

# BC PHARMACARE NEWSLETTER

Edition 23-002: February 2023

February 2023 newsletter & February 24 Special Edition newsletter

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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)



**Q:** What is the effect of melatonin on children experiencing ADHD and insomnia?

**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!

## Nirmatrelvir/ritonavir (Paxlovid™) shelf life extension

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On December 1, 2022, Health Canada issued a Notice of Compliance to extend the shelf life of nirmatrelvir/ritonavir (Paxlovid™) from 18 months to 24 months. The extension applies to both the standard dose pack (DIN 02524031) and the moderate renal impairment dose pack (DIN 02527804).

Pharmacists are advised to verify the expiry date on any Paxlovid they dispense and to communicate with patients to avoid confusion or premature disposal of Paxlovid packs whose printed expiry dates have passed.

Refer to the [January 17, 2023, letter from Pfizer Canada](#) or any materials provided by your wholesaler for details about lot numbers and extended expiry dates for Paxlovid products.

## Scope of Practice Corner

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*This article introduces a new feature for the Newsletter. In the Scope of Practice Corner, we'll share news, data and information about the ongoing scope expansions enabling pharmacists to better help B.C. residents with more of their pharmacy needs.*

### Renewals and other adaptations

It's been four months since the Minister of Health announced [expanded scope of practice and responsibilities for pharmacists](#). Now that pharmacists can renew prescriptions for more medications and conditions, the number of pharmacist-provided emergency fills has decreased.

Comparing September 2022 to November 2022:

- The number of pharmacist-provided renewals per month increased 128%, from 24,200 to 55,200
- The number of pharmacist-provided emergency fills decreased by 12%, from 125,300 to 109,800

The College of Pharmacists of BC's web page [Adapting a Prescription](#) answers common questions about adaptations, including how to inform prescribers when adapting a prescription, what documentation is required and which pharmacy services do *not* qualify as adaptations.

### Provincial Prescription Renewal Support Service

To help with complex prescription renewals for patients without a primary care provider, the Province launched the [Provincial Prescription Renewal Support Service \(PPRSS\)](#) on January 24. Pharmacists are strongly encouraged to [sign up now](#) so they are ready to submit a PPRS eForm when it's needed. Read this newsletter's [PharmaCare Script](#) below and review the [PPRSS reference script](#) for guidance on talking about PPRS with patients.

**\*Webinar\*** – The BC Pharmacy Association is hosting a PPRS webinar on Thursday, February 9, at 6 pm. Speakers from the Ministry of Health will provide an overview of the service and explain patient eligibility criteria, staff responsibilities, referral procedures and next steps. There will be time at the end for questions. The [BCPhA website](#) has additional information, including sign-up details.

## Scope of practice resources

- [Pharmacist scope of practice 2022-23](#) – which links to other web pages:
  - [Adapting prescriptions](#)
  - [Provincial Prescription Renewal Support Service \(with reference script\)](#)
  - [Drug administration](#)
  - [Pharmacists prescribing for minor ailments and contraception](#)
- [Expanded pharmacy services](#) – web page for B.C. residents
- [PharmaCare Policy Manual, Section 8.4 – Clinical Services Fees](#)
- College of Pharmacists of BC’s web page [Adapting a Prescription](#) and [PPP-58 Adapting a Prescription \(PDF\)](#)

### Recognizing pharmacists

“I want to particularly recognize the role of pharmacy in our fall campaigns, as they've completed **2,287,000 vaccinations** for COVID-19 and influenza, which is an enormous contribution.”

– Adrian Dix, Minister of Health, speaking to media, January 13, 2023

## RAT kit payment update

PharmaCare payments for RAT kit distribution will now be included in the first regular provider payment of each month, two months after the month they’re distributed. As before, payments will appear on the Pharmacy Remittance Advice Form under the adjustment code 7 – Manual Payment. The new once-a-month payments will start with the March 6 provider payment.

