

# BC PHARMACARE NEWSLETTER

Edition 23-004: April 2023

The PharmaCare Newsletter team works from the territory of the Lekwungen People, known today as the Songhees and Esquimalt Nations. Our gratitude extends to them, and all Indigenous Peoples on whose territories and lands we build relationships.

BC PharmaCare counts on pharmacies and device providers to practice cultural safety and humility. To learn more, read *Coming Together for Wellness*, a series of articles by the First Nations Health Authority (FNHA) and PharmaCare, and consider taking the *San'yas Indigenous Cultural Safety* course.

The PharmaCare Newsletter is published by the Pharmaceutical, Laboratory & Blood Services Division to provide information to B.C.'s healthcare providers.

[www.gov.bc.ca/pharmacarepharmacists](http://www.gov.bc.ca/pharmacarepharmacists)  
[www.gov.bc.ca/pharmacareprescribers](http://www.gov.bc.ca/pharmacareprescribers)  
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**Q:** How do different thiazides compare with respect to cardiovascular and mortality outcomes?

**A:** The answer is in the current edition of [PAD Refills](#). Make sure to subscribe so you don't miss out on news and updates!

## Celebrating 15 years of PAD



Since 2008, the BC Provincial Academic Detailing (PAD) service has delivered learning sessions covering 22 drug therapy topics to thousands of health care professionals.

PAD's 12 academic detailers (pharmacist educators) reach approximately 2,500 health care professionals with each topic—primarily family practice physicians and pharmacists. Explore PAD topics, past and present, on the [PAD web pages](#).

Academic detailing is an educational strategy in which a clinical pharmacist provides objective, balanced, evidence-informed drug information about best prescribing practices. This strategy has been shown to effectively influence the prescribing practices of health care professionals and to promote improved patient health.

PAD pharmacists receive specialized training in academic detailing, attend topic-specific upskilling workshops, and do extensive self-study prior to the launch of each topic. Most topics are accredited by the College of Family Physicians of Canada for up to 1 Mainpro+ continuing education credit.

Health professionals are always welcome to [suggest a PAD topic](#). Since 2008, PAD has covered:

- Acute otitis media
- ADHD medications
- Antibiotics in community practice
- Anticoagulation in atrial fibrillation
- Antidepressants
- Basal insulin in type 2 diabetes
- Buprenorphine-naloxone
- Glucose-lowering medications for type 2 diabetes mellitus (T2DM)
- HPV vaccine
- Hypertension in older adults
- Inhaled medications for COPD
- Insomnia medications
- Neuropathic pain medications
- Opioids in chronic non-cancer pain
- Oral anticoagulants in atrial fibrillation
- Osteoporosis and bisphosphonates
- Paxlovid for COVID-19
- Proton pump inhibitors
- Statins and coronary heart disease
- SGLT2 inhibitors and GLP1 agonists for T2DM
- UTIs and asymptomatic bacteriuria

Keep an eye on the [PAD web pages](#), visit the [PAD archives](#), and keep reading this newsletter for information on upcoming events in Victoria and the Lower Mainland celebrating PAD's 15th anniversary.

## Baqsimi maximum eligible devices increase

On March 8, 2023, PharmaCare increased how many Baqsimi® 3 mg glucagon nasal dosing devices (DIN 02492415) are eligible for coverage annually. The new limit is 20 devices per patient per year, an increase from the previous limit of 15.

There is no other change to Baqsimi coverage; it remains a regular PharmaCare benefit.

Pharmacists are reminded that, as per the PharmaCare [correct quantities list](#), Baqsimi must be entered in PharmaNet as the number of devices dispensed (not the mg or mL of product).

In rare cases where a patient has medical need for more than 20 Baqsimi devices in one year, prescribers can apply for consideration of exceptional coverage through Special Authority.

## Scope of Practice Corner

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*News and data about the ongoing scope expansions enabling pharmacists to better help B.C. residents.*

### Minor Ailments and Contraception Service launches June 1, 2023

The Ministry is pleased to announce that the Minor Ailments and Contraception Service (MACS) will be launched on June 1, 2023. This service will enable pharmacists to be reimbursed by PharmaCare when they assess patients for contraception and minor ailments and prescribe medications when appropriate.

