

BC PHARMACARE NEWSLETTER

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In this edition

Forged Adderall® prescriptions alert	1
OAT-CAMPP training deadline extended to September 30, 2021	2
Deadlines for pharmacists at a community pharmacy to complete OAT-CAMPP training:	2
Fair PharmaCare Income Review form now digital	2
Pharmacists join B.C. primary care networks	3
Biosimilars Initiative: rituximab switching comes to an end	4
Changes coming soon to RDP coverage	4
Important Reminders	4
Submit podiatrist prescriptions with reference code 93	4
Regular benefits	5
Limited coverage benefits	5
Non-benefits	6
Your Voice: Patient input needed for drug decisions	6

Forged Adderall® prescriptions alert

The College of Pharmacists of B.C. (CPBC) reports a large increase in confirmed forged prescriptions for Adderall®.

As with all prescription medications, pharmacists are reminded to be vigilant when authenticating prescriptions. Per Schedule F, Part 1, s.10 (3) of the *Health Professions Act*, you may refuse to dispense a drug if you doubt the authenticity of a prescription.

The PharmaCare Newsletter is published by the Pharmaceutical, Laboratory & Blood 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.



If a prescription appears suspicious:

1. Confirm the patient's identification.
2. Review the patient's PharmaNet profile to identify any notes or concerning patterns.
3. Contact the prescriber. (Note: look up the prescriber on PharmaNet or the College of Physicians and Surgeons of BC's directory. Do not rely on information provided on the script.)

For more information about what to do once you've confirmed or dispensed a forgery, see the [College of Pharmacists of BC's forged prescription alert](#).

OAT-CAMPP training deadline extended to September 30, 2021

The Ministry of Health and the College of Pharmacists of BC, with consultation from the BC Pharmacy Association (BCPhA), have agreed to extend the deadline for all community pharmacists to complete opioid agonist treatment (OAT) training, to provide OAT, to September 30, 2021. At the same time, the Ministry plans to reinstate the requirement for at least one pharmacist in pharmacies enrolled in the OAT provider subclass to have training, which they would need to complete by May 1, 2021.

Before the COVID-19 pandemic, the BCPhA Opioid Agonist Treatment Compliance and Management Program for Pharmacy (OAT-CAMPP) included a full-day in-person workshop. For safety reasons during the pandemic, the training was put on hold from March 2020 to November 2020. It was relaunched in November 2020 with the full-day in-person workshop reconfigured as a half-day virtual workshop.

In July 2020, while training was on hold, the requirement for at least one pharmacist to have completed OAT-CAMPP was suspended. However, at that time the deadline for all pharmacists to complete OAT-CAMPP by March 31, 2021 was not extended, due to uncertainty about when the program would be relaunched. The Ministry is working on the administrative changes to extend that deadline to September 30, 2021. The College has already implemented the extension.

OAT-CAMPP training will be required for pharmacies to enrol in the OAT provider sub-class and to maintain their enrolment. Effective October 1, 2021, every pharmacist at a pharmacy that provides OAT will need OAT-CAMPP training.

Deadlines for pharmacists at a community pharmacy to complete OAT-CAMPP training:

	Before COVID-19	Due to COVID-19	New proposed deadline
At least one pharmacist	January 19, 2020	WAIVED	May 1, 2021
All pharmacists	March 31, 2021	March 31, 2021 (unchanged)	September 30, 2021

Fair PharmaCare Income Review form now digital

Fair PharmaCare beneficiaries can now apply for income reviews online. The easy-to-use digital application was launched on February 18, 2021. Applicants can upload relevant documents electronically, and the application automatically calculates financial totals.

Income reviews are available to Fair PharmaCare beneficiaries whose income has dropped by 10% or more since their coverage was calculated. Fair PharmaCare coverage is based on Canada Revenue Agency information on a family's net income from two years ago. The income review allows families to provide more recent income information. If their application is approved, it's possible that their deductible and family maximum will be lowered.

An online income review application was created in 2020 specifically for people who lost income due to COVID-19; this has been integrated into the new online form. The paper income review form is still available for download.

Pharmacists and prescribers are always encouraged to let patients know about Fair PharmaCare. Patients already registered for Fair PharmaCare may appreciate knowing about the new online income review application.

- [Fair PharmaCare Income Review Application](#) (online)
- [Fair PharmaCare Plan Application for Income Review \(HLTH 5355\)](#) (paper)

Pharmacists join B.C. primary care networks

The first primary care clinical pharmacist (PCCP) has joined a primary care network (PCN) in B.C., with 19 more to join PCNs in the next six months.

A PCN is a clinical network of local primary care service providers located in a geographic area. Enabled by a partnership between health authorities and divisions of family practice, a PCN provides a team-based approach to patient-centered care. Team members can include family doctors, specialists, nurse practitioners, nurses, social workers, therapists, pharmacists and other clinical and non-clinical providers. Thirty-nine PCNs are underway in B.C.

The Pharmacists in PCN Program launched in October 2020. PCCPs provide comprehensive one-on-one pharmaceutical care for patients with complex medical conditions. They identify and resolve drug therapy problems by working collaboratively with patients and their care teams. They advise prescribers about drug therapy options and safety issues, such as drug interactions and adverse reactions, and focus on removing barriers that prevent patients from taking their medications as needed.

"I hope that when patients leave me, they will have a better understanding of their disease state and a plan to optimize medication that fits with their lifestyle and goals," said Annick Sevigny, the province's first practicing PCCP, with Kootenay Boundary PCN. "In addition, I hope to provide patients with a better understanding of the pharmacist's role."

PCCPs are hired by a health authority. They typically have at least two years recent experience working in innovative, inter-professional patient care practice settings.

