

The PharmaCare Newsletter team works from the territory of the Lekwungen peoples, including the Songhees and Esquimalt Nations. Our gratitude extends to them, and all the Indigenous peoples on whose territories and lands we build relationships.

The PharmaCare Newsletter is published by the Pharmaceutical, Laboratory & Blood Services Division to provide information to B.C.'s healthcare 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. Healthcare professionals should confirm information obtained from PharmaNet, and ensure no additional relevant information exists, before making patient care decisions.

[www.gov.bc.ca/pharmacarepharmacists](http://www.gov.bc.ca/pharmacarepharmacists)  
[www.gov.bc.ca/pharmacareprescribers](http://www.gov.bc.ca/pharmacareprescribers)  
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**Q:** Where can you find dose, cost and coverage information about lipid-lowering drugs in the [2021 Canadian Cardiovascular Society guidelines for managing dyslipidemia](#)?

**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!

## Medication administration fee – recap

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The Ministry hosted two virtual townhalls on October 18 and October 20, 2022, to go over recent changes to pharmacists' scope of practice, PharmaCare's new drug administration fee, prescription renewal support (coming soon!), and the work underway to enable pharmacists to prescribe for minor ailments and contraception by spring 2023. Ministry and College of Pharmacists of BC representatives fielded questions from the 400+ pharmacists who attended the sessions.

Pharmacists are reminded that the new drug administration fee of \$11.41 must be claimed when they administer eligible injectable drugs to patients. Patients must not be charged any amount for administration of these injections.

Products not eligible for the drug administration fee include travel vaccines, insulin and products designed for patient self-injection. For clarity, travel vaccines are vaccines given to patients with the indication of travel. However, vaccines may have more than one indication. If a vaccine is administered outside of the publicly funded criteria and is for an indication other than travel, the drug administration fee of \$11.41 must be claimed rather than charging the patient an administration fee.

A prescription from an authorized prescriber is needed for pharmacists to administer Schedule II drugs (e.g., vitamin B12, dimenhydrinate) and claim the fee. Vaccines do not require a prescription. As noted above, the drug administration fee must be claimed for non-publicly funded vaccines (not indicated for travel).

It's also important to note that an adaptation fee can only be charged once, at the time an adaptation is made. If the adapted prescription contains refills, refills are dispensed without claiming the adaptation fee again.

Stay tuned to this newsletter and watch for additional updates to PharmaCare's policy manual as we confirm and refine the details of new pharmacy practices and procedures.

### Resources

- Updated October 25: PharmaCare Policy Manual [Section 8.10 – Pharmacist administration of drugs and vaccines](#)
- PharmaCare's [related services list](#) of pharmacy services fees covered under PharmaCare plans
- [How to claim PharmaCare fees for clinical services \(PDF, 281KB\)](#) quick reference guide and flow chart
- "Updates to pharmacist services" (article in the [October 2022 PharmaCare Newsletter – PDF, 561KB](#))
- [College of Pharmacists of BC: Changes to optimize pharmacy services](#)

## New online resources

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BC PharmaCare and the Ministry of Health are working to provide clear and timely information for pharmacists and the public—paying particular attention to pressures on the health care system and the recent changes to pharmacists' scope of practice. Please visit the new web pages linked below.

For healthcare professionals:

- [Pharmacist prescribing for minor ailments and contraception](#)
- [How to claim PharmaCare fees for clinical services \(PDF, 281KB\)](#) quick reference guide and flow chart

For the general public:

- [Expanded pharmacy services](#)
- [Pharmacy services covered by PharmaCare](#)

## Infant formula shortage guidelines removed

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Canada now has a stable but limited supply of specialized infant formulas, including amino acid-based formula (AAF) and extensively hydrolyzed formula (EHF) for infants, [Health Canada reports](#). The Ministry of Health is therefore removing its [guidance issued to pharmacies on June 17 to conserve supply](#).

- EHF's may again be stocked on shelves, with the exception of products made available for import during the shortage that do not have bilingual labeling (see [Imported stock](#) below).
- Although purchasing limits are no longer recommended by the Ministry, customers should be encouraged to buy only what they need.
- Amino acid-based formulas (AAFs) are still available behind the counter, as was the case before the shortage.

