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The next PharmaCare Newsletter will be published on January 5, 2023, in order to accommodate people’s return from winter holidays. Happy holidays!



**Q:** What are Special Authority eForms? Is using eForms better than faxing an SA request?

**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!



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)  
[www.gov.bc.ca/pharmacaredeviceproviders](http://www.gov.bc.ca/pharmacaredeviceproviders)

## Special Authority changes for inhalers and insulin pumps

In March 2020, PharmaCare introduced exceptions to Special Authority (SA) coverage for insulin pumps and inhalers for asthma and chronic obstructive pulmonary disease (COPD). These exceptions were temporary, to accommodate exceptional circumstances during the COVID-19 pandemic. As of December 6, 2022, we are reverting to the standard SA criteria for these items.

Item	Temporary criteria	Standard criteria (in effect Dec. 6)
insulin pumps	two HbA1C test results required where value $\leq$ 9.0% on two occasions: one within 6 months prior to submitting SA request and one within 12 months prior	two HbA1C test results required where value $\leq$ 9.0% on two occasions: one within 1 month prior to submitting SA request and one within 4-6 months prior
inhalers for asthma and COPD*	patients without a PFT result are approved “exceptionally” for 1 year and are required to complete PFT and submit result for consideration of further coverage	patients without a PFT result are approved “exceptionally” for 6 months and are required to complete PFT and submit result for consideration of further coverage
*Eligible inhalers: <a href="#">formoterol</a> ; <a href="#">formoterol in combination with budesonide</a> ; <a href="#">formoterol combination with mometasone</a> ; <a href="#">salmeterol</a> ; <a href="#">salmeterol combination with fluticasone</a> ; <a href="#">vilanterol combination with fluticasone</a> ; <a href="#">aclidinium</a> ; <a href="#">aclidinium combination with formoterol</a> ; <a href="#">glycopyrronium</a> ; <a href="#">glycopyrronium combination with indacaterol</a> ; <a href="#">tiotropium</a> ; <a href="#">tiotropium combination with olodaterol</a> ; <a href="#">umeclidinium</a> ; <a href="#">umeclidinium combination with vilanterol</a>		

### Resources

- [March 2020 PharmaCare Newsletter \(PDF\)](#)
- [Special Authority drug list](#)

## Changes to orthotic helmet coverage criteria

Effective December 1, 2022, PharmaCare has removed the “plagiocephaly with brachycephaly” category from its criteria for orthotic helmet coverage.

Now, to qualify for PharmaCare coverage for orthotic helmets, a person must meet the following criteria.

- Be aged 5 to 12 months, and
- Be diagnosed with plagiocephaly, brachycephaly or craniosynostosis, and
- Satisfy the specified cranial vault asymmetry index or cranial index requirements

As before, in order to be covered, the patient’s family must be registered for Fair PharmaCare and/or be covered by Plan C (Income Assistance) or Plan F (At Home Program) before the helmet is dispensed.

Updates have been made to [Section 5.7 – PharmaCare Prosthetic and Orthotic Policy Manual](#) and the [Plagiocephaly Helmet application form \(HLTH 5450, PDF\)](#) to reflect this change. Please replace pharmacy office stock with the new form.

In exceptional cases, patients who do not meet the above criteria may be considered for coverage. This is unchanged and is further explained in [Section 5.7.4 – PharmaCare Prosthetic and Orthotic Policy Manual](#).

## COVID-19 RAT kit payments

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As announced in the [April 2022 PharmaCare Newsletter \(PDF\)](#), effective April 11, 2022, pharmacies receive \$75 for every case they distribute of the Artron or BTNX COVID-19 RAT (rapid antigen test) kit. Pharmacies record distribution of cases using PIN 66128325 for each case of BTNX kits and PIN 66128338 for each case of Artron kits.

The August 2022 RAT kit payment was included in PharmaCare's November 7, 2022, weekly payment, and the September 2022 payment was included in the November 21, 2022, weekly payment. Each \$75 payment will appear on the Pharmacy Remittance Advice Form with the adjustment code 7–Manual Payment.

Pharmacies are encouraged to continue ordering and stocking sufficient RAT kits to meet demand. More information is available on our [COVID-19 information for pharmacies web page](#).

## New vaccine PIN: Imvamune®

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PharmaCare has added the vaccine Imvamune (RX INJ) to the publicly funded vaccines page (category: other). Pharmacists should use the PIN 66128369 when this drug is administered. Imvamune belongs to the polio and mpox\* product group.

\*Name recently changed from monkeypox: visit [BCCDC's mpox page](#).

