BC PHARMACARE NEWSLETTER

Edition 24-007: July 2024

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
www.gov.bc.ca/pharmacareprescribers
www.gov.bc.ca/pharmacaredeviceproviders

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pad Refills
Your dose of drug information in between sessions

Q: Why does a recent guideline recommend against the use of DPP4 inhibitors such as linagliptin (Trajenta®) in people with type 2 diabetes?

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!

BRITISH COLUMBIA

Imported carbamazepine tablets added as temporary benefit

Effective June 11, 2024, US-labelled carbamazepine extended-release 200 mg and 400 mg tablets were temporarily added as PharmaCare regular benefits.

Health Canada has permitted the exceptional, temporary sale of US-labelled carbamazepine extended-release tablets, imported by Septa Pharmaceuticals Inc., during the shortage of Canadian-marketed carbamazepine controlled release tablets.

The US products have the same active ingredient, strengths, dosage form (expressed as "extended release" tablets rather than "controlled release") and route of administration as the Canadian products. However, the US products have a different formulation, and their bioequivalence to the Canadian products has not been confirmed.

Health Canada recommends enhanced monitoring of patients taking the imported drug

Carbamazepine has a narrow therapeutic index. Interchanging between non-bioequivalent products with a narrow therapeutic index may result in patients receiving minor variations in drug concentration, which may affect the effectiveness and/or safety of the drug.

US products also differ from the Canadian-market versions in their labelling (English-only), physical appearance, and non-medicinal ingredients.

Information for pharmacies

To dispense US-labelled carbamazepine extended-release tablets

- Use PIN 09858341 for 200 mg tablets
- Use PIN 09858342 for 400 mg tablets

Some product may be available from select distributors in B.C. Direct order is available from Septa Pharmaceuticals Inc.

- Email: orders@septapharma.com or
- Phone: 1-905-564-5665

Resources

- Health Canada safety alert: Importation of USA-authorized carbamazepine extended-release tablets
- Health Canada supply notice: Carbamazepine controlled release tablets
- Canadian Pharmacists Association: Managing current drug shortages
- Canadian League Against Epilepsy and Canadian Pharmacists Association: Communication letter
- BC PharmaCare Drug shortages

Changes to PharmaCare coverage for Prolastin®-C and transition to Glassia®

On **July 15, 2024**, BC PharmaCare will delist the alpha-1 proteinase inhibitor Prolastin-C, as Canadian Blood Services (CBS) has added the alpha-1 proteinase inhibitor Glassia to its formulary.

Prolastin-C will no longer be covered for new patients. Existing Prolastin-C patients will have PharmaCare coverage for up to 6 months, to **January 14, 2025**, to allow time to meet with their prescribers and transition to Glassia.

Glassia is not dispensed through community pharmacies. CBS coordinates patient pick-up at transfusion medicine laboratories.

PharmaCare has asked prescribers to transition their existing Prolastin-C patients to Glassia as soon as possible. Pharmacists are encouraged to advise Prolastin-C patients to meet with their prescribers.

To manage Prolastin-C supply over the coming months, pharmacies should be aware that:

- Prolastin-C will not be prescribed to new patients after July 15, 2024
- Prolastin-C dispensed after January 14, 2025, will not be covered by PharmaCare, and
- The manufacturer may not guarantee supply for the entire transition period

Transition timeline		
July 15, 2024	**July 15, 2024, to January 14, 2025**	**January 15, 2025**
PharmaCare stops covering Prolastin-C for new patients. Existing patients get transitional coverage for up to 6 months.	New patients are prescribed Glassia only, available through CBS. Pharmacists encourage existing Prolastin-C patients to meet with prescribers to transition to Glassia.	Prolastin-C is no longer covered for B.C. patients.

Resources

- Prolastin-C and Glassia – new web page for prescribers
- Glassia implementation FAQ (CBS) (PDF, 304KB)
- BC Patient Support Program Glassia Pathway (PDF, 442KB)

Pharmacists to be referring practitioners for lab services

Effective August 30, 2024, pharmacists will be recognized as referring practitioners in the Laboratory Services Regulation under the Laboratory Services Act, a change that will allow them to order certain laboratory tests for medication management. The regulation change will equip pharmacists with additional clinical tools to provide medication management services.

