Mar 2011 1,556	Nov 2010 2,134	Jul 2010 1,999
Feb 2011 1,262	Oct 2010 1,978	Jun 2010 2,233
Jan 2011 1,283	Sep 2010 2,211	May 2010 2,097
Dec 2010 2,322	Aug 2010 2,170	Apr 2010 2,108

BENEFITS

The following new product is now eligible PharmaCare benefit for Fair PharmaCare and Plans B, C, F, and, if indicated below, Plan G and/or Plan P. This product is a partial benefit reimbursed up to a price of generic citalopram 40 mg tablet, currently set at \$0.7191 per tablet.

DIN	DRUG NAME	PLAN G	PLAN P
02296152	CTP 30 [®] (citalopram) 30mg tablet	YES	YES

Benefits — Limited Coverage Drug Program

Effective **April 12, 2011**, the following product became an eligible benefit under the Limited Coverage Program—by Special Authority only. The Special Authority criteria for this product and other Limited Coverage drugs are available at www.health.gov.bc.ca/pharmacare/sa/criteria/restricted/restrictedtable.html.

DIN	DRUG NAME
02338327	Adcirca [®] (tadalafil) 20 mg tablet

NON-BENEFITS

The following products have been reviewed and will not be added as benefits under PharmaCare.

DIN	DRUG NAME
02245619	Copaxone [®] (glatiramer) 20 mg kit for treatment of Clinically Isolated Syndrome (CIS) suggestive of multiple sclerosis (MS)
02292165	Duodopa [™] (carbidopa/levodopa) 5 mg/ml – 20 mg/ml intra-intestinal gel
02323052	Inspra [®] (eplerenone) 25 mg tablet
02323060	Inspra [®] (eplerenone) 50 mg tablet
02279401	Revatio [®] (sildenafil) 20 mg tablet
02242067	Trileptal [®] (oxcarbazepine) 150 mg tablet
02242068	Trileptal [®] (oxcarbazepine) 300 mg tablet
02242069	Trileptal [®] (oxcarbazepine) 600 mg tablet
02244673	Trileptal [®] (oxcarbazepine) 60 mg/ml oral suspension