## Formulary and listing updates

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### Limited coverage benefit: pdp-levetiracetam

As of November 22, 2022, Pendopharm (pdp) levetiracetam 100 mg/mL oral solution (DIN 2490447) is a limited coverage benefit, and compounded levetiracetam suspension (PIN 22123267) is delisted and removed from the eligible compound PINs list.

Up until November 22, 2022, compounded levetiracetam suspension was a PharmaCare benefit for patients with Special Authority approval for levetiracetam tablets who could not swallow tablets/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 met the Special Authority criteria for compounded levetiracetam suspension and who filled a prescription for it within the past 12 months have been granted exceptional interim Special Authority approval for both the pdp-levetiracetam solution and the compounded levetiracetam suspension until May 22, 2023.

During the interim period, pharmacists are requested to help eligible patients get Special Authority coverage of the pdp-levetiracetam solution by contacting their prescriber and asking them to submit a Special Authority request.

For patients who do not meet the Special Authority criteria for pdp-levetiracetam, Special Authority coverage will not be renewed past May 22, 2023.

The [Special Authority criteria for pdp-levetiracetam](#) includes diagnosis of epilepsy and as adjunctive therapy in patients who are refractory to conventional therapy and not able to swallow levetiracetam tablets.

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

### Resources

- [Special Authority criteria for pdp-levetiracetam](#)
- About [Special Authority](#)
- [Health Canada Policy on Manufacturing and Compounding Drug Products in Canada \(POL-0051\)](#)

### Limited coverage benefit: Breztri®

The following drug is now a PharmaCare limited coverage benefit.

<b>Drug name</b>	<a href="#">budesonide-glycopyrronium-formoterol</a> (Breztri® Aerosphere™)		
<b>Date effective</b>	November 2, 2022		
<b>Strength &amp; form</b>	182 mcg budesonide / 8.2 mcg glycopyrronium (as bromide) / 5.8 mcg formoterol fumarate dihydrate per metered actuation		
<b>DIN</b>	02518058	<b>Indication</b>	COPD
<b>Covered under</b>	Limited Coverage benefit under Fair PharmaCare and Plans B, C, F, P and W.		

### Expensive drugs for rare diseases: Trikafta®

Expensive drugs for rare diseases (EDRDs) are drugs that treat uncommon diseases and have a very high per-patient cost. EDRDs are PharmaCare non-benefits, but some drugs and patients may be eligible for coverage on a last-resort case-by-case basis.

Since September 13, 2022, two strengths of Trikafta® are covered through [PharmaCare's EDRD process](#). Cystic fibrosis clinicians may apply for Trikafta funding and, if approved, patients may access Trikafta at a pharmacy.

Trikafta is packaged as a 28-day supply of oral tablets (\$23,520 per package). PharmaCare limits supply to 28 days. Refer to [Section 3.18 – PharmaCare Policy Manual](#) for claims information.

Approved claims are usually fully covered by PharmaCare or shared with the patient's third-party insurer. PharmaCare doesn't cover any markup on Trikafta but will cover a dispensing fee.

If approved, initial requests are covered for up to 8 months. It is the responsibility of the prescribing physician and the Provincial Health Services Authority to request ongoing coverage if needed: 6-8 months after the initial approval, 12 months after that, and every 2 years thereafter.

Once funding is approved, it may take up to 3 business days to update the approval in the patient's PharmaNet profile. If you're unable to successfully bill a Trikafta prescription to PharmaCare, log the prescription and re-bill in 2-3 business days.

Due to the high cost of Trikafta, the Ministry of Health recommends that pharmacies bill PharmaCare or the patient's third-party insurer before ordering the medication from McKesson Specialty. Pharmacies should also confirm pickup of the drug with the patient.

Contact the PharmaNet Help Desk for help submitting a claim.

Note: Trikafta is distributed through McKesson Specialty and cannot be ordered through the McKesson/PharmaClik system. If your pharmacy hasn't already done so, it may need to open an account with McKesson Specialty. They can be reached at 1-877-827-1306 or [mckesson.specializeddistribution@mckesson.ca](mailto:mckesson.specializeddistribution@mckesson.ca).

<b>Drug name</b>	elexacaftor/tezacaftor/ivacaftor(Trikafta®)		
<b>Date effective</b>	September 13, 2022		
<b>Indication</b>	cystic fibrosis in patients aged 6 and older who have at least one F508del mutation in the cystic fibrosis transmembrane conductance regulator gene		
<b>DINs</b>	02517140	<b>Strength &amp; form</b>	elexacaftor 100 mg/tezacaftor 50 mg/ivacaftor 75 mg tablet and ivacaftor 150 mg tablet
	02526670		elexacaftor 50mg/tezacaftor 25mg /ivacaftor 37.5mg and 75mg ivacaftor
<b>Covered under</b>	Expensive Drugs for Rare Diseases program		

### Non-benefits: Arazlo® and Rinvoq®

PharmaCare has determined the products below will not be covered.

