



BC PharmaCare Newsletter

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FAIR PHARMACARE ONLINE REGISTRATION UNAVAILABLE AUGUST 3, 2014

The Fair PharmaCare online registration system will not be available **Sunday, August 3, 2014**, from **6AM to mid-evening**. This is due to planned maintenance on one of the system’s supporting applications.

As phone registration is not normally available on Sundays or statutory holidays, please advise patients needing Fair PharmaCare coverage to register:

- online before or after the Sunday maintenance window, or
- by phone during Health Insurance BC’s normal hours of operation.

From Vancouver, call **604-683-7151** | From the rest of B.C., call toll-free **1-800-663-7100**

- Monday to Friday, 8:00 a.m. to 8:00 p.m. (except statutory holidays)
 - Saturday 8:00 a.m. to 4:00 p.m. (except statutory holidays)

The use of PharmaNet is not intended as a substitute for professional judgement. 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 for any given patient. Health care professionals should confirm information obtained from PharmaNet, and ensure no additional relevant information exists, before making patient care decisions.

ESTABLISHING A PHARMANET KEYWORD FOR A PATIENT

A recent [announcement](#) about a PharmaNet security breach may have increased the number of patients asking to have a keyword applied to their PharmaNet record.

Pharmacists receiving such requests should consult the PharmaCare Policy Manual, Section 9.6.

The PharmaCare Policy Manual provides full information on the requirements for the creation, change and deletion of keywords, as well as for the safe storage of keywords.

Additional information is available in PharmaNet Bulletin 10-006 available at www.health.gov.bc.ca/pharmacare/bulletin/10006bul.pdf.

Pharmacists who need more information on specific procedures for their software should contact their software vendor.



NEED THE CORRECT UNIT OF MEASURE TO ENTER A CLAIM?

Product Name	Quantity	Unit of Measure
Albuterol Inhaler	200	mg
Albuterol Inhaler	200	mcg
Albuterol Inhaler	200	g
Albuterol Inhaler	200	kg
Albuterol Inhaler	200	lb
Albuterol Inhaler	200	oz
Albuterol Inhaler	200	fl oz
Albuterol Inhaler	200	ml
Albuterol Inhaler	200	l
Albuterol Inhaler	200	cl
Albuterol Inhaler	200	dl
Albuterol Inhaler	200	gal
Albuterol Inhaler	200	qt
Albuterol Inhaler	200	pt
Albuterol Inhaler	200	cup
Albuterol Inhaler	200	tblsp
Albuterol Inhaler	200	tbsp
Albuterol Inhaler	200	teaspoon
Albuterol Inhaler	200	spoon
Albuterol Inhaler	200	pinch
Albuterol Inhaler	200	dash
Albuterol Inhaler	200	drop
Albuterol Inhaler	200	gallon
Albuterol Inhaler	200	quart
Albuterol Inhaler	200	pint
Albuterol Inhaler	200	cup
Albuterol Inhaler	200	fluid ounce
Albuterol Inhaler	200	tablespoon
Albuterol Inhaler	200	teaspoon
Albuterol Inhaler	200	pinch
Albuterol Inhaler	200	dash
Albuterol Inhaler	200	drop

Visit our website for a detailed list of the correct quantities to use when submitting claims to PharmaCare.

The list includes many commonly prescribed injectable medications and other products.

To access the list, go to [Correct Quantities for PharmaCare Claim Submissions](#).

To request the addition of a specific product to this online list, send an e-mail to pharma@gov.bc.ca.

LOOKING FOR INFORMATION FOR PHARMACISTS & MEDICAL SUPPLIERS?

Our Pharmacists and Medical Suppliers web page lists the information most often accessed by these professionals.

To access the page:

- go directly to www.health.gov.bc.ca/pharmacare/suppliers.html , or
- from the left-hand menu of our home page at www.health.gov.bc.ca/pharmacare, under **Information for Health Care and Industry Professionals**, select **Pharmacies and Medical Suppliers**.

PERSONAL HEALTH NUMBERS (PHNs)—GUARDING AGAINST ERRORS

In recent months, pharmacies have been assigning an increasing number of duplicate PHNs. The following problems are also associated with Pharmacy-assigned PHNs:

- First name missing
- First name or surname typed incorrectly
- First name and surname reversed
- Invalid name (e.g., name of the pharmacy instead of the patient or a first name of “Dr.”)
- Invalid characters, such as punctuation, in the first name (e.g., “Adler, Susan.R”)
- PHN issued for an animal
- PHN assigned for an office use medication

Although the Ministry of Health contacts pharmacies for accurate information and resolves these problems as quickly as possible, when the volume of errors increases, corrections may be delayed.

Please help prevent these errors. Whenever you assign a new PHN:

- Get proper identification from the patient.
- Perform a **thorough** search to make sure the patient does not already have a PHN by using the tips in the [PHN Quick Reference Card](#).

Note that a visitor to the province may have had a PHN assigned during an earlier visit. A new resident may have had a PHN during an early period of residence in the province.

- Compare the spelling of **both** the first and last name with the spelling on the patient's identification.
- Type carefully and verify that the name you have entered is accurate.
- Do not add punctuation in the name field.
- Never assign a PHN to an animal.
- Do not create a PHN for your pharmacy—for office use medications, use your O-Med PHN.

