BC PharmaCare Newsletter

Edition 19-005
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In this edition

TI Letter: Routine Prophylaxis with Low Molecular Weight Heparin

This Therapeutics Letter examines the evidence for routine prophylaxis of venous thromboembolism (VTE) with low molecular weight heparin, looking at a 2014 Cochrane systematic review that indicated routine prophylaxis reduced risk of deep vein thrombosis but increased risk of bleeding, without reducing all-cause mortality.

The PharmaCare Newsletter is published by the Pharmaceutical Services Division to provide information to British Columbia's health care providers.

The use of PharmaNet is not intended as a substitute for professional judgment. Information on PharmaNet is not exhaustive and cannot be relied upon as complete. The absence of a warning about a drug or drug combination is not an indication that the drug or drug combination is safe, appropriate or effective in any given patient. Health care professionals should confirm information obtained from PharmaNet, and ensure no additional relevant information exists, before making patient care decisions.

MIFEGYMISO® DISTRIBUTION

Effective August 27, 2019, the BC Centre for Disease Control (BCCDC) will no longer distribute Mifegymiso®. Eligible patients will receive 100 percent coverage for Mifegymiso under the new PharmaCare Plan Z (Assurance).

B.C. pharmacies can return to ordering Mifegymiso through their regular distributors. Rural, remote and high-volume pharmacies, as well as all pharmacies maintaining stock on hand to minimize patient wait times, should assess demand and plan orders accordingly before the August 27, 2019, transition date.

If you need to order Mifegymiso before August 27, please continue to order from BCCDC, or explore transfer options with neighbouring pharmacies. The BCCDC will not accept orders for Mifgymiso after August 27, but you may use stock from BCCDC after that date. The PIN for BCCDC stock claims will remain active until the latest expiry date on product ordered from BCCDC, as of August 27. Please prioritize dispensing of any remaining BCCDC stock you may have.

For claims for reimbursement under Plan Z, please use the DIN below.

DIN	PRODUCT	BENEFIT UNDER	EFFECTIVE DATE
02444038	mifepristone-misoprostol (Mifegymiso®)	Plan Z	August 27, 2019

PHARMACARE PLAN Z: ASSURANCE

PharmaCare has introduced a new plan, Assurance (Plan Z). This plan provides full coverage for all B.C. residents with active Medical Services Plan (MSP) coverage, for any drug on the Plan Z formulary.

An exception process will be in place for B.C. residents who have completed their MSP enrolment, but have not reached the end of the mandatory three-month waiting period for MSP coverage. PharmaCare will communicate details of the exception process and provide a link to the relevant form in an upcoming issue of the PharmaCare newsletter.

As of August 27, 2019, the Plan Z formulary will contain one drug, mifepristone-misoprostol (Mifegymiso®).

BIOSIMILARS PHASE TWO: GI PATIENT SUPPORT FEE FOR PHARMACISTS

Phase Two of the Biosimilars Initiative, which affects patients with gastrointestinal (GI) conditions, is likely to be announced mid-August. PharmaCare is offering a GI Biosimilar Patient Support Fee for pharmacists who can help notify GI patients currently taking the Remicade® brand of infliximab of the switch to a biosimilar version of their medication. The Support Fee is a $15 per patient payment in recognition of the additional effort by pharmacies to support affected patients. The fee is submitted as a **PIN (66128199)** in PharmaNet, to be paid monthly in accordance with the usual monthly payment schedule. Note this is a separate PIN from the Phase One PIN.

Only one GI Patient Support Fee can be claimed for a PHN. The fee code will be available from now until the end of the Phase Two switch period (TBA).

SPECIAL AUTHORITY: ACCELERATED ADJUDICATION

PharmaCare Special Authority now offers accelerated, partly automated adjudication for certain Special Authority (SA) coverage requests, via the interactive prescriber info line. Currently, this service is available only for SA requests for first-line angiotensin receptor blockers (candesartan, losartan, telmisartan and valsartan), first-line proton-pump inhibitors (rabeprazole and pantoprazole Mg.), and empagliflozin.

Prescribers and pharmacists may call the prescriber info line at 1 877 657-1188, select "automated requests" (option #2), and enter prescriber and patient information from a touch-tone phone. Average expected turnaround time for entry of an approved SA into PharmaNet is approximately one hour, if received during regular work hours (8AM-4:30PM Monday to Friday, except holidays). SA staff will send the actual adjudication response via fax, typically on the same day.

REMINDER: COLLABORATIVE PRESCRIBING AGREEMENTS

Collaborative Prescribing Agreements (CPAs) are in place for certain limited coverage drugs. These agreements permit automatic coverage for a given Limited Coverage drug, based on the specialty of the prescriber, and tied to the prescriber's college ID. General practitioners, or prescribers with other specialties, must submit an SA request for these drugs, as with any other limited coverage drug. CPAs are used to make sure that when certain drugs are prescribed by knowledgeable specialists, patients do not need to wait for coverage. Typically, the existence of a CPA denotes a degree of urgency for patients with respect to initiating or continuing a drug therapy.