### Imported stock

Some products imported during the shortage under the [Health Canada interim policy](#) do not meet Canada's bilingual labelling requirements and so should not be stocked on store shelves. Customers can continue to order these imported products at the pharmacy counter while supplies last. Details about these imported products are on the [Canadian Pharmacists Association website](#).

Health Canada regularly updates its [infant formula shortage information](#) as needed.

## Paxlovid® survey

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All B.C. pharmacists are invited to complete the [Paxlovid Pharmacist Survey](#). The survey will collect valuable information about pharmacists' experiences providing clinical assessments, monitoring for adverse drug events for Paxlovid (nirmatrelvir/ritonavir), and claiming PAX-A and PAX-F fees.

The survey takes 5 to 10 minutes to complete and is open until December 31, 2022. Your feedback will help us evaluate the service and may be used to inform future Ministry initiatives.

### Resources

- [Paxlovid Pharmacist Survey](#)
- [PharmaCare Newsletter June 2022](#) includes an article about PAX-A and PAX-F
- [Paxlovid resources for pharmacists](#)

## Medical diagnostic testing for Ukrainian arrivals

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As of October 1, 2022, Medical Services Plan (MSP) covers medical testing required for people arriving in B.C. through the Canada-Ukraine authorization for emergency travel program (CUAET). CUAET arrivals must complete medical diagnostic tests within 90 days of arriving in Canada to screen for reportable communicable diseases. This includes a medical exam, a chest x-ray and blood tests.

Please direct CUAET arrivals to [MSP](#) for more information.

## Exchange rate update for prosthetic and orthotic components

PharmaCare's price list for prosthetic and orthotic components is adjusted periodically, based on changes to the U.S. exchange rate posted by the Bank of Canada. When the rate changes by at least 5 cents over at least 5 consecutive business days, PharmaCare's exchange rate is adjusted to reflect the new rate.

This condition was met for the period beginning October 13, 2022, and as of that date, PharmaCare's exchange rate has increased from \$1.3166 to \$1.3806.

## Limited coverage benefits

The following drug is now covered as a PharmaCare limited coverage benefit.

<b>Drug name</b>	trientine (Waymade-trientine®)		
<b>Date effective</b>	October 25, 2022		
<b>Indication</b>	Wilson's disease		
<b>DIN</b>	02515069	<b>Strength and form</b>	250 mg capsule
<b>Covered under plans</b>	With SA approval, covered under plans B, C, F, I, W		

## Non-benefits

PharmaCare has determined the products below will not be covered.

<b>Drug name</b>	teduglutide (Revestive®)
<b>Decision date</b>	October 4, 2022
<b>Indication</b>	short bowel syndrome in pediatric patients (age 1yr+) dependent on parenteral support
<b>DIN</b>	02445727

<b>Drug name</b>	halobetasol propionate (Bryhali™)
<b>Decision date</b>	October 19, 2022
<b>Indication</b>	dermatoses and plaque psoriasis
<b>DIN</b>	02499967

## 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](#).

The Ministry depends on pharmacies and practitioners to help connect patients and their caregivers with opportunities to give input. If you have a patient who is taking one of the drugs below or who has the condition the drug treats, please encourage them to visit [www.gov.bc.ca/BCyourvoice](http://www.gov.bc.ca/BCyourvoice).

Input is currently needed for the following:

<b>DRUG</b>	dupilumab (Dupixent®)
<b>INDICATION</b>	asthma in children 6 to 11 years
<b>INPUT WINDOW</b>	Oct. 26 – Nov. 22, 2022

<b>DRUG</b>	belimumab (Benlysta®)
<b>INDICATION</b>	lupus nephritis in adults
<b>INPUT WINDOW</b>	Oct. 26 – Nov. 22, 2022

<b>DRUG</b>	deferiprone (Ferriprox®)
<b>INDICATION</b>	transfusional iron overload due to sickle-cell disease or other anemias
<b>INPUT WINDOW</b>	Oct. 26 – Nov. 22, 2022

## Special release: November 10, 2022

### No script needed for compounded OTC pediatric analgesics

Health Canada has removed its objection to providing compounded over-the-counter (OTC) pediatric analgesics without a prescription, to mitigate the intermittent supply of commercial products — within a "patient–healthcare professional relationship." The BC Ministry of Health, supported by the College of Pharmacists of BC, encourages community pharmacists to provide compounded acetaminophen and ibuprofen without a prescription until the shortage resolves.