Payments made since the last update (in the December 2022 newsletter) are shown below:

Month of distribution	Date paid
October 2022	January 3, 2023
November 2022	January 30, 2023

PharmaCare-enrolled pharmacies receive \$75 for each case of RAT kits distributed and entered in PharmaNet using these PINs:

- 66128325 for each BTNX case
- 66128338 for each Artron case

### Resources

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

## Reminder: First 80 characters of SIG field captured in PharmaNet profiles

This is a reminder to pharmacists – particularly those new to PharmaNet – that only **the first 80 characters** of the SIG field are captured in a patient’s PharmaNet profile. Even though some pharmacy systems allow entry of more than 80 characters in the SIG field, only the first 80 will be visible to other users.

Because of this, essential information—especially dosage information—must be entered at the beginning of the SIG field. Entering more than 80 characters could result in a truncated entry, possibly omitting important information such as the medication dose, e.g., “...dosage 25” rather than “...dosage 250 mg”.

## Policy Spotlight: Correct Quantities

Each month, we’ll shine a spotlight on a PharmaCare policy with an at-a-glance reminder or primer on a policy relevant to pharmacists’ work. Is there a policy you want to understand better or to see highlighted? We welcome your suggestions at [PharmaCareNewsletter@gov.bc.ca](mailto:PharmaCareNewsletter@gov.bc.ca).

### GRAMS, MILLILITRES, NUMBER OF TABLETS...



Always use the correct unit of measure when entering a claim in PharmaNet.



Consult [correct quantities for PharmaCare claims](#) for the unit of measure to use when entering a claim for any product, including injectables, inhaled medications, oral medications, solutions, suspensions, and more.

Policy Spotlight: Correct Quantities



Refresh your knowledge by reviewing [PharmaCare Policy Manual, Section 5.5 – Correct Quantities](#) and referring to the list [Correct quantities for PharmaCare claims](#).

## Changes to PharmaCare coverage for Epclusa® and Harvoni™

*This article first appeared in a special edition of the newsletter, published on January 26, 2023.*

Effective January 26, 2023, due to the discontinuation of ribavirin (Ibavyr™) in Canada, PharmaCare will provide 24 weeks of coverage for sofosbuvir-velpatasvir (Epclusa®) or ledispavir-sofosbuvir (Harvoni™) to treat patients with chronic hepatitis C (CHC) with decompensated cirrhosis, and 12 weeks of coverage for Harvoni to treat patients with genotype 1 CHC who have had a liver transplant. Additional details are provided in the table below.

Although prescribers have been notified of ribavirin’s discontinuation, pharmacists may still receive prescriptions for it. If this happens, the pharmacist must ensure they can secure sufficient supply for the full treatment course. If they can’t,

they will need to notify the prescriber so the prescriber can request Special Authority coverage for an extended course of Eplclusa or Harvoni, if appropriate.

Patient group eligible for SA coverage	Previous coverage	New coverage
chronic hepatitis C, genotypes 1-6, decompensated cirrhosis	Eplclusa + ribavirin for 12 weeks	Eplclusa for 24 weeks
chronic hepatitis C, genotype 1, decompensated cirrhosis	Harvoni + ribavirin for 12 weeks	Harvoni for 24 weeks
chronic hepatitis C, genotype 1, liver transplant recipients	Harvoni + ribavirin for 12 weeks	Harvoni for 12 weeks

Complete coverage details are available at the pages linked below.

#### Resources

- Updated [Limited Coverage \(Special Authority\) criteria for Eplclusa](#)
- Updated [Limited Coverage \(Special Authority\) criteria for Harvoni](#)
- [Hepatitis C prescriber info sheet \(PDF\)](#)

## Formulary and listing updates

### Limited Coverage benefit: bimekizumab

PharmaCare has added the following Limited Coverage drug to the PharmaCare drug list.

<b>Drug name</b>	bimekizumab (Bimzelx®)		
<b>Date effective</b>	January 31, 2023		
<b>Indication</b>	moderate to severe plaque psoriasis		
<b>DINs</b>	00035017 02023695	<b>Strength &amp; form</b>	160 mg/mL solution for injection

### Limited Coverage benefit (criteria change): denosumab

PharmaCare has expanded the Special Authority criteria for the following Limited Coverage drug.

<b>Drug name</b>	denosumab (Prolia®)		
<b>Date effective</b>	January 17, 2023		
<b>Indication (new)</b>	prevention of osteoporotic fractures in women with breast cancer who are on aromatase inhibitor therapy		
<b>DIN</b>	02343541	<b>Strength &amp; form</b>	60 mg/mL solution for injection

## Plan P (Palliative Care) benefit: atropine eye drops

PharmaCare has added the following drug to the Plan P (Palliative Care) drug list.

