

BC PHARMACARE NEWSLETTER

Edition 25-008: August 2025

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The current edition of [PAD Refills](#) is titled **Split, open sprinkle: navigating ADHD medication formulations**.

Make sure to [subscribe](#) so you don't miss out on news and updates!

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

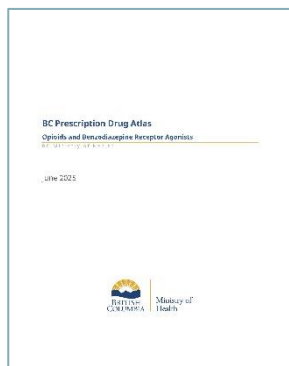
BC PharmaCare counts on pharmacies and device providers to practice humility. To learn more, read *Coming Together for Wellness*, a series of articles by the First Nations Health Authority (FNHA) and PharmaCare, and consider taking the *San'yas* Indigenous Cultural Safety course.

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

gov.bc.ca/pharmacies
gov.bc.ca/programs
gov.bc.ca/deviceproviders



2025 B.C. Prescription Drug Atlas



The 2025 edition of the [B.C. Prescription Drug Atlas \(PDF, 3.2MB\)](#) is now available online.

This document provides an overview of prescribing patterns in B.C. for opioids and benzodiazepine receptor agonists (BZRAs; benzodiazepines and the z-drugs: zopiclone, zolpidem, eszopiclone, and zaleplon) during the period 2016-2024. It is an update of the 2024 edition.

The 2025 Atlas also includes sections focused on the regulatory colleges whose registrants have legal authority to prescribe opioids and/or BZRAs.

Read previous editions of the Prescription Drug Atlas on the [PharmaCare publications](#) web page.

Resources

- [PharmaCare publications](#)
- [B.C. Prescription Drug Atlas \(PDF, 3.2MB\)](#)

Pharmacy services claims 2024/25

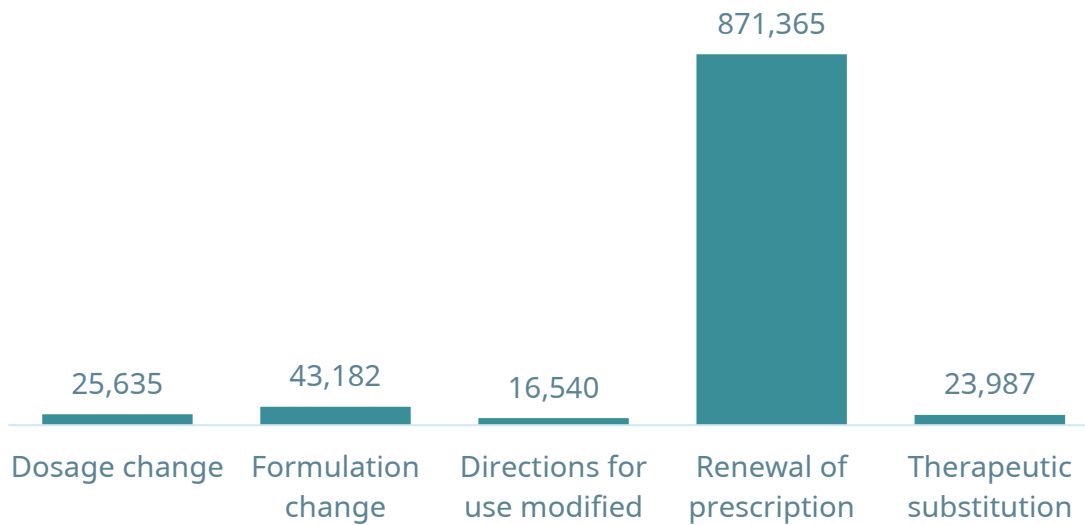
PharmaCare pays pharmacies enrolled as PharmaCare providers set fees for providing [pharmacy services](#) associated with prescription adaptation, medication reviews, and vaccine administration for residents of B.C.

Below are the numbers of prescription adaptation and renewal services, and immunization administrations claimed by B.C. pharmacies in the fiscal year 2024/25.