The plan for enabling and onboarding pharmacists will be communicated soon. Implementation will start in some hospital inpatient settings on August 30, with expansion to community settings in the following months.

The College of Pharmacists of BC (CPBC) is creating standards, limits and conditions for ordering, receiving and interpreting laboratory tests. They will communicate these to registrants.

The pharmacist laboratory services referring schedule is viewable in Ministerial Order (M198-2024).

Pharmacists will be required to complete a free hour-long training module before they can acquire a Practitioner ID, which will be needed to order laboratory tests.

This mandatory training will be offered through UBC Continuing Pharmacy Professional Development (CPPD), along with optional accredited clinical education on interpreting laboratory results.

Please note that no specific fees will be available for ordering laboratory tests. The new authority is intended to enhance pharmacists' ability to perform comprehensive patient assessments for drug therapy management. Pharmacists may continue to submit claims for clinical services fees or medication reviews in accordance with the PharmaCare Policy Manual.

Be sure you are subscribed to the PharmaCare Newsletter so you do not miss updates on this exciting announcement, and visit the new webpage Pharmacists referring lab tests, which will also be a key resource as this initiative progresses.

For any questions about pharmacist lab ordering, please email PCI@gov.bc.ca

Resources

- Pharmacists referring lab tests (new web page)
- Laboratory Services Regulation
- Ministerial Order (M198-2024)

Webinar: B.C. provincial pharmacy initiatives update

The Ministry of Health, the College of Pharmacists of BC and the BC Pharmacy Association are jointly hosting a webinar for B.C. pharmacists about their various initiatives that will enhance pharmacy practice in B.C., including:

- Pharmacist lab ordering (MoH)
- Provincial Prescription Management (i.e., electronic prescription management in PharmaNet) (MoH)
- Changes to Professional Practice Policy 58: Adapting a Prescription (CPBC)
- Updates to the OAT Compliance and Management Program for Pharmacy (BCPhA)
- Other upcoming Ministry initiatives (MoH)

The event will be held online on Thursday, July 25, from 6 pm to 8 pm. Registration and attendance is free for all pharmacists.

- Register online: Webinar: BC Provincial Pharmacy Initiatives Update

Please note that BCPhA is supporting registration for the event. BCPhA membership is NOT required. However, a BCPhA account is necessary, and can be created by any pharmacist with valid College registration.

Managing PharmaNet access when an employee leaves

When pharmacy staff leave employment, the pharmacy must make sure that no unauthorized access to PharmaNet by the former employee occurs or appears to occur at their pharmacy.

The pharmacy will need to:

- Remove that person's access to PharmaNet immediately
- Ensure a current employee with approval from the Ministry of Health to use PharmaNet (i.e., approved in PRIME) is identified on all automatic processes where the departing employee was identified (e.g., batch submissions to PharmaNet)

If the pharmacy upgrades a system or restores information from backup files, they should make sure the former employee's credentials have not been reactivated.

Pharmacies are responsible for ensuring no unauthorized access to PharmaNet occurs at their pharmacy. Read more at Pharmacy access to PharmaNet.

Resources

- Pharmacy access to PharmaNet

Patient information sheet refresh with complete translations

As part of ongoing efforts to provide easy-to-understand resources for B.C. residents and health professionals, the PharmaCare communications team has updated the PharmaCare patient information sheets.

Each information sheet is now available in 15 languages: Arabic, Chinese Simplified and Traditional, English, Filipino (Tagalog), French, Hindi, Japanese, Korean, Persian, Punjabi, Russian, Spanish, Ukrainian and Vietnamese.

