# BC PharmaCare Newsletter

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***QuickLinks***



## PHARMACARE TRENDS REPORT


The annual PharmaCare Trends Report (2014-15) is now available online.

The report highlights progress in delivering an effective, balanced and responsive PharmaCare program, with sections detailing expenditures by PharmaCare Plan, the top ten drugs prescribed in B.C., formulary expansion, and more.

## PHARMACARE FORMULARY SEARCH—NEW WEB ADDRESS

If you use the PharmaCare Formulary Search to find out about PharmaCare coverage of different products, please note that the web address has changed. Please update your Bookmarks/Favourites to https://pharmacareformularysearch.gov.bc.ca.



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# REPORTING BUSINESS AND PHARMANET CHANGES—IMPORTANT REMINDER

## Reporting business changes

As a PharmaCare provider, owners must notify PharmaCare (through **Information Support** at **Health Insurance BC**) of the following changes.

**IMPORTANT:** Failure to abide by your duties and obligations may result in delay or suspension of payments.

| Type of Change | Minimum Advance Notification Requirement |
|---|---|
| Provider Contact information | 7 days before change |
| Operating/Business or Corporate Name | 7 days before change |
| Owner Information | 7 days before change |
| Manager | 7 days before change |
| Location | 7 days before change |
| Power of Attorney | 7 days before change |
| Cancellation of Sub-class(es) | Methadone—30 days before services will end<br>Plan B—No later than the last day of the month before the final full month in which service will be provided; service must end on the last day of the month. (e.g., if service ends August 31, notification must be given by July 31.)<br>Device Provider— as soon as reasonably practicable |
| Request to add a Sub-class | 21 days in advance of requested effective date |
| Notice of Disposition (Sale) or Closure | Disposition—30 days<br>Closure—30 days |
| Notice of Certain Actions or Events* | Immediately after the action or event |

**Actions or events include: order, suspension and/or cancellation of billing privileges, judgment or conviction; suspension or cancellation of pharmacist's registration and/or pharmacy licence; disciplinary action taken by a governing body or action or proceeding taken by the Canadian Board for Certification of Prosthetists and Orthotists; instances in which an **owner** of the site has been the director of a corporation that has declared or been petitioned into bankruptcy; and, a requirement to pay an amount to a public insurer, other than BC PharmaCare.*

## Reporting PharmaNet connection changes

Notify HIBC Information Support before making any of the changes listed below. If you make a change without reporting it in time, you may lose your connection to PharmaNet.

| Type of change | Minimum Advance Notification Requirement | |
|---|---|---|
| | **Internet connection** | **SpanBC connection** |
| Upgrading point-of-sale software | 2 business days | 2 business days |
| Switching to another vendor's software | 2 business days | 2 business days |
| Upgrading/replacing network equipment (e.g., modems and routers) | 2 business days | 50 business days |
| Moving Ministry-installed equipment (e.g., during a renovation) | N/A | 50 business days |
| Relocating to new premises | 2 business days | 50 business days |
| Switching from SPAN BC to Internet connection or vice-versa | 50 business days (from Internet to SPAN BC; for equipment install) | 10 business days (from SPAN BC to Internet) |
| Changing range of IP addresses (e.g., adding an IP address) | 10 business days | 10 business days |
| Requesting authorization to use wireless access to PharmaNet | 40 business days after receipt of form | |

# HIGH COST DRUGS AND NON-RETURNABLE INJECTIBLES—REMINDER

## High-Cost Drugs Subject Reduced Mark-Up—Reminder

PharmaCare reimburses drugs designated as high-cost drugs up to a maximum of the manufacturer list price plus 5% of that price.

See the current list of drugs subject to the reduced mark-up -cost.

## Non-Returnable Injectible Drugs Not Received by the Patient—Reminder

PharmaCare reimburses the PharmaCare-paid ingredient cost for certain high-cost injectable drugs if a drug was ordered for a specific patient but, due to circumstances outside the pharmacy's control, was not received by the patient.

See the current list of high-cost injectible drugs to which this policy applies.

# EXCHANGE RATE UPDATE FOR PROSTHETIC SUPPLIERS

The price list for prosthetic components is adjusted, as needed, based on the closing U.S. Exchange Rate published by the Bank of Canada.

The price list is adjusted when the rate changes by at least five cents for a period of five or more consecutive business days. The new rate will reflect the closing rate posted on the first day of this period.

**New U.S. Exchange Rate $1.3146***

***Based on the Bank of Canada rate at the close of business on July 22, 2016**

# COMPOUND POLICY CLARIFICATIONS

All claims for compounds are subject to the PharmaCare policy regarding compounded prescriptions. Following are clarifications to assist you in submitting claims under that policy.

## Ensuring patient safety

### Identify active ingredients

Whenever you submit a claim for a benefit or non-benefit compound using a generic PIN, you must enter the name(s) of the medicinal ingredients **at the start** of the Directions (SIG) field. This allows other health care professionals involved in the patient's treatment to view the patient's complete medication history.