<b>Drug name</b>	atropine 1% ophthalmic drops (Isopto Atropine®)		
<b>Date effective</b>	February 7, 2023		
<b>Indication</b>	respiratory secretions		
<b>DINs</b>	00035017 02023695	<b>Strength &amp; form</b>	1% ophthalmic drops

## Non-benefits: ustekinumab, semaglutide, fostamatinib

PharmaCare has determined the products below will not be covered.

<b>Drug name</b>	ustekinumab (Stelara®)		
<b>Date effective</b>	January 17, 2023		
<b>Indication</b>	moderate to severe active ulcerative colitis in adults		
<b>DINs</b>	02459671 02320681	<b>Strength &amp; form</b>	IV sol. 130 mg/26 mL, SC inj. 90 mg/1 mL

<b>Drug name</b>	semaglutide (Rybelsus®)		
<b>Date effective</b>	January 31, 2023		
<b>Indication</b>	type 2 diabetes mellitus		
<b>DINs</b>	02497581 02497603 02497611	<b>Strength &amp; form</b>	3 mg oral tablet 7 mg oral tablet 14 mg oral tablet

<b>Drug name</b>	fostamatinib (Tavalisse®)		
<b>Date effective</b>	January 31, 2023		
<b>Indication</b>	chronic immune thrombocytopenia (ITP)		
<b>DINs</b>	02508052 02508060	<b>Strength &amp; form</b>	100 mg oral tablet 150 mg oral tablet

## New biosimilar: Kirsty®

Effective January 24, 2023, PharmaCare is listing a new insulin aspart biosimilar, Kirsty®. This is the second insulin aspart biosimilar to be listed as a regular PharmaCare benefit, after Trurapi. Kirsty is indicated for type 1 and type 2 diabetes. The format is a 3 mL prefilled syringe with DIN 02520974. The 10 mL multi-dose vial (DIN 02520982) is not yet available in Canada and therefore is not covered.

At this time, Kirsty is not indicated for use with a continuous subcutaneous insulin infusion (CSII) pump system. PharmaCare coverage continues for patients using the biologic originator NovoRapid with insulin pumps until the end of November 2023 – as announced in the [November 2022 PharmaCare Newsletter](#).

## Resources

- [Biosimilars Initiative for health professionals](#)
- Trurapi was added as a regular benefit [on November 30, 2021](#)
- Latest Trurapi and Admelog coverage extension announcement: [November 2022 PharmaCare Newsletter](#)

## 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 have a patient who is taking one of the drugs below or who has one of the conditions they treat, please encourage them or their caregiver to visit [www.gov.bc.ca/BCyourvoice](http://www.gov.bc.ca/BCyourvoice).

<b>Drug</b>	difelikefalin (Korsuva <sup>®</sup> )
<b>Indication</b>	moderate to severe pruritus (itching) associated with chronic kidney disease in adults
<b>Input window</b>	Jan. 25 to Feb. 21, 2023 @ 11:59 pm

<b>Drug</b>	mavacamten (Camzyos <sup>™</sup> )
<b>Indication</b>	obstructive hypertrophic cardiomyopathy (oHCM)
<b>Input window</b>	Jan. 25 to Feb. 21, 2023 @ 11:59 pm

<b>Drug</b>	deucravacitinib (Sotyktu <sup>™</sup> )
<b>Indication</b>	moderate to severe plaque psoriasis in adults
<b>Input window</b>	Jan. 25 to Feb. 21, 2023 @ 11:59 pm

### Have you submitted a Special Authority eForm yet?

**!** Most prescribers can submit Special Authority requests online using eForms – this includes health professionals in health authorities, private community health practices and pharmacists

**Advantages**

- Automatic adjudication for some medications
- Notifications when submissions are received
- Fields that auto-complete (e.g., prescriber information)
- Easy-to-see criteria
- Less back and forth with the SA team due to better accuracy
- SA request status viewable by patients in Health Gateway

**25%** of Special Authority requests are now being submitted online!

**Testimonials**

- “Quick and easy”
- “The drafts/save feature is very handy”





## PharmaCare Scripts

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Did you resolve an interesting pharmacy case, or do you have a question about applying a specific PharmaCare policy? Share your story or inquiry with [PharmaCareNewsletter@gov.bc.ca](mailto:PharmaCareNewsletter@gov.bc.ca) and you might see a relevant PharmaCare Script posted.