Pharmacists and pharmacy staff are encouraged to:

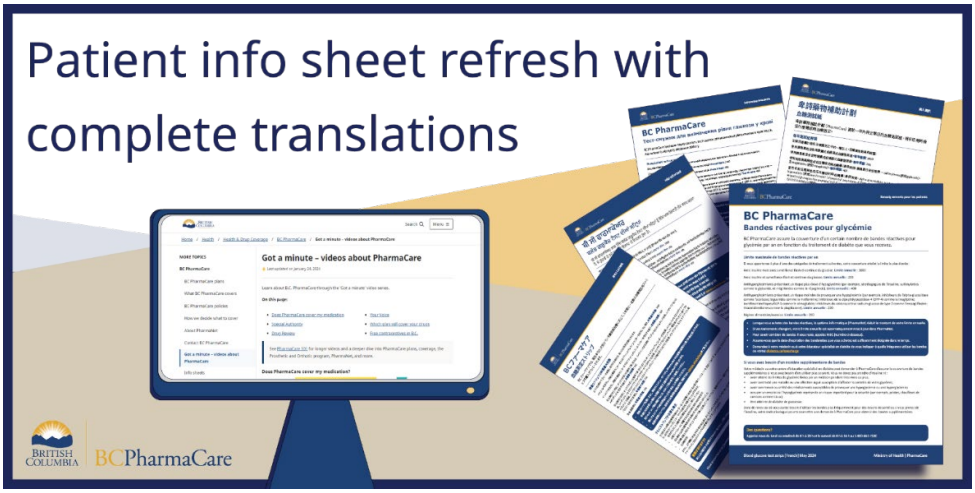
- Print off the information sheets for clients to help them understand PharmaCare coverage, and
- Post the new PharmaCare information sheet QR matrix so clients can view the info sheets on their mobile phones

The sheets are also a great resource for new staff to learn about PharmaCare and explain the public program to clients.

As part of the updates, the six Fair PharmaCare-related info sheets have been consolidated into one, allowing for a single, straightforward, and accessible resource for all clients. Additionally, a new information sheet explains pharmacy services in B.C., including prescription adaptations, the minor ailment and contraception service (MACS), and drug administrations.

The info sheets are now:

- Fair PharmaCare Plan
- Contraceptives
- Blood glucose test strips
- Insulin pumps
- Pharmacy services
- Get help quitting tobacco
- Palliative care benefits
- Special Authority
- Prosthetics and orthotics
- Offloading devices
- Plagiocephaly helmet coverage



Is there a topic we're missing? What information sheet would help you support your clients? Send ideas to: PharmaCareInfo@gov.bc.ca

TI–BCCDC Letter: Cefuroxime safe for penicillin-allergic patients

The Therapeutics Initiative (TI) collaborated with the BC Centre for Disease Control (BCCDC) to provide dentists with evidence-based advice to treat infections in patients who report penicillin allergies.

Dentists are advised that clindamycin should not be used routinely for prophylaxis or management of dental infections because it is more strongly associated with the development of C. difficile colitis compared to other antibiotics, and that cefuroxime is a safe option for most patients, even if they have a true penicillin allergy. Cross-reactivity depends on the similarity of side chain structures, and cefuroxime's side chain does not resemble that of amoxicillin or penicillin.

Visit TI: Cefuroxime is a safe alternative for penicillin allergic patients to read the letter.

Resources

- TI: Cefuroxime is a safe alternative for penicillin allergic patients
- Bugs & Drugs – Dental

Survey seeks pharmacist input on contraception prescribing

How do pharmacists feel about prescribing for contraception?

Researchers from UBC's Faculty of Pharmaceutical Sciences and the Contraception and Abortion Research Team (CART) are conducting a study to understand pharmacist perspectives and experiences of prescribing for contraception, and the factors that facilitate and limit their providing the service.

Visit ACT-Pharm III survey to learn more and to participate in a survey.

The survey will be available until August 30, 2024, at 11:59 pm. Participation is voluntary. Participants receive a $20 e-transfer as a token of appreciation.

The study's principal investigator is Dr. Laura Schummers, an assistant professor of health outcomes in the Faculty of Pharmaceutical Sciences. If you have any questions or encounter issues with the survey, please contact pharmcontraception.survey@ubc.ca.

Resources

- ACT-Pharm III survey

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
April 2024	July 2, 2024

Pharmacies are paid $75 for each case of RAT kits distributed, and pharmacists are reminded to enter the correct PIN for each case of RAT kits distributed.