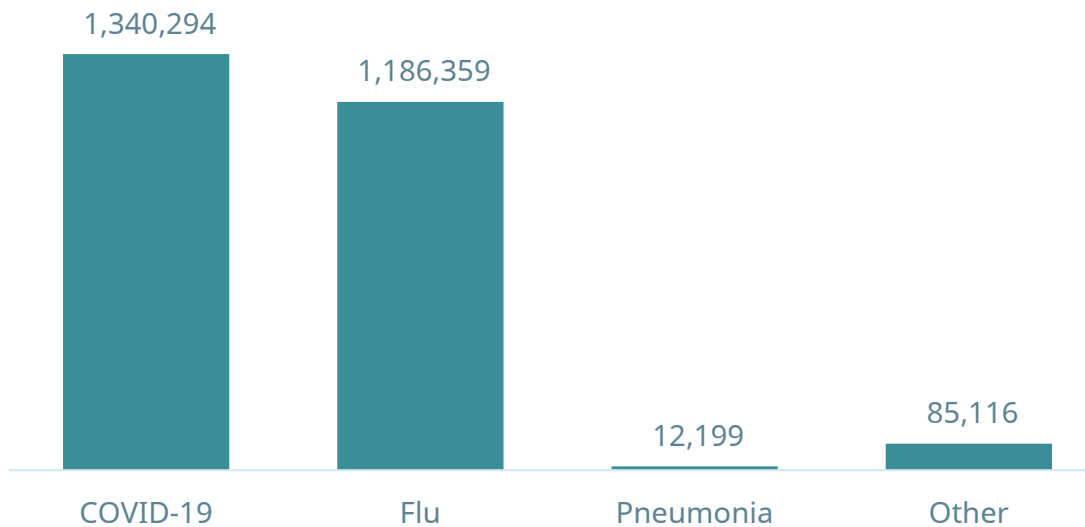
For more pharmacy service statistics, refer to our pharmacist scope of practice data web pages:

- [Adaptation and drug administration – data](#)
- [Pharmacists prescribing for minor ailments and contraception – data](#)

Number of prescription adaptation and renewal services in 2024/25



Number of immunization administrations in 2024/25 (for publicly funded vaccines)



Resources

- [Pharmacy services in B.C.](#)
- [PharmaCare Policy Manual, Section 8.4: Clinical Services Fees](#)
- [PharmaCare Policy Manual, Section 8.10: Pharmacy Administration of Drugs and Vaccines](#)

Staying in touch is getting easier – thanks to you!

In the [July 2025 PharmaCare Newsletter \(PDF, 605KB\)](#), we asked PharmaCare providers to provide a permanent email address that is checked daily. Since then, your PharmaCare Provider Change forms have been flooding in.

Thank you so much for making our work more efficient – and effective! Having the right email on file means you get important information without delay.

If you haven't yet registered a permanent, regularly monitored email address, please submit the [PharmaCare Provider Change form \(PDF, 1.3MB\)](#) by **August 31, 2025**. Complete the cover page, update the email section in Part A, and check if Parts C or D apply.

Provide a permanent email for your pharmacy

» between July 1– August 31

Submit a PharmaCare Provider Change form to register an email with HIBC that is monitored daily

The graphic features a dark blue background on the left and a yellow background on the right. It includes icons for a calendar, a laptop, and a speech bubble containing a yellow envelope with 'PHARMACARE' written on it and a red notification bubble with the number '1'. A checkmark icon is also present in the bottom right corner.

Resources

- [HLTH 5433 – PharmaCare Provider Change form \(PDF, 1.3MB\)](#)

TI Letters: Antidepressant withdrawal



The Therapeutics Initiative recently published two Therapeutics Letters about antidepressant withdrawal.

The first letter, [Antidepressant withdrawal syndrome – Update](#), reviews the risks, symptoms and prevalence of antidepressant withdrawal, emphasizing the importance of informed consent and careful prescribing.

The second letter, [How to stop antidepressants](#), looks at the problems people may have when they stop taking antidepressants. It talks about how to stop safely and avoid withdrawal problems.

Resources

- [Therapeutics Initiative – \[156\] Antidepressant withdrawal syndrome – Update](#)
- [Therapeutics Initiative – \[157\] How to stop antidepressants](#)

Beyond the Patch: QuitNow BC online webinar

QuitNow BC is offering [Beyond the Patch: Supporting Youth Through Evidence-Based Nicotine Cessation](#), an online training webinar for healthcare professionals, educators and other people working with youth.

Nicotine use among young people is a public health concern, particularly with the rising prevalence of vaping. The webinar will explore the clinical rationale, ethical considerations and practical strategies for supporting young people in their efforts to quit.