### Kiran's story: Provincial Prescription Renewal Support Service

Kiran has run out of ramipril and visits her local pharmacy. Angela, the pharmacist, notices that Kiran has no refills left on the prescription. Kiran tells Angela her prescriber has retired, and Angela confirms the prescriber is no longer registered with their regulatory college. Therefore, the prescription is invalid, and Angela cannot renew it.

To ensure continuity of care, Angela decides to provide Kiran with an emergency supply of ramipril for 14 days and submit a [Provincial Prescription Renewal Support Service](#) eForm. Angela is enrolled in the province's [Provider Identity Portal \(PidP\)](#) and so has convenient online access to the [PPRSS eForm](#).

"I am unable to renew your medication since your prescriber is no longer in practice," Angela tells Kiran. "But I can give you a 14-day emergency supply of ramipril, and I can refer you to the province's new prescription renewal support service. Within 5 days, a pharmacist or physician will phone you to go over your information and decide on the best course of action. Do I have your consent to make this referral?"

"Is there a cost?" asks Kiran.

"No cost," Angela tells her.

"That would be great!" Kiran says.

Angela fills out the eForm, entering Kiran's PHN, the medication requiring renewal, the reason for referral (Kiran's prescriber is no longer practising), Angela's pharmacy's address and Kiran's contact information—which she confirms once more with Kiran.

Angela reminds Kiran that, within 5 days, staff from the prescription renewal support team will contact her. "I recommend you don't call the pharmacy or 8-1-1 while you're waiting," she tells Kiran. "But if you have general questions about your health condition or medications, please call 8-1-1 any time. Do you have any questions?"

"If they write me a prescription, will I get it filled here?" asks Kiran.

"Yes, and we will call you when it's ready."

"That sounds great. Thanks so much for helping me."

"My pleasure," Angela says.



## February 24, 2023 Special Edition newsletter

### Plan B capitation fee increase

On March 1, 2023, PharmaCare increased the fee it pays pharmacies contracted to provide services to Plan B (Long-term Care) facilities to \$65 per month per occupied bed. This is a 50% increase over the previous fee of \$43.75.

“The new fee will help ensure continuity of care for more than 30,000 people living in long-term care facilities in B.C.,” said John Capelli, executive director of the Pharmaceutical Policy, Legislation and Engagement Branch of the Pharmaceutical, Laboratory and Blood Services Division of the BC Ministry of Health.

In 2021, several pharmacies, health authority pharmacy leads and advocacy groups told PharmaCare that the Plan B capitation fee of \$43.75, unchanged since 2010, was no longer economically viable. The fee increase is the result of PharmaCare’s review of Plan B compensation. PharmaCare will now consider expanding payment for additional clinical services that pharmacies provide to long-term care facilities.

Plan B covers the full cost of eligible prescription drugs and medical supplies and devices—such as prostheses and ostomy supplies—for people living permanently in long-term care facilities licensed under the Community Care and Assisted Living Act and hospitals licensed under Part 2 of the Hospital Act. Routine medical supplies such as needles, syringes and blood glucose test strips, are not covered. Facilities must provide these items to residents at no cost.

Facilities register with PharmaCare and contract a pharmacy to provide Plan B services. Unlike other PharmaCare plans, Plan B does not pay professional fees on each dispense. Instead, the monthly per-bed fee covers all pharmacy services.

#### Resources

- PharmaCare Policy Manual
  - [Section 7.3 Plan B \(Long-term Care\)](#)
  - [Section 8.7 Capitation Fees for Plan B \(Long-term Care\)](#)

#### Plan B by the numbers (2021-22)

- 31,769 beneficiaries
- 340 facilities
- 44 contracted pharmacies



#### Did you know?

The most common drug paid for (fully or partially) by PharmaCare in 2020-21 was ramipril, with more than 103,000 beneficiaries. Find more stats like this in [2020/2021 PharmaCare Trends](#).