Proposed changes to the Pharmacists Regulation and the Health Professions Act (HPA) were posted for review and response from March 16-31, 2023, and the Ministry has been meeting with pharmacy representatives from around B.C. to explain the objectives of the service and receive input from pharmacists. The College of Pharmacists of BC's Drug Administration Committee is now developing, reviewing and recommending standards, limits and conditions for pharmacist prescribing. The Ministry will hold additional engagement sessions with pharmacy leaders and pharmacists in advance of the service's launch.

Pharmacists in B.C. already possess the knowledge and expertise to help patients manage minor ailments and contraception needs. Nevertheless, several training modules will be offered to all licensed pharmacists in B.C. by the Ministry, the college, the BCPHA and UBC in the coming weeks. This training will be free.

Pharmacists are encouraged to practise to the full extent of their competencies to provide comprehensive and quality care to B.C. residents, including assessing and prescribing for minor ailments. Pharmacists will not be required to become "certified" to prescribe, as they are in some jurisdictions.

Visit the [MACS web page](#) and click "Subscribe" to receive notifications when the page is updated with new information about training, webinars, virtual townhall meetings, and the list of minor ailments pharmacists can assess and prescribe for.

### Updates on pharmacist scope of practice

Ongoing developments regarding new and expanded pharmacy services, such as adaptation and administration of injectable drugs, including uptake data, are regularly shared on the Ministry's [SoP web page](#).

## National Medical Laboratory Week April 9-15, 2023

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From April 9-15, B.C. will join the rest of Canada in celebrating the important work done by medical laboratory professionals. This is the second year that B.C. is formally recognizing Medical Laboratory Week.

You may already know that 50-70 percent of all clinical decisions (and 100 percent of all cancer diagnoses) are made based on laboratory test results. But did you also know that more than 4,200 publicly funded diagnostic tests are

available in B.C., and that more than 55 million outpatient laboratory tests are performed in B.C.'s public and private laboratories every year?

Medical laboratory professionals perform critical and often invisible roles in our health care system. These are medical laboratory assistants, medical laboratory technologists, combined laboratory x-ray technologists, laboratory medicine physicians, pathologists and administrators. They are meeting with patients, collecting and analyzing samples, distributing and interpreting results, and providing quality assurance in hospitals and community laboratories throughout the province.

The COVID-19 pandemic shone an unrelenting spotlight on these hardworking professionals, and we watched with gratitude as they put themselves between us and the virus, collecting and analyzing more than 6.4 million samples between January 2020 and April 2023. The pandemic has receded, but their work – and their readiness to step up to the plate – continues.

Take a moment during Medical Laboratory Week to bang on some pots and pans (figuratively or literally) in recognition of our valued medical lab professionals.

## RAT kit payment update

Since the last newsletter, PharmaCare has paid pharmacies for RAT (COVID rapid antigen test) kit distribution as follows:

Payment month	Paid on date
January 2023	April 3, 2023

Pharmacies are paid \$75 for each case of RAT kits distributed, and pharmacists are reminded to enter the correct PIN:

- BTNX case PIN 66128325
- Artron case PIN 66128338

### Resources

- [2023 PharmaCare provider payment schedule \(PDF\)](#)
- [COVID-19 information for pharmacists](#)

## Policy Spotlight: Smoking Cessation Program

Each month, we shine a spotlight on a PharmaCare policy with an at-a-glance infographic that's relevant to pharmacists' work. We welcome suggestions for pharmacy topics to spotlight with an infographic. Contact us at

[PhamaCareNewsletter@gov.bc.ca](mailto:PhamaCareNewsletter@gov.bc.ca).



Visit [Smoking Cessation Program – for pharmacists](#) for more information.

## Formulary and listing updates

### Additional details about pdp-amlodipine coverage

As announced in the [March 2023 PharmaCare Newsletter](#), Pendopharm (pdp) amlodipine 1 mg/mL oral solution (DIN 02484706) is a Limited Coverage benefit as of February 28, 2023. On the same date, compounded amlodipine suspension (PIN 22123311) was delisted and removed from the eligible compound PINs list.