<b>Drug name</b>	tazarotene (Arazlo™)		
<b>Date effective</b>	November 8, 2022		
<b>Indication</b>	acne		
<b>DIN</b>	02517868	<b>Strength &amp; form</b>	0.045% w/w topical lotion

<b>Drug name</b>	upadacitinib (Rinvoq®)		
<b>Date effective</b>	November 29, 2022		
<b>Indication</b>	1. moderately to severely active rheumatoid arthritis in adults OR 2. active psoriatic arthritis in adults		
<b>DIN</b>	02495155	<b>Strength &amp; form</b>	15 mg extended-release tablet

## Delisting: select Nicorette® lozenges

In June 2022, PharmaCare added select OTC Nicorette lozenges as temporary Plan S (Smoking Cessation) benefits during product shortages for regular Plan S benefit lozenges (see [June 2022 PharmaCare Newsletter \(PDF\)](#)). Supply of Nicorette lozenges with NPNs 80110858 and 80112095 has now increased and, as of January 31, 2023, the following will no longer be PharmaCare Plan S benefits.

NPN/DIN	Item
02247347	Nicorette® Mini Lozenge 2mg
02247348	Nicorette® Mini Lozenge 4mg
80053100	Nicorette® Mini Lozenge 4mg
80053099	Nicorette® Mini Lozenge 2mg

## Paxlovid® survey reminder

This is a final reminder for BC pharmacists to complete the [Paxlovid® Pharmacist Survey](#). The survey collects valuable information about pharmacists' experiences providing clinical assessments and monitoring for adverse drug events of Paxlovid (nirmatrelvir/ritonavir), and claiming PAX-A and PAX-F fees.

The survey closes on December 31, 2022.

## 2022 year-end reminders

### PharmaNet Help Desk holiday closure

The PharmaNet Help Desk will be closed from 10:15 p.m. on Saturday, December 24 until 10:15 p.m. on Sunday, December 25, 2022.

If you experience problems connecting to PharmaNet during this time, please call 250-361-5790. The interactive voice response system will be available.

### Fair PharmaCare registration holiday closure

To allow for annual maintenance, the Application for Health and Drug Coverage (AHDC), the application for MSP and Fair PharmaCare, will be unavailable starting at 8 a.m. Saturday, December 31, 2022.

Online applications will resume at 8 a.m. on Sunday, January 1, 2023.

Phone applications will resume at 8 a.m. on Tuesday, January 3, 2023.

### 2023 provider payment schedule

The weekly and monthly provider payment schedule for 2023 is available on our [pharmacy information page](#).

### Blood glucose test strips—annual quantity limits

On January 1, 2023, patients will be assigned their annual limit of blood glucose test strips (BGTS). Beginning January 1, please ensure you use the [regular BGTS PINs](#) listed for claims until patients exceed their annual limit.

The list of BGTS eligible for PharmaCare coverage changes on a regular basis. Please consult the [list of eligible test strips](#) on the PharmaCare website before submitting claims.

All strips purchased by a patient, regardless of the payer, count toward the patient's annual limit.

### • BGTS information for patients

Patient information is available online about [PharmaCare quantity limits for BGTS](#) and as a printable patient information sheet, [Blood glucose test strips – annual limits \(PDF\)](#), available in multiple languages on our [patient info sheets web page](#).

### Fair PharmaCare annual deductibles reset in the new year

On January 1, 2023, PharmaNet will be updated with 2023 annual deductible and family maximum amounts. Deductible accumulations will be reset to zero.

Fair PharmaCare coverage levels for 2023 are based on a family's 2021 net income. Income from Universal Child Care Benefits, Registered Disability Savings Plans and some BC Housing subsidies are not included when determining coverage levels.

### • Deductible information for patients

Fair PharmaCare registrants can get information about their deductible and family maximum by:

- Requesting a [Confirmation of Fair PharmaCare coverage](#) letter or
- Calling us Monday to Friday, 8:00 a.m. to 8:00 p.m. and Saturdays 8:00 a.m. to 4:00 p.m. from the Lower Mainland at 604-683-7151 or from the rest of B.C., toll-free, at 1-800-663-7100



### Did you know?

Fair PharmaCare is BC's largest drug coverage plan. In 2020-21, 1.3 million families were registered for Fair PharmaCare. Find more stats in [2020/2021 PharmaCare Trends](#).