Pharmacists are not required to provide compounding services, but are urged to direct parents/caregivers to a pharmacy that does.

Health Canada recommends that pharmacies document the patient–healthcare professional relationship.

Canada has been experiencing intermittent supply of pediatric formulations of both acetaminophen and ibuprofen products due to increased demand. Production has been increased, but supply is not enough to meet the demand. The Ministry recommends that people buy only what they need, to help manage available supply.

The usual and customary products are non-benefits under most plans, so PharmaCare will not pay a compounding fee in those cases, as per the [Compounded Prescriptions policy](#). However, where oral pills cannot be used and commercial liquid product cannot be sourced, temporary coverage under Plan P (Palliative Care) and W (First Nations Health Benefits) with PIN 22123378 for acetaminophen and PIN 22123379 for ibuprofen is in place until commercial product availability stabilizes. Special Authority is not needed. Follow PharmaCare's [Compounded Prescriptions policy](#).

### Resources

- [Health Canada website](#)
- [Section 5.13, PharmaCare Policy Manual – Compounded Prescriptions](#)

## Pharmacy technicians can administer flu vaccines

On November 4, 2022, the BC Public Health Officer issued the order [Regulated and Unregulated Health Professionals Influenza Immunization](#), permitting a wider range of healthcare professionals to administer influenza vaccinations. As of November 4, pharmacies can claim the [vaccine administration fee](#) when an authorized pharmacy technician supervised by a registrant who is authorized under a health profession regulation administers influenza vaccines.

## Special release: November 18, 2022

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### Coverage extension of NovoRapid and Humalog for patients using certain insulin pumps

PharmaCare is extending coverage **to November 30, 2023**, for people using NovoRapid® brand insulin aspart or Humalog® brand insulin lispro with Medtronic, Ypsomed and Tandem insulin pumps.

This coverage extension was—and continues to be—required because some insulin pumps have not yet been approved by Health Canada to use the insulin biosimilars (and regular PharmaCare benefits) Trurapi® and Admelog®.

The coverage extension to November 30, 2023 is automatic for people who had already qualified for the previous extension (to November 30, 2022), which was announced in the [May 2022 PharmaCare Newsletter](#).

New approvals for Medtronic and Ypsomed insulin pumps will also automatically include coverage for both NovoRapid and Humalog until November 30, 2023. Patients currently using an Omnipod pump with NovoRapid now have NovoRapid coverage extended to November 30, 2023. Patients who had been using an Omnipod pump with Humalog will have already switched to Admelog (a regular PharmaCare benefit and approved by Health Canada for use with this pump) to maintain PharmaCare coverage.

We anticipate Health Canada will approve these pumps for use with the biosimilars Trurapi and Admelog by the end of the current extension.

We will continue to provide advance notice of upcoming policy and coverage changes in the PharmaCare Newsletter.

For more information, visit: [Biosimilars Initiative for health professionals](#)

### New web page: pharmacist drug administration

PharmaCare has created a new web page that provides detailed information and claims procedures for the new drug administration fee. Visit the new [Drug administration fee](#) website.

### Update on pediatric analgesics shortage

A significant quantity of foreign-labelled pediatric analgesics will be shipped to B.C. in the coming weeks. The supply will be directed to the retail sector. The BC Ministry of Health is working closely with Health Canada, other provinces and territories, and distributors and manufacturers of these imported products to ensure fair access and distribution. The provincial government does not control inventory of these products at the retail level.

## CPBC reminds pharmacists of compounding standards

The BC Ministry of Health encourages pharmacists to consult the College of Pharmacists of BC email from November 10, 2022, regarding compounding standards, including procedures for recalls, labelling and documentation.



### Did you know?

Last year, BC PharmaCare helped more than 57,000 British Columbians try to quit smoking by giving them no-cost nicotine replacement therapy.

Find more stats like this in [2020/2021 PharmaCare Trends](#).