Participants will gain evidence-based guidance on the safe and effective use of nicotine replacement therapy (NRT) for youth, along with approaches for motivational engagement and meaningful family involvement to improve treatment outcomes.

The webinar will be held on August 11, 2025, from 11 am – 12 pm PST, and will be presented by [Dr. Kevin M. Simon, MD, MPH](#), Boston's first Chief Behavioural Health Officer.

Refer to [Dr. Simon's website](#) for information about his professional background and experience. Visit the [QuitNow BC website](#) for registration details. There is no cost to attend.



Resources

- [QuitNow BC](#)
- [Beyond the Patch: Supporting Youth Through Evidence-Based Nicotine Cessation](#)
- [Kevin Simon, MD, MPH – Boston Children's Hospital](#)
- [Kevin M. Simon, MD, LLC](#)

Guidance for pharmacists in the event of a Canada Post strike

BC PharmaCare is providing the following guidance for B.C. pharmacists to help ensure patients maintain access to their medications in the event of a Canada Post strike.

- Check with any courier company(ies) you use and consider alternative delivery methods if they rely on Canada Post for any portion of their deliveries. Canada Post provides last-mile delivery in many rural and remote areas, meaning that even when delivery is by courier, Canada Post may be responsible for the final leg of delivery to certain remote locations
- Review patient medication supply levels and encourage early refills when appropriate
- Remind patients to check their medication supply and, when appropriate, provide early refills to prevent gaps in therapy. Consider providing the maximum days' supply when dispensing medication for delivery to clients in rural and remote areas
- When providing an early refill because of a Canada Post strike, use the PharmaNet intervention code UF ("patient gave adequate explanation. Rx filled as written"). This is the code used when there is a legitimate reason for supplying medication early. Use of the UF code must be documented appropriately for audit. Refer to [PharmaCare Policy Manual, Section 5.2: Refilling Prescriptions Too Soon](#) for details
- For First Nations Health Authority (FNHA) clients, the [FNHA Transitional Payment Request form \(PDF, 201KB\)](#) can be used to support coverage for an early refill during a Canada Post strike, as needed
- Consider proactively running reports to identify and reach out to clients who rely on cold-chain medications that may require a refill closer to the potential strike date
- Avoid delivering patient cold-chain or temperature-sensitive medications close to a potential strike date, if possible, to prevent spoilage in case of holding/delivery delays
- Note that the Canadian Union of Postal Workers (CUPW) must issue official strike notices for urban, rural and suburban mail carriers at least 72 hours in advance of expected strike action

Resources

- [PharmaCare Policy Manual, Section 5.2: Refilling Prescriptions Too Soon](#)
- [FNHA Transitional Payment Request form \(PDF, 201KB\)](#)

RAT kit payment update

Since the last newsletter, PharmaCare has paid pharmacies for COVID-19 rapid antigen test (RAT) kit distribution as follows:

Payment month	Payment date
May 2025	August 5, 2025

RAT kit distribution fee program ends

As announced in the [May 2025](#) and [June 2025 PharmaCare Newsletters](#), PharmaCare has ended the RAT kit distribution fee program. The last day to submit claims for the [PharmaCare RAT kit distribution fee](#) was June 30, 2025.

Pharmacies are encouraged to order RAT kits from distributors, available free of charge until supplies run out. Pharmacy distributors have stockpiled kits to be available to pharmacies and stores until the supply is exhausted or expired (i.e., late 2026).

Resources

- [May 2025 PharmaCare Newsletter \(PDF, 450KB\)](#)
- [June 2025 PharmaCare Newsletter \(PDF, 685KB\)](#)
- [PharmaCare Policy Manual, Section 8.15: Rapid antigen test kit distribution](#)
- [2025 PharmaCare Provider Payment Schedule \(PDF, 120KB\)](#)

Resource: 5 Ws of Patient Discharge

With the support of Canadian Society of Healthcare-Systems Pharmacy (CHSP) Foundation, Dr. Karen Dahri has created education resources to help patients learn about their medications and support their transition home from the hospital.

The resources describe the 5 Ws of patient discharge:

- What are the medication changes?
- Why are there changes to my medications?
- Where do I go to get my medications after discharge?
- When is my follow-up appointment?
- Who should I connect with after discharge?