Up until February 28, 2023, compounded amlodipine suspension was a PharmaCare benefit for patients who could not swallow tablets and capsules due to age or disability, and for pediatric patients when the prescribed dosage was not commercially available nor safely achieved through modification of a commercial product – as per PharmaCare's compounded prescriptions policy.

Patients who filled a prescription for compounded amlodipine suspension within the past 12 months have been granted exceptional interim Special Authority approval for both the pdp-amlodipine solution and the compounded amlodipine suspension until August 15, 2023. During the interim period, pharmacists are encouraged to help eligible patients get Special Authority coverage of the pdp-amlodipine solution by contacting their prescriber and asking them to submit a Special Authority request. For patients who do not meet the Special Authority criteria, Special Authority coverage will not be renewed past August 15, 2023.

The Special Authority criteria for pdp-amlodipine are a diagnosis of hypertension and an inability to swallow tablets due to age or disability, including J-tube or G-tube patients.

As per Health Canada's policy on manufacturing and compounding, compounding should only be done if a commercial product is unavailable. Since pdp-amlodipine solution is available, compounding should not be required.

### Resources

- Special Authority criteria for [pdp-amlodipine](#)
- [Health Canada Policy on Manufacturing and Compounding Drug Products in Canada](#)

### Limited Coverage benefit: amifampridine

PharmaCare has added the following Limited Coverage drug to the PharmaCare drug list. Special Authority approval is required for coverage.

<b>Drug name</b>	amifampridine ( <a href="#">Ruzurgi</a> <sup>®</sup> )		
<b>Date effective</b>	March 28, 2023		
<b>Indication</b>	treatment of Lambert-Eaton myasthenic syndrome (LEMS), age 6+		
<b>DIN</b>	02503034	<b>Strength &amp; form</b>	10 mg tablet

### Limited Coverage benefit: tofacitinib (generics)

Effective **April 6, 2023**, PharmaCare will start covering generic tofacitinib 5 mg and 10 mg tablets, subject to the same Limited Coverage criteria currently in place for the brand name versions – Xeljanz<sup>®</sup> and Xeljanz XR<sup>®</sup>. One month later, beginning **May 5**, full coverage will no longer be available for the brand name products. This is the usual process when PharmaCare starts to cover a generic version of a drug.

Patients who have Special Authority coverage for Xeljanz and who want to keep full coverage of tofacitinib will need to switch to a generic version by May 5, 2023.

Patients taking Xeljanz XR 11 mg daily can be switched to generic tofacitinib 5 mg taken twice a day to retain full coverage. If they choose to continue taking Xeljanz XR 11 mg daily, and they have Special Authority approval in place, PharmaCare will cover up to the cost of 2 x tofacitinib 5 mg tablets daily.

<b>Drug name</b>	<a href="#">tofacitinib</a> (generics)		
<b>Date effective</b>	April 6, 2023		
<b>Indication</b>	ulcerative colitis and rheumatoid arthritis		
<b>DINs</b>	2530007 2522799 2511304	<b>Strength &amp; form</b>	5 mg tablet
<b>DINs</b>	2530015 2511312	<b>Strength &amp; form</b>	10 mg tablet

## Your Voice: Input needed for drug decisions

The knowledge and experience of patients, caregivers and patient groups is integral to [B.C.'s drug review process](#). If you know someone who's taking one of the drugs below or who has a condition any of the drugs treat, encourage them to visit [www.gov.bc.ca/BCyourvoice](http://www.gov.bc.ca/BCyourvoice).

Your Voice is now accepting input on the following drugs **until April 25, 2023**, at 11:59 pm.

Drug	Indication
foslevodopa-foscarbidopa (brand name TBC)	Parkinson's disease
atogepant (Qulipta™)	prevention of migraine

Visit [Your Voice](#) for more information and to complete a survey.

## PharmaCare Scripts

Did you resolve an interesting pharmacy case, or do you have a question about applying a particular PharmaCare policy? Share your story or inquiry with [PharmaCareNewsletter@gov.bc.ca](mailto:PharmaCareNewsletter@gov.bc.ca) and you could find it in a future PharmaCare Script.