General practitioners may rewrite specialists' prescriptions for patients; if this occurs for a patient who had coverage for a drug via a CPA, when a pharmacist enters the new prescription, no SA will be apparent. If a patient had been receiving PharmaCare coverage for a limited coverage drug, but does not upon receipt of a new prescription, please check the patient's PharmaNet profile to see if the drug had previously been prescribed by a specialist under a CPA. You may then need to contact the specialist to obtain a new prescription.

REMINDER: BCSA CODES FOR THIRD-PARTY (PRIVATE) INSURERS

Patients may no longer require PharmaCare Confirmation of Coverage letters, generated by Health Insurance BC, or copies of their completed Special Authority (SA) form(s) to obtain coverage from private insurers. Specific product coverage and/or SA information should be included on the patient's prescription receipt, in the BCSA code. (Note: some patients may want copies of completed SA forms to determine the length of the approval period.)

Most B.C. pharmacies have now upgraded their software to provide the BCSA codes on pharmacy receipts, and private insurers are preferentially relying on this enhanced functionality. Patients should be instructed to use their pharmacy receipt as confirmation of coverage, if required by their private insurer.

If your pharmacy does not currently print BCSA code information on prescription receipts, please talk to your software vendor.

The Ministry has collaborated with some private insurers to enable them to use the BCSA codes in real-time as part of the PharmaNet online claim adjudication process. Private insurers using this system receive the BCSA codes when the

claim is submitted to PharmaNet. Patients do not need to submit receipts or other documentation to receive private coverage in these cases.

Interpreting the BCSA Code

BCSA codes provide information on both the item and PharmaCare coverage, as detailed in the table below.

BCSA CODE	CODE INTERPRETATION	SA	RDP	LCA	BENEFIT
BCSA0000	Item is not a PharmaCare benefit under patient's plan(s). Patient does not have SA approval for coverage.	N	N	N	N
BCSA0002	Patient is not eligible for coverage (not a B.C. resident).	N	N	N	Not present
BCSA0001	Item is a benefit for this patient; it does not require SA approval for full coverage.	N	N	N	Y
BCSA0011	Item is a benefit for this patient but is only partially covered under the LCA Program. Patient does not have SA approval for full coverage under the LCA Program.	N	N	Y	Y
BCSA0101	Item is a benefit for this patient but is only partially covered under the RDP. Patient does not have SA approval for full coverage under the RDP.	N	Y	N	Y
BCSA1100	Patient has SA approval (item would not be a benefit under patient's PharmaCare plan(s) without SA approval). Coverage has been reduced to RDP pricing. Patient does not have SA approval for full coverage under the RDP.	Y	Y	N	N
BCSA1010	Patient has SA approval (item would not be a benefit under patient's PharmaCare plan(s) without SA approval). Coverage has been reduced to LCA pricing. Patient does not have SA approval for full coverage under the LCA Program.	Y	N	Y	N
BCSA1011	Patient has SA approval. (This code is used only in circumstances when some coverage would have been available to the patient without SA approval). Coverage has been reduced to LCA pricing. Patient does not have SA approval for full coverage under the LCA Program.	Y	N	Y	Y
BCSA1000	Patient has SA approval (item would not be a benefit under patient's PharmaCare plan(s) without SA approval).	Y	N	N	N
BCSA1001	Patient has SA approval. (This code is used only in circumstances when some coverage would have been available to the patient without SA approval).	Y	N	N	Y

YOUR VOICE: PATIENT INPUT NEEDED FOR DRUG DECISIONS

The feedback and experiences of patients, caregivers, and patient groups is integral to B.C.'s drug review process.

The Ministry depends on pharmacies and practitioners to help connect patients and their caregivers with opportunities to provide input. If you have a patient who is currently taking one of the drugs under review or who has the condition the new drug treats, please encourage them to visit **http://www.gov.bc.ca/BCyourvoice**.

DRUG	patisiran (ONPATTRO™)
INDICATION	Hereditary transthyretin-mediated amyloidosis with polyneuropathy
INPUT WINDOW	July 3–July 31, 2019

DRUG	inotersen (TEGSEDI™)
INDICATION	Hereditary transthyretin amyloidosis
INPUT WINDOW	July 3–July 31, 2019

DRUG	risankizumab (SKYRIZI™)
INDICATION	Plaque psoriasis
INPUT WINDOW	July 3–July 31, 2019

NON-BENEFITS

The following drug has been reviewed and will not be added as a PharmaCare benefit.

DIN	DRUG
02474565	pegfilgrastim (LAPELGA™)