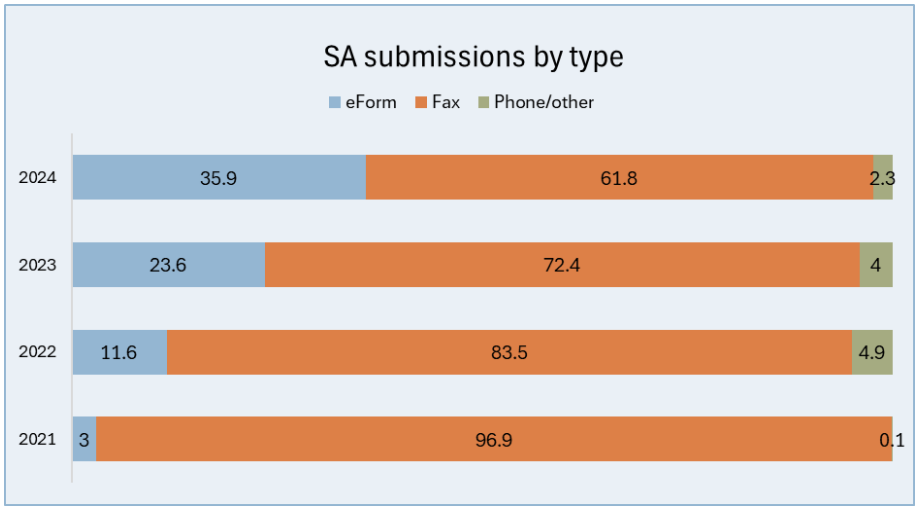
- BTNX: 66128325
- Artron: 66128338

Resources

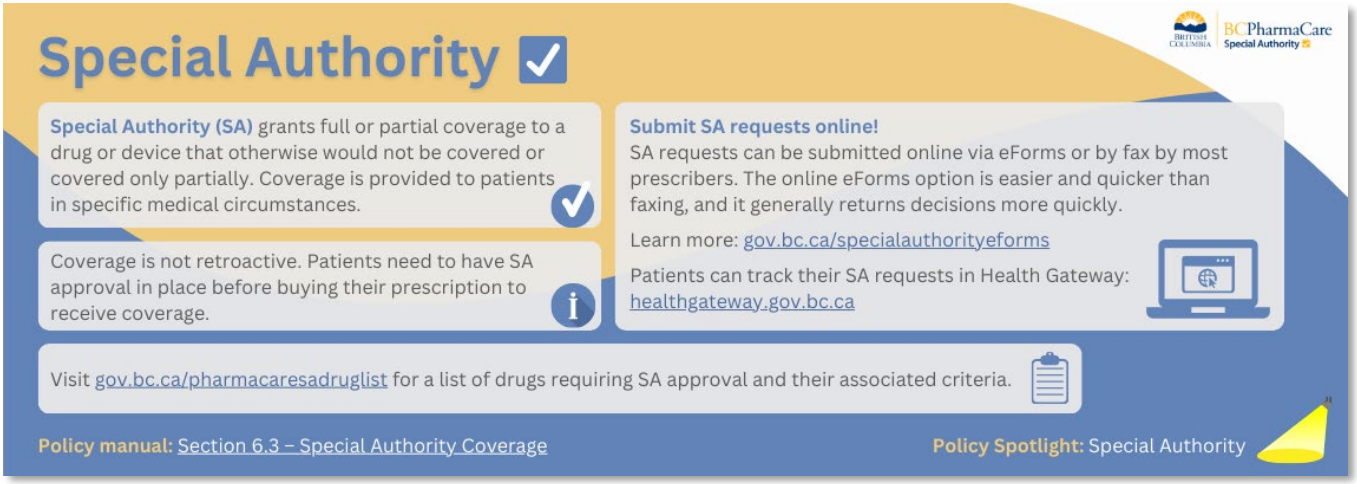
- 2024 PharmaCare Provider Payment Schedule (PDF, 165KB)

Prescribers embrace Special Authority eForms

Prescribers and pharmacists are submitting Special Authority requests online through eForms and leaving the slower ways behind — reducing approval wait times for their patients. Get on board! Visit Special Authority eForms to learn about eForms and sign up.