### Free contraceptives

Casey enters her local pharmacy and asks the pharmacist assistant, Gillian, for the morning-after pill. The pharmacy assistant gets a box of Contingency One. She asks if Casey has taken it before and if she'd like to speak with the pharmacist, Linda. This is Casey's first time taking the morning-after pill, and she accepts a consultation.

After the consultation, Casey takes out her wallet and asks, "How much do I owe you?"

Linda shakes her head and smiles. "It's free!" she tells Casey. "PharmaCare will pay the full cost. You don't need a prescription, but I need to enter it in PharmaNet for coverage. May I have your BC Services Card?"

"That's great," Casey says, and hands over her BC Services Card.

The pharmacist enters Casey's PHN and the product DIN into PharmaNet. Meanwhile, Casey notices a [poster at the pharmacy counter](#) about free contraceptives.

"So contraceptives are free now?" Casey says. "I haven't taken the pill or anything before, but I'd like to learn more about that."

The pharmacist hands Casey a copy of the PharmaCare [info sheet about free contraceptives](#) and explains the options to Casey. "There's also a short video about it at [gov.bc.ca/contraceptives](http://gov.bc.ca/contraceptives)."

"Thanks!" Casey says.

*PharmaCare fully covers Contingency One and Backup Plan Onestep (and partially covers Plan B) for anyone who requests it. DINs/PINs are available at [Contraceptives – Information for health professionals](#).*

## Special Edition Newsletter: April 18, 2023

### Minor Ailments and Contraception Service: Education resources

The B.C. Minor Ailments and Contraception Service (MACS) is expected to launch on June 1, 2023. Educational and resource materials are now available to help pharmacists prepare for this scope expansion.

### medSask

medSask's "Minor ailment and self-care guidelines" can now be accessed for free by all pharmacists and pharmacy students in B.C. through the [BC Pharmacy Association \(BCPhA\) website](#). These guidelines provide treatment algorithms and patient assessment and treatment checklists for each condition.

medSask can be accessed with a BCPhA login. If you don't have one, [sign up for a complimentary BCPhA account](#). A BCPhA membership is **not** required.

Please note that medSask materials may not reflect the standards, limits and conditions set out by the College of Pharmacists of BC, or requirements for funding as determined by the B.C. Ministry of Health.

### UBC

Free accredited clinical education modules on several minor ailment conditions are now available to licensed B.C. pharmacists through UBC's Continuing Pharmacy Professional Development program (CPPD). To access these resources, visit the [UBC Canvas course catalog](#).

### ...and more to come

These training resources will be made available before June 1:

- An educational module to support pharmacists' understanding of the regulatory changes and requirements (College of Pharmacists of BC)
- An orientation module on prescribing for minor ailments and contraception, with a B.C.-specific focus on PharmaCare and practice requirements (BCPhA)

Also, accredited content on contraception and smoking cessation will be available in summer 2023 from UBC.

The Ministry will provide links and further information about these offerings on the [MACS web page](#) and in the [PharmaCare Newsletter](#). Subscribe to receive notifications of updates to the MACS web page (in the upper right corner of the page).

Pharmacists are encouraged to seek out other education opportunities and resources to help prepare for their participation in MACS.

### MACS survey for the public

A public online survey about MACS was launched on April 12 and is open until April 30.

The [online survey](#) is linked from the top of the BC PharmaCare landing page: [www.gov.bc.ca/pharmacare](http://www.gov.bc.ca/pharmacare) and can be accessed directly via the QR code on the next page.

Please share the survey link with clients so they can provide valuable input for the coming service. Alternatively, save and print the image below and post it at the pharmacy counter.





### Drug administration fee update and reminders

PharmaCare introduced the [drug administration fee](#) in October 2022, alongside an expansion of the drugs pharmacists can administer. Since then, B.C. pharmacists have adeptly integrated drug administration into their services. Read on for an update about drug administrations and some reminders about claiming the fee.

#### Update

B.C. pharmacists completed **44,756** drug administrations between October 14, 2022, when the drug administration fee was implemented, and December 31, 2022.

The top 3 drugs administered by pharmacists in that time were Shingrix, Pevnar 20, and Gardasil 9 (private supply). Together, these accounted for more than 60% of all drugs administered in the pharmacy.