An accurate PHN ensures that a patient's correct, complete and up-to-date health information (including medication history) is available to all B.C. health providers.

It also provides the correct demographic information needed by provincial ministries, health authorities, hospitals and clinics, the BC Cancer Agency, etc., to direct health resources where they are needed most.

BENEFITS

Coverage Changes—Dipeptidyl Peptidase-4 (DPP-4) Inhibitors Used to Treat Type 2 Diabetes

Effective August 5, 2014, PharmaCare is adjusting its coverage of some DPP-4 inhibitor drugs:

- **Sitagliptin** (Januvia®) and **sitagliptin-metformin** (Janumet®) will no longer be covered for patients not already taking this medication.
- Three new drugs—**linagliptin-metformin** (Jentadueto™), **saxagliptin** (Onglyza®), and **saxagliptin-metformin** (Kombiglyze™)—will be covered as Limited Coverage benefits.
- Linagliptin (Trajenta®) will continue to be a Limited Coverage benefit.
- Coverage of sitagliptin and sitagliptin-metformin will end for all patients on February 5, 2015. Patients can choose to switch to a PharmaCare-covered DPP-4 inhibitor.

Within six months (that is, by February 5, 2015):

- Patients currently taking sitagliptin or sitagliptin-metformin who wish to retain PharmaCare coverage will need to switch to a PharmaCare-covered DPP-4 inhibitor.
- These patients will have automatic Special Authority coverage of linagliptin and saxagliptin products; physicians do not need to submit a request for this coverage for these patients.
- Coverage of sitagliptin and sitagliptin-metformin will end for all patients on **February 5, 2015**.
- If a patient is unable to tolerate both linagliptin and saxagliptin, reimbursement for sitagliptin will be considered on an exceptional basis through the Special Authority process based on the specific circumstances of the patient.

Patients switching to a new DPP-4 inhibitor drug

Physicians are being advised that patients can stop taking sitagliptin and start a different DPP-4 inhibitor drug immediately.

Coverage criteria for linagliptin and saxagliptin

Linagliptin and saxagliptin products will be subject to the same Special Authority criteria as the existing benefit, linagliptin (Trajenta®), that is, they must:

- be administered as part of combination treatment of type 2 diabetes mellitus when insulin NPH is not an option, and
- after inadequate glycemic control on maximally tolerated doses of dual therapy of metformin and a sulfonylurea.

Medication Costs

If a patient chooses to continue using sitagliptin, the patient or their other insurer will be responsible for the full cost of the drug (at least \$1,150 annually).

As always, actual reimbursement of any drug is subject to the rules of a patient's PharmaCare plan, including any annual deductible requirement. Retroactive coverage cannot be provided for prescriptions filled before Special Authority approval is in place.

Further Information for Patients and Pharmacists

To assist you in informing patients of the change, **patient information sheets have been mailed to all community pharmacies**. Endocrinologists and general practitioners have been advised by letter.

For detailed criteria, as well as prescriber and patient information sheets, on **August 5, 2014**, visit www.health.gov.bc.ca/pharmacare/sa/saindex.html.

Limited Coverage Drug Program Benefits

Effective **August 5, 2014**, the following products will be eligible benefits under the Limited Coverage Program—by Special Authority only—for Fair PharmaCare and Plans B, C, and F. For the Special Authority criteria, please visit the [Special Authority Information](http://www.health.gov.bc.ca/pharmacare) page on the PharmaCare website at www.health.gov.bc.ca/pharmacare.

DIN	DRUG NAME	PLAN G	PLAN P
02403250	linagliptin-metformin (Jentadueto) 2.5 mg/500 mg tablet	N	N
02403269	linagliptin-metformin (Jentadueto) 2.5 mg/850 mg tablet	N	N
02403277	linagliptin-metformin (Jentadueto) 2.5 mg/1000 mg tablet	N	N
02375842	saxagliptin (Onglyza) 2.5 mg tablet	N	N
02333554	saxagliptin (Onglyza) 5 mg tablet	N	N
02389169	saxagliptin-metformin (Komboglyze) 2.5 mg/500 mg tablet	N	N
02389177	saxagliptin-metformin (Komboglyze) 2.5 mg/850 mg tablet	N	N
02389185	saxagliptin-metformin (Komboglyze) 2.5 mg/1000 mg tablet	N	N

Non-Benefits

The following products have been reviewed and will not be added as benefits under PharmaCare.

DIN	DRUG NAME
02388839	sitagliptin (Januvia) 25 mg tablet
02388847	sitagliptin (Januvia) 50 mg tablet
02416794	sitagliptin-metformin (Janumet XR) 50 mg/1000 mg extended-release tablet

Changes to PharmaCare Benefit Status

Effective February 5, 2015, the following will no longer be eligible PharmaCare benefits.

DIN	DRUG NAME
02303922	sitagliptin (Januvia) 100 mg tablet
02333856	sitagliptin-metformin (Janumet) 50 mg/500 mg tablet
02333864	sitagliptin-metformin (Janumet) 50 mg/850 mg tablet
02333872	sitagliptin-metformin (Janumet) 50 mg/1000 mg tablet