PCCPs do not dispense drugs, since drugs can only be dispensed in a licensed pharmacy. A PCCP will interact and share information with the patient's community pharmacist as appropriate, based on patient circumstances.

The Ministry is partnering with UBC to develop and lead the Pharmacists in PCN Program. In all, 50 PCCPs will join PCNs before the end of 2022.

For more about PCNs, see [Transforming care in B.C.](#)

For more about PCCPs, see [Government adds pharmacists into primary and community care \(2018\)](#).

Biosimilars Initiative: rituximab switching comes to an end

As announced in [PharmaCare Newsletter 20-016](#), the Biosimilars Initiative switching of originator rituximab (Rituxan®) to approved biosimilars, which started on August 20, 2020, came to an end on February 18, 2021.

Effective February 19, 2021, PharmaCare no longer covers Rituxan. To receive PharmaCare coverage, patients with approved conditions must, in consultation with their prescriber, obtain a prescription for an authorized biosimilar (Truxima™, Riximyo™*, or Ruxience™).

Note: biosimilars are limited coverage benefits that must meet Special Authority criteria.

*Riximyo is not yet approved by Health Canada to treat granulomatosis with polyangiitis or microscopic polyangiitis.

Changes coming soon to RDP coverage

The PharmaCare [Reference Drug Program](#) (RDP) has been under review, with changes expected as early as April 1, 2021.

Details will follow in the April newsletter, but changes will not be as extensive as with the “Modernized RDP” changes in 2016. Patients who are currently taking RDP medications will continue to have coverage after the changes occur. No switching or adapting will be required. You can expect:

- The Nitrates category to be discontinued. Current drugs in that category will become regular benefits.
- All patients currently taking a nonsteroidal anti-inflammatory drug (NSAID) that will be removed from the NSAIDs category, will have their coverage grandfathered.

Keep an eye on our [RDP web page](#) after April 1, and the April 6 [PharmaCare Newsletter](#) for updates.

Important Reminders

Submit podiatrist prescriptions with reference code 93

Pharmacists must submit prescription claims for podiatric surgeons with the practitioner reference code **93** and the podiatrist’s 5-digit CPSBC licence number (Practitioner ID).

If you do not have the Practitioner ID, use the Prescriber Identification Transaction (TIP) or call the PharmaNet Help Desk to obtain it. If PharmaNet returns an error message indicating incorrect prescriber information, call the PharmaNet Help Desk.

Podiatrists’ prescriptions continue to be submitted incorrectly as a result of system changes during the amalgamation between the College of Podiatric Surgeons of BC and the College of Physicians and Surgeons of BC. See [PharmaCare Newsletter 20-020](#) for more information about the reference code.



Regular benefits

The following product, formerly a limited coverage drug, has been added as a regular benefit under Fair PharmaCare and Plans B, C, F and W:

DRUG NAME	ciprofloxacin-dexamethasone (Ciprodex®, and generics)		
COVERAGE EFFECTIVE	February 6, 2021		
INDICATION	acute otitis externa or acute otitis media with a tympanic perforation		
DIN	02252716*	STRENGTH AND FORM	0.3%-0.1% drops, suspension
	02506882		
	02481901		
PLAN G BENEFIT	No	PLAN P BENEFIT	No

*Ciprodex is subject to the Low Cost Alternative policy

Limited coverage benefits

The following infliximab biosimilar is now added as a limited benefit for the indications included below:

DRUG NAME	infliximab (Avsola™)		
COVERAGE EFFECTIVE	February 18, 2021		
INDICATIONS	rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis, plaque psoriasis, and patients with gastrointestinal indications of either Crohn's disease or ulcerative colitis		
DIN	02496933	STRENGTH AND FORM	100 mg vial
PLAN G BENEFIT	No	PLAN P BENEFIT	No

Effective February 18, 2021, Brenzys® (etanercept biosimilar) is extended to treat the indications listed below:

DRUG NAME	etanercept (Brenzys®)		
COVERAGE EFFECTIVE	February 18, 2021		
INDICATION	psoriatic arthritis in adults and polyarticular juvenile arthritis in children ages 4–17. This is in addition to its already-reimbursed indications: rheumatoid arthritis and ankylosing spondylitis.		
DIN	02455331	STRENGTH AND FORM	50 mg/mL auto-injector
	02455323		50 mg/mL pre-filled syringe
PLAN G BENEFIT	No	PLAN P BENEFIT	No

Effective February 23, 2021, the following product is listed as a limited coverage benefit under the DIN below:

DRUG NAME	isavuconazole (Cresemba™)		
COVERAGE EFFECTIVE	February 23, 2021		
INDICATION	invasive mucormycosis		
DIN	02483971	STRENGTH AND FORM	100 mg capsule
PLAN G BENEFIT	No	PLAN P BENEFIT	Yes*

*For patients who meet Limited Coverage criteria

Non-benefits

The following product has been reviewed and will not be listed as a PharmaCare benefit under the DIN below:

PRODUCT	STRENGTH AND FORM	DIN
isavuconazole (Cresemba™)	200 mg/mL powder solution	02483998

The following product is removed as a PharmaCare benefit due to discontinuation by the manufacturer, as noted in [PharmaCare Newsletter 20-001](#):

PRODUCT	INDICATION
prasugrel (Effient®)	patients who have received a percutaneous coronary intervention for acute coronary syndrome

Your Voice: Patient input needed for drug decisions

The knowledge and experience 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 give input. If you have a patient 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>.

Currently input is needed for the following:

DRUG	infliximab (Remsima® SC)
INDICATION	rheumatoid arthritis, Crohn's disease, ulcerative colitis
INPUT WINDOW	February 3, 2021–March 3, 2021

DRUG	pegfilgrastim (Nyvepria™)
INDICATION	febrile neutropenia
INPUT WINDOW	February 3, 2021–March 3, 2021