The resources are available in multiple languages (English, French, Punjabi, Mandarin, Simplified and Traditional Chinese) and formats (video, infographic, pamphlet and form). You can access them by visiting [5 Ws of Patient Discharge](#).

Resources

- [5 Ws of Patient Discharge](#)



Web page spotlight: Correct quantities for PharmaCare claims

WEB PAGE SPOTLIGHT: CORRECT QUANTITIES FOR PHARMACARE CLAIMS

When entering a claim in PharmaNet, make sure the unit of measure (e.g., volume in milliliters, number of syringes, number of vials, package, doses per inhaler) for the dispensed quantity matches the one in PharmaNet. This ensures claims are adjudicated correctly in PharmaNet.

Refer to the units of measure on the [Correct quantities for PharmaCare claims web page](#). Use **CTRL+F (Win)** or **Cmd+F (Mac)** to search by item or DIN.

Learn more about correct quantities in the PharmaCare Policy Manual, **Section 3.13 Correct Quantities**

Correct quantities for PharmaCare claims

gov.bc.ca/correctquantities

Web page spotlight: Correct quantities for PharmaCare claims



Resources

- [Correct quantities for PharmaCare claims](#)
- [PharmaCare Policy Manual, Section 3.13: Correct Quantities](#)

Drug Shortages

Disopyramide capsules – imported supply added as temporary benefit

Effective July 16, 2025, PharmaCare has added US-labelled disopyramide capsules as a temporary regular benefit. Health Canada has permitted the exceptional, temporary sale of US-labelled disopyramide capsules imported by Dr. Reddy's Laboratories during the shortage of Canadian-marketed disopyramide capsules.



The US products have the same active ingredient, strengths, and dosage form. US products differ from the Canadian-market versions in their labelling (English-only), physical appearance (opaque orange capsules imprinted with m on one side and 095 on the other), and non-medicinal ingredients. Refer to [Dr. Reddy's Laboratories disopyramide capsules risk communication \(PDF, 495KB\)](#) for more details.

To dispense US-labelled disopyramide 100mg capsules use PIN 09858365.

Ipratropium nebules

There is an active shortage of all ipratropium nebules. The hydrofluoroalkane products Ipratropium HFA (Atrovent DIN: 02247686 and Jamp-Ipratropium HFA DIN: 02542587) are available. The shortage is expected to resolve by September 2025.

Consult the [Ipratropium-Bromide-Shortage-EN \(PDF, 307KB\)](#) clinical resource document, released by MedSask and the Canadian Pharmacists Association to learn more.

Olanzapine for injection

Effective July 10, 2025, olanzapine for injection (DIN 02416522) is in shortage. The shortage is expected to resolve in November of 2025.

As a mitigation measure, use SteriMax's US-authorized olanzapine for injection. Use PIN 66128561 for dispensing. Olanzapine for injection is not a PharmaCare benefit.

For more information on the US-authorized product, consult the [SteriMax advisory \(PDF, 389 KB\)](#).

Pain medications: oxycodone/acetaminophen 5/35 mg, Teva-Emtec-30 and Teva-Lenoltec No. 2, No. 3, No. 4

There is an active shortage for multiple DINs of oxycodone/acetaminophen 5/35 mg, Teva-Emtec-30 (DIN 00608882) and Teva-lenoltec No. 2 (DIN 00653241), No. 3 (DIN 00653276) and No. 4 (DIN 00621463). Until the expected resolution in September 2025, PharmaCare encourages prescribers to consider other opioid therapies.

The Canadian Pharmacists Association has an opioid conversion table in their resource [Shortages of Acetaminophen with Oxycodone or Codeine \(PDF, 114KB\)](#) to support recommendations on equivalent doses.

For more information, refer to Health Canada's notice [Acetaminophen with codeine or oxycodone in short supply](#).