#### *Example:*

- PIN submitted with claim: 66124098
- **PharmaNet will indicate**: COMPOUNDED PREPARATIONS (FOR SAs ONLY) LIQUIDS
- Actual prescription is for losartan suspension, dose 10mg QD. Concentration is 10mg/5mL.
- **Directions (SIG) field**: Losartan. Take one 5mL spoonful (10mg) once daily.

### Identify ingredient concentration in oral and injectable compounds

The concentration of oral and injectable compound medicinal ingredients must be identifiable on a patient's medication history, so it should also be entered in the Directions (SIG) field.

## COMPOUND POLICY CLARIFICATIONS, CONTINUED

***Examples:***

- Suspension: Take one 5mL spoonful (10mg) once daily
- Capsules: Take one capsule (100mg) once daily
- Suppositories: Insert one suppository (25mg) rectally at bedtime
- Injectables: Infuse at a rate of 50mL/hour (100mg/hr)

## Submitting the correct documentation for compounded medications

Be sure to submit a copy of the current compound prescription with all costing sheets.

## Special Authority approvals

### Changes to a compound after PharmaCare approval

When PharmaCare grants Special Authority approval for a compounded prescription, PharmaCare returns the costing worksheet with its approval. The approval is for the *exact cost and specific compound indicated on the returned costing sheet*.

You must submit a new costing sheet if there are any changes to quantity, strength, ingredients, form, expiry date, etc.

### PharmaCare Compound Special Authority approvals are non-transferable

When PharmaCare approves exceptional coverage for compounds on a case-by-case basis, PharmaCare provides a PIN for use when submitting the claim. This PIN is not transferable to other pharmacies—even if the pharmacies are part of a chain or have the same owner.

If a patient transfers their compound prescription to a different pharmacy, that pharmacy must submit their own costing sheet with a copy of the prescription to PharmaCare for approval before submitting a claim.

## Specific scenarios

### Discontinued products

PharmaCare does not cover a compound if it is intended to replace a commercial product that a manufacturer has discontinued. In rare, urgent, and very exceptional circumstances, PharmaCare may consider Special Authority approval if the patient has been reassessed by their prescriber and the prescriber has determined:

- there is no other drug or product that could be used, and
- the product is not available through Health Canada's Special Access Programme.

### Manufacturer Shortages

PharmaCare does not automatically cover compounds if there is a product shortage. Please see options during drug shortages or call the PharmaNet Help Desk for information.

If necessary, contact the prescriber or refer the patient to their prescriber for further assessment.

### Preservative-Free Eye Drops—Criteria for Coverage

PharmaCare has covered a limited number of preservative-free eye drops as regular benefits since December 10, 2012. As a result, previously approved exemptions for specific pharmacies to compound preservative-free eye drops are no longer in effect. All pharmacies must ensure that a patient meets the coverage criteria below before submitting a claim using a PharmaCare benefit PIN. If the criteria below are not met, Special Authority coverage is required.

## COMPOUND POLICY CLARIFICATIONS, CONTINUED

PharmaCare provides regular benefit coverage for a limited number of compounded, preservative-free eye drops ***only if all the following criteria are met***:

- The eye drops have been prescribed by an ophthalmologist due to patient allergy to preservatives in commercially available prescription eye drops.
- The prescriber verifies, on the original prescription, that there has been a significant allergic reaction and identifies on the prescription the ingredient suspected of triggering the reaction. *Important: A patient is not eligible for PharmaCare coverage of preservative-free eye drops unless this information is on the prescription.*
- PharmaCare has assigned a specific PIN for the active ingredient or particular combination of the active ingredients.

### Requirement to use the most cost effective ingredients and procedures

PharmaCare policy requires you to use cost-effective ingredients and procedures when preparing compounds that will be covered by PharmaCare.

Examples:

- Use a pharmacy-prepared sodium bicarbonate solution rather than IV sodium bicarbonate commercial product when making omeprazole suspension.
- Use omeprazole powder rather than omeprazole capsules when making omeprazole suspension.
- Use Low Cost Alternative options to prepare a suspension rather than more costly tablets/capsules.
- Dispense the maximum quantity appropriate for the product expiry date. PharmaCare accepts claims for smaller quantities only if the stability of the final product is an issue.

If more expensive ingredients are required or you are dispensing a smaller quantity than the expiry date would normally warrant, submit costing information—including a rationale for the increased costs—for Special Authority adjudication before submitting the claim.

# BENEFITS

## Special Authority Coverage of Solifenacin (eligible generics only) for Overactive Bladder

PharmaCare has now completed its therapeutic review of medications for the treatment of overactive bladder. As a result, effective **August 4, 2016**, PharmaCare covers solifenacin (eligible generics only) for the treatment of patients with Overactive Bladder Syndrome[1] who have developed severe[2] intolerance to immediate-release oxybutynin requiring discontinuation of oxybutynin.

Behavioral management protocols (e.g., bladder training, bladder control strategies, pelvic floor muscle training, fluid management) **OR** referral to continence bladder care program should be considered in the spectrum of effective primary treatments for overactive bladder syndrome.

For detailed criteria, please see the criteria page.