#### Reminders

##### SIG field

We are pleased to report that the SIG field is being completed correctly about 95% of the time. To further improve accuracy, we would like to remind pharmacists that:

- The administration fee can only be claimed when the administration is done in a pharmacy
- The administration fee can only be claimed for administering private supply vaccines, not public supply
- The SIG field for the administration fee claim must include the drug's DIN and generic name, the route and the site of administration, like this: `DIN_genericname_route_site`

*Do not enter any other information in the SIG.*

Example of correct SIG entry

- 1987003\_VitB12\_IM\_LEFT

Examples of incorrect SIG entries – **please don't do these!**

- 4737P\_SHINGIRX\_LEFT
- ADMINISTERED BY PHARMACIST
- RIGHT DELTOID LOT FK942 EXP. 11/2024
- 250-555-1234 JANE SMITH ACME PHARMACY
- INJECTION FEE

### Ineligible drugs

Drugs that are not eligible for the administration fee include insulins, low molecular weight heparins (LMWH), products designed for patient self-injection (such as GLP-1 agonists), publicly funded vaccines, and vaccines indicated for travel. Even if a prescriber writes “for injection by a pharmacist” on the prescription, the drug administration fee cannot be claimed for an ineligible drug.

Examples of ineligible drugs:

- Publicly funded vaccines (e.g., TD Adsorbed (Rx Inj), Gardasil 9 (Rx Inj)): PharmaCare pays \$12.10 for administering publicly funded vaccines when claimed under the [appropriate PIN](#)
- Travel vaccines such as YF-VAX, Typhim VI, and IXIARO: Only indicated for travel
- Ozempic<sup>®</sup>/semaglutide: Indicated for patient self-injection
- Innohep<sup>®</sup>/tinzaparin: LMWH indicated for patient self-injection
- Twinrix may or may not be eligible, depending on indication

Twinrix is the fifth-most common pharmacist-administered drug. If patients meet the criteria for a publicly funded hepatitis A or hepatitis B vaccine (or both), they should be informed of the options available to them at no cost. For patients who meet the “recommended but not provided free in B.C.” criteria, the drug administration fee can be claimed for Twinrix. If these patients have it indicated for travel, however, it is not eligible for the fee. Refer to the [BCCDC immunization manual](#) for an explanation of the criteria.

With patient consent, ineligible drugs may be injected in the pharmacy and billed directly to the patient.

### Pre-filled syringes

Pre-filled syringes intended to be administered by a health care professional are eligible for the drug administration fee. The product monograph will provide details about administration, such as, for example, “for administration by a health care provider” or “drug is intended for patient self-injection,” or it may simply provide instructions for patient self-injection.

## Resources

- [Quick reference guide to PharmaCare claims procedures](#)
- [PINs for publicly funded vaccines](#)
- [BCCDC Immunization Manual: Criteria for public coverage](#)

## Contraceptives coverage updates

As of April 1, 2023, PharmaCare covers the full cost of *many* contraceptives for B.C. residents. *Not all* contraceptives available in Canada are eligible for full coverage.

The full list of covered contraceptives, with DINs and PINs and benefit status, is available at [Free contraceptives—information for health professionals](#).

## PINs for copper IUDs

Please ensure that the copper IUD files in your local system have the correct PINs to get coverage for patients.

## Information for the public

A [contraceptives information sheet \(PDF\)](#) and [poster \(PDF\)](#) are available to print and post in your pharmacy. Place them somewhere clients can see them and scan the QR code. The QR code will take people directly to the [Free contraceptives web page \(www.gov.bc.ca/contraceptives\)](#) that has the full list of covered contraceptives.

We encourage pharmacists to discuss full benefit options with people who are on non-benefit or partially covered products. Not all products have an interchangeable option, but many are eligible for pharmacist adaptation, or options can be discussed with the original prescriber. A table showing oral contraceptive options and their PharmaCare coverage status can be found at [Free contraceptives—information for health professionals](#).



### Did you know?

Plan S (Smoking Cessation) launched in 2011. Between 2011 and 2022, PharmaCare helped about 343,000 people attempt to quit by providing them with no-cost nicotine replacement therapy (NRT) products.