Resources

- [Drug shortages](#)
- [Dr. Reddy's Laboratories disopyramide capsules risk communication \(PDF, 495KB\)](#)
- [Ipratropium-Bromide-Shortage-EN \(PDF, 307KB\)](#)
- [SteriMax advisory \(PDF, 389 KB\)](#)
- [Shortages of Acetaminophen with Oxycodone or Codeine – Canadian Pharmacists Association \(PDF, 114KB\)](#)
- [Acetaminophen with codeine or oxycodone in short supply: Notice – Health Canada](#)

Formulary and listing updates

Limited coverage benefits: tofacitinib (generics), bimekizumab (Bimzelx®), methylphenidate controlled release (CR) (Foquest®)

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

Drug name	tofacitinib (generics)		
Date	July 16, 2025		
Indications	For the treatment of active ankylosing spondylitis and active psoriatic arthritis .		
DINs	Refer to the Low Cost Alternative (LCA) and Reference Drug Program (RDP) Data Files for eligible DINs.	Strength & form	5 mg tablet
Special notes	PharmaCare is also transitioning tofacitinib coverage from the brand name product Xeljanz® to generic tofacitinib products. Refer to Tofacitinib coverage transition below for more details.		

Drug name	bimekizumab (Bimzelx®)		
Date	July 16, 2025		
Indications	160 mg/mL: For the treatment of active ankylosing spondylitis and active psoriatic arthritis . 320 mg/2 mL: For the treatment of moderate to severe plaque psoriasis .		
DINs	02525267 02525275 02553619 02553627	Strength & form	160 mg/mL pre-filled syringe 160 mg/mL autoinjector 320 mg/2 mL pre-filled syringe 320 mg/2 mL autoinjector

Drug name	methylphenidate controlled release (CR) (Foquest®)		
Date	July 23, 2025		
Indication	For the treatment of attention deficit hyperactivity disorder (ADHD) in patients 6 years of age or older.		
DINs	02470292 02470306 02470314 02470322 02470330 02470349 02470357	Strength & form	25 mg CR capsule 35 mg CR capsule 45 mg CR capsule 55 mg CR capsule 70 mg CR capsule 85 mg CR capsule 100 mg CR capsule

Non-benefits: upadacitinib (Rinvoq®)

PharmaCare has decided not to cover the following drug for the noted indication.

Drug name	upadacitinib (Rinvoq®)		
Date	July 16, 2025		
Indication	For the treatment of active ankylosing spondylitis.		
DIN	02495155	Strength & form	15 mg tablet

Tofacitinib coverage transition

PharmaCare is transitioning tofacitinib coverage from the brand name product Xeljanz® to generic tofacitinib products. According to Health Canada, generic drugs are pharmaceutically equivalent to brand name drugs; they contain the identical medicinal ingredients, in the same amounts and in a similar dosage form.

To maintain coverage, patients currently covered for the brand name product Xeljanz for [rheumatoid arthritis](#) or [ulcerative colitis](#) must transition to a generic tofacitinib product. PharmaCare is providing **six-month transitional coverage ending January 15, 2026**, to allow time for patients to switch. For patients with existing Xeljanz Special Authority (SA) approval, the generic tofacitinib products will automatically be covered; prescribers do not need to submit a new SA request until the next scheduled renewal date.

Coverage transition timeline		
July 16, 2025	July 16, 2025, to January 15, 2026	January 16, 2026
All new SA requests, including renewals, for tofacitinib will only be approved for the generic brand products. The brand product Xeljanz will not be approved for new SA requests, including renewals.	To maintain coverage, patients with existing Xeljanz SA approval must transition to the generic brand of tofacitinib within the six-month transition period.	Xeljanz is no longer a PharmaCare benefit and only the generic tofacitinib products are covered.

SA requests for patients who are unable to transition to any formulation of generic tofacitinib will be considered on a case-by-case basis.

Prescribers can submit [HLTH 5861 – Tofacitinib patient list request \(PDF, 968KB\)](#) form to request a list of their patients who are receiving PharmaCare coverage for Xeljanz so they can contact them to start the switch. PharmaCare will not be offering patient support fees for the transition.

Patients with rheumatoid arthritis

Some patients with rheumatoid arthritis may take Xeljanz 11 mg XR formulation. To maintain PharmaCare coverage, these patients must, in consultation with their prescriber, switch to the equivalent dose of a generic tofacitinib product (5 mg twice daily). Prescribers do not need to submit a new SA request until the next scheduled renewal date (if applicable).

Patient support programs

For patients transitioning to a generic tofacitinib product, a different patient support program is available. Note that PharmaCare coverage is not tied to participation in a patient support program.