More information about overactive bladder, see the therapeutic review. Coverage of this drug is subject to the rules of a patient's PharmaCare plan, including any annual deductible requirement. Retroactive coverage cannot be provided for prescriptions filled before Special Authority approval is in place.

[1] Overactive Bladder Syndrome is defined as urgency with or without urgency incontinence, usually accompanied by urinary frequency and nocturia in the absence of urinary tract infection or other obvious pathology.

[2] Solifenacin for stress incontinence is not eligible for PharmaCare coverage.

## Limited Coverage Benefits

| | | |
|---|---|---|
| **COVERAGE EFFECTIVE** | July 28, 2016 | |
| **DRUG NAME** | secukinumab (Cosentyx®) | |
| **INDICATION** | Plaque psoriasis | |
| **DIN** | 02438070 | 150 mg/ mL solution for injection |
| **PLAN G BENEFIT?** | No | |
| **PLAN P BENEFIT?** | No | |

| | | |
|---|---|---|
| **COVERAGE EFFECTIVE** | August 4, 2016 | |
| **DRUG NAME** | solifenacin | |
| **INDICATION** | Overactive bladder | |
| **DIN** | 02397900 | Teva-Solifenacin® 5 mg tablet |
| **DIN** | 02397919 | Teva-Solifenacin® 10 mg tablet |
| **DIN** | 02446375 | Auro-Solifenacin 5 mg tablet |
| **DIN** | 02446383 | Auro-Solifenacin 10 mg tablet |
| **DIN** | 02424339 | JAMP-solifenacin 5 mg |
| **DIN** | 02424347 | JAMP-solifenacin 10 mg |
| **DIN** | 02437988 | Ran™-Solifenacin 5 mg |
| **DIN** | 02437996 | Ran™-Solifenacin 10 mg |
| **DIN** | 02399032 | Sandoz® Solifenacin 5 mg |
| **DIN** | 02399040 | Sandoz® Solifenacin 10 mg |
| **DIN** | 02417723 | pms-SOLIFENACIN 5 mg |
| **DIN** | 02417731 | pms-SOLIFENACIN 10 mg |
| **DIN** | 02443171 | Mint Solifenacin 5 mg |
| **DIN** | 02443198 | Mint Solifenacin 10 mg |
| **PLAN G BENEFIT?** | No | |
| **PLAN P BENEFIT?** | No | |

| | | |
|---|---|---|
| **COVERAGE EFFECTIVE** | August 2, 2016 | |
| **DRUG NAME** | somatropin (Norditropin NordiFlex®) | |
| **INDICATION** | Growth hormone deficiency in children | |
| **DIN** | 02334852 | 5 mg/1.5 mL |
| **DIN** | 02334860 | 10 mg/1.5 mL |
| **DIN** | 02334879 | 15 mg/1.5 mL |
| **PLAN G BENEFIT?** | No | |
| **PLAN P BENEFIT?** | No | |

The special authority criteria for the following drug has been modified:

| | | |
|---|---|---|
| **COVERAGE EFFECTIVE** | June 7, 2016 | |
| **DRUG NAME** | adalimumab (Humira®) | |
| **INDICATION** | Polyarticular Juvenile Idiopathic Arthritis (pJIA) | |
| **DIN** | 02258595 | 40 mg/0.8 mL subcutaneous injection solution |
| **PLAN G BENEFIT?** | No | |
| **PLAN P BENEFIT?** | No | |

## Blood Glucose Test Strips

The following blood glucose test strips are eligible for coverage as of July 1, 2016.

| Product | PIN for patients below the annual quantity limit | PIN for patients above the annual quantity limit |
|---|---|---|
| CareSens N Blood Glucose Test Strips | 44123059 | 48123059 |
| Dario Blood Glucose Monitoring System Test Strips | 44123060 | 48123060 |
| Spirit Blood Glucose Test Strips | 44123061 | 48123061 |

## Publicly Funded Vaccines

Effective July 1, 2016, the following publicly funded vaccine is eligible for a fee when adminsitered by an authorized pharmacist.

| PIN | Vaccine |
|---|---|
| 66128114 | Meningococcal C Conjugate (Menjugate®) |

## Non-Benefits

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

| DIN | DRUG NAME |
|---|---|
| 02322285 | eculizumab (Soliris®) 300 mg vial for atypical hemolytic uremic syndrome |
| 02417472 | golimumab (Simponi®) intravenous (IV) solution 50 mg/4 mL for rheumatoid arthritis |
| 02324776 | golimumab (Simponi®) solution for injection 50 mg/0.5 ml for ulcerative colitis |
| 02324784 | golimumab (Simponi®) pen injector 50 mg/0.5 ml for ulcerative colitis |
| 02413175 | golimumab (Simponi®) solution for injection 100 mg/1.0 ml for ulcerative colitis |
| 02413183 | golimumab (Simponi®) pen injector 100 mg/1.0 ml for ulcerative colitis |
| N/A | Pregestimil™ A+® 500 kcal/100g Powder (454 g can) Hypoallergenic Infant Formula |
| N/A | Nutramigen™ A+® 500kcal/100g Powder (454 g) and 68 kcal/100ml Ready-To-Use Liquid (945ml) Hypoallergenic Infant Formula, |