Policy Spotlight: Special Authority



Resources

- Section 6.3 – Special Authority Coverage
- Special Authority (SA)
- Special Authority eForms
- Drugs that require Special Authority

Formulary and listing updates

Regular benefits: budesonide rectal foam (Uceris™)

PharmaCare has added the following regular benefit coverage item to the PharmaCare drug list.

Drug name	budesonide rectal foam (Uceris™)		
Date	June 18, 2024		
Indication	For the induction of remission in adult patients with active mild to moderate distal ulcerative colitis.		
DIN	02498057	**Strength & form**	2 mg/actuation
Special notes	To ensure the efficient and accurate adjudication of claims in PharmaNet, pharmacies must enter claims for Uceris using per number of actuations.		

Limited Coverage benefits: etanercept (Rymti®), adalimumab biosimilars (Abrilada®)

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

Drug name	etanercept biosimilar (Rymti®)		
Date	June 25, 2024		
Indication	• Moderately to severely active rheumatoid arthritis (RA) • Reducing signs and symptoms of moderately to severely active polyarticular juvenile idiopathic arthritis (pJIA) in patients aged 4 to 17 years • Inhibiting the progression of structural damage of active arthritis, and improving physical function in adult patients with psoriatic arthritis (PsA) • Reducing signs and symptoms of active ankylosing spondylitis (AS) • Treatment of chronic moderate to severe plaque psoriasis (PsO) in adults		
DINs	02530295 02530309	**Strength & form**	50 mg/mL solution for injection in prefilled syringe 50 mg/mL solution for injection in prefilled auto-injector

New coverage indication for adalimumab biosimilars

Drug name	adalimumab biosimilars (Abrilada®, Amgevita®, Hadlima®, Hulio®, Hyrimoz®, Idacio®, Simlandi™, Yuflyma®)		
Date	July 3, 2024		
Indication	For the treatment of active non-infectious uveitis for patients 2 years and older.		
DINs	Multiple DINs	**Strength & form**	Multiple dose strengths and forms.

New dosage form for the adalimumab biosimilar (Abrilada®)

Drug name	adalimumab biosimilar (Abrilada®)		
Date	July 3, 2024		
Indication	For the treatment of rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis, moderate to severe plaque psoriasis, moderate to severe active polyarticular juvenile idiopathic arthritis for patients 2 years and older, adult patients with active moderate to severe hidradenitis suppurativa, moderate to severe active Crohn's disease or fistulizing Crohn's disease, moderate to severe ulcerative colitis, and active non-infectious uveitis for patients 2 years and older.		
DINs	02511061	**Strength & form**	20 mg/0.4 mL pre-filled syringe

New dosage forms for the adalimumab biosimilar (Hyrimoz®)

Drug name	adalimumab biosimilar (Hyrimoz®)		
Date	July 3, 2024		
Indication	For the treatment of rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis, moderate to severe plaque psoriasis, moderate to severe active polyarticular juvenile idiopathic arthritis for patients 2 years and older, adult patients with active moderate to severe hidradenitis suppurativa, moderate to severe active Crohn's disease or fistulizing Crohn's disease, moderate to severe ulcerative colitis, and active non-infectious uveitis for patients 2 years and older.		
DINs	02542358 02542366 02542323 02542331 02542315	**Strength & form**	80 mg/0.8 mL pre-filled syringe 80 mg/0.8 mL autoinjector pen 40 mg/0.4 mL pre-filled syringe 40 mg/0.4 mL autoinjector pen 20 mg/0.2 mL pre-filled syringe

Discontinuation: Evolocumab 120 mg/mL (420 mg/3.5 mL) automated mini-doser (Repatha® AMD)

Amgen Canada Inc. is discontinuing 120 mg/mL (420 mg/3.5 mL) automated mini-doser (Repatha® AMD) in all countries, including Canada. Evolocumab remains available in 140 mg/mL SureClick® autoinjector form (DIN: 02446057).