Generic manufacturer	Patient support program
Taro (taro-tofacitinib)	Sun360 Tel: 1-800-268-1975 Fax: 1-866-712-0001 Email: info@sun360psp.ca Website: https://www.sun360psp.ca/for-patients/taro-tofacitinib
PharmaScience (PMS-tofacitinib)	Tel: 1-888-255-9777 Fax: 1-833-350-3886 Email: tofacitinib@allypsp.ca Website: <ul style="list-style-type: none"> • https://www.allypsp.ca/en/ (main website) • https://myrx.care/en/ally (online enrolment, general financial assistance without enrolment)
JAMP (JAMP-tofacitinib)	JAMP Care Tel: 1-855-517-0710 (Monday to Friday, 9 am to 6 pm EST) Fax: 1-855-437-1490 Email: immunology@jamppcarepsp.ca Website: https://jamppcare-support.ca/
Auro (Auro-tofacitinib)	Auro generics are available; please follow up with them for PSP information. Tel: 1-905-856-8063 Ext: 242 Fax: 1-905 856-8094 Email: cs@auropharma.ca Website: https://auropharma.ca

For questions or concerns, please contact the Formulary Management team by email at FM.GenericMailbox@gov.bc.ca.

EDRD coverage: eplontersen (Wainua™)

Effective July 8, 2025, the Ministry of Health initiated funding of eplontersen (Wainua™) through [PharmaCare's Expensive Drugs for Rare Diseases \(EDRD\) process](#).

Clinicians may apply for funding for eligible patients with polyneuropathy associated with stage 1 or stage 2 hereditary transthyretin-mediated amyloidosis (hATTR-PN). Initial applications will be approved for up to nine months. The prescribing physician is responsible for requesting continued Ministry funding every six months after.

Drug name	eplontersen (Wainua™)		
Date	July 8, 2025		
Indication	Treatment of stage 1 or 2 polyneuropathy in adults with hereditary transthyretin-mediated amyloidosis (hATTR-PN).		
DIN	02548909	Strength & form	45 mg/0.8 mL pre-filled autoinjector for subcutaneous injection
Special notes	Eplontersen will be distributed through Innomar Strategies.		

Claim quantity change: romosozumab (Evenity®)

The unit of measurement for claims has changed for romosozumab (Evenity®) 105 mg/1.17 mL pre-filled syringe (DIN 02489597). The correct quantity for PharmaCare claims is now measured by number of pre-filled syringes (previously, it was volume in millilitres).

Resources

- [Correct quantities for PharmaCare claims](#)

Discontinuation: danazol (Cyclomen®) 50 mg capsule

On July 31, 2025, danazol (Cyclomen®) 50 mg capsules (DIN: 02018144), a pituitary gonadotropin inhibitor, was discontinued. The last lot will expire on January 31, 2026. Danazol 100 mg (Cyclomen®) (DIN 02018152) and 200 mg (DIN 02018160) have no change to their benefit status and will remain on the market.

Drug name	danazol (Cyclomen®)		
Date	July 31, 2025		
Drug class	Pituitary gonadotropin inhibitor		
DIN	02018144	Strength & form	50 mg capsule

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 is taking one of the drugs below or who has a condition any of the drugs treat, please encourage them to visit www.gov.bc.ca/BCyourvoice.

Your Voice is now accepting input on the following drugs:

Drug	Indication	Input window
Bulevirtide (Hepcludex®)	The treatment of chronic hepatitis delta virus (HDV) infection in adults with compensated liver disease	July 30 to August 26 at 11:59 pm
pegunigalsidase alfa (TBC)	Long-term enzyme replacement therapy in adult patients with a confirmed diagnosis of Fabry disease (deficiency of alpha-galactosidase)	July 30 to August 26 at 11:59 pm
Risankizumab (Skyrizi®)	The treatment of adult patients with moderately to severely active ulcerative colitis (UC) who have had an inadequate response, loss of response, or were intolerant to conventional therapy or advanced therapy	July 30 to August 26 at 11:59 pm
Risperidone (Okedi®)	The treatment of schizophrenia in adults	July 30 to August 26 at 11:59 pm
Lemborexant (Dayvigo®)	The treatment of insomnia in adults diagnosed according to the most recent version of the Diagnostic and Statistical Manual of Mental Disorders (DSM) referring to chronic insomnia disorder (CID)	July 30 to August 26 at 11:59 pm



Did you know?

BC PharmaCare covered 264 new generic drugs in 2023/2024. Read [PharmaCare Trends 2023-24 \(PDF, 1MB\)](#) for more PharmaCare facts.