Drug name	evolocumab injection (Repatha®)		
Date effective	The inventory is anticipated to be depleted in July 2024.		
Indication	For the treatment of heterozygous familial hypercholesterolemia (HeFH) as an adjunct to maximally tolerated HMG-CoA reductase inhibitors (statins) therapy in adult patients who are unable to reach target low density lipoprotein cholesterol (LDL-C) levels.		
DIN	02459779	**Strength & form**	120 mg/mL (420 mg in 3.5mL AMD with prefilled cartridge)

Health professionals are encouraged to transition patients to the still available 140 mg/mL SureClick® autoinjector, with a dose frequency of every two weeks.

Delisting: prednisolone sodium phosphate (Pediapred®)

On March 1, 2024, prednisolone sodium phosphate (Pediapred®) 5 mg/5 mL, oral liquid 120 mL bottle, was discontinued, with the last lot expiring on July 31, 2024.

Drug name	prednisolone sodium phosphate (Pediapred®)		
Effective date	August 1, 2024		
Indication	Corticosteroids, systemic.		
DIN	02230619	**Strength & form**	5 mg/5 mL, oral liquid 120 mL bottle

PharmaCare will be delisting Pediapred on August 1, 2024; however, pms-prednisolone (prednisolone sodium phosphate) 5 mg/5 mL oral solution remains a regular benefit under the PharmaCare formulary and will remain available.

Correct Quantities policy change for filgrastim (Grastofil® and Nyposi®)

Effective August 2, 2024, PharmaCare will change the correct quantities policy for the filgrastim biosimilars – Grastofil and Nypozi. To ensure the efficient and accurate adjudication of claims in PharmaNet, pharmacies must now enter claims for Grastofil and Nypozi using number of prefilled syringes. There are no changes to the correct quantities policy for filgrastrim (Nivestym®) and pharmacies can continue to enter claims for Nivestym using number of syringes or vials.

Drug	Dosage	DINs	Old Correct Quantities policy	New Correct Quantities policy
Filgastrim biosimilar (Grastofil)	300 mcg/0.5 mL syringe	02441489	Volume in millilitres	Number of prefilled syringes
Filgastrim biosimilar (Grastofil)	480 mcg/0.8 mL syringe	02454548	Volume in millilitres	Number of prefilled syringes

Drug	Dosage	DINs	Old Correct Quantities Policy	New Correct Quantities Policy
Filgastrim biosimilar (Nypozi)	300 mcg/0.5 mL syringe	02520990	Volume in millilitres	Number of prefilled syringes
Filgastrim biosimilar (Nypozi)	480 mcg/0.8 mL syringe	02521008	Volume in millilitres	Number of prefilled syringes

Price reductions: filgrastim (Nivestym®) & (Grastofil®)

Effective August 2, 2024, the prices for the following products will be reduced.

Prices include 8% markup-up.

Drug name	filgrastim (Nivestym®)	Strength & form	Current price per syringe ($)	Reduced price per syringe ($)
Date effective	August 2, 2024			
DINs	02485575	300 mcg/0.5 mL syringe	155.8548	149.6206
	02485583	480 mcg/0.8 mL syringe	249.3720	239.3971
	02485591	300 mcg/1 mL vial	155.8548	149.6206
	02485656	480 mcg/1.6 mL vial	249.3720	239.3971

Drug name	filgrastim (Grastofil®)	Strength & form	Current price per syringe ($)	Reduced price per syringe ($)
Date effective	August 2, 2024			
DINs	02441489	300 mcg/0.5 mL syringe	155.8548	149.6210
	02454548	480 mcg/0.8 mL syringe	249.3720	239.3928

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
elexacaftor-tezacaftor-ivacaftor and ivacaftor (Trikafta®)	For the treatment of cystic fibrosis (CF) in children ages 2+.	June 26 to July 23 at 11:59 pm
baricitinib (Olumiant®)	For the treatment of severe alopecia areata (AA) in adults.	June 26 to July 23 at 11:59 pm

Did you know?

PharmaCare has patient information sheets available in 15 languages. Visit PharmaCare patient information sheets for more information.