

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)  
[www.gov.bc.ca/pharmacaredeviceproviders](http://www.gov.bc.ca/pharmacaredeviceproviders)



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**Q:** What is the effect of increasing the dose of insulin glargine in people with type 2 diabetes?

**A:** The answer is in the most recent edition of [PAD Refills](#). Make sure to subscribe so you don't miss out on news and updates!

## One year of Plan C coverage for Ukrainian arrivals

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As of September 23, 2022, people arriving in B.C. through the Canada-Ukraine authorization for emergency travel program (CUAET) will have Plan C (Income Assistance) coverage for eligible medication costs for one year. The coverage is activated as soon as a CUAET arrival has a Personal Health Number assigned by BC Medical Services Plan (MSP).

This exceptional Plan C coverage extends support to people fleeing war as they get settled in a new country. CUAET arrivals are expected to have low incomes during their first year in B.C. When the year of plan C coverage ends, Fair PharmaCare would become their primary plan.

The [emergency 48-hour coverage](#) announced in the [April 26, 2022 special edition of the newsletter](#) can still be used by CUAET arrivals in urgent need of medications before they are enrolled in MSP.

Since CUAET was launched in March 2022, MSP has enrolled approximately 6,300 CUAET arrivals.

CUAET bypasses all usual refugee and immigration processes to allow for immediate residency in Canada. This means CUAET arrivals do not have access to the usual federal refugee supports, including help with prescription costs.

### Resources:

- [Ukrainian \(CUAET\) arrivals and BC PharmaCare](#)
- [Canada-Ukraine authorization for emergency travel \(CUAET\)](#)

## New form for Fair PharmaCare, MSP and Supplementary Benefits

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B.C. residents can now register for Fair PharmaCare at the same time as they enrol in the BC Medical Services Plan (MSP).

The new [BC Application for Health and Drug Coverage \(AHDC\)](#), launched on September 22, 2022, merges the applications for MSP, Fair PharmaCare and MSP's Supplementary Benefits program. People can apply for one, two or all three programs with this form. After an applicant completes the form, they will receive follow-up communications from the individual programs, which continue to operate independently.

We expect the launch of this form will result in a greater percentage of new residents registering for Fair PharmaCare, since this is now closely linked to MSP enrolment—a legal requirement. The new application is designed to be user friendly and to meet robust accessibility standards.

MSP pays for medically required services of physicians and surgeons, and dental or oral surgery performed in a hospital, while Fair PharmaCare helps B.C. residents pay for eligible medications, medical devices and supplies, and pharmacy services. The Supplementary Benefits program provides partial payment for certain medical services, such as acupuncture and massage therapy, for individuals or families with an adjusted net income of \$42,000 per year or less.

Please let your clients know about the new form. PharmaCare brochures, web pages and patient information sheets have been updated to link to the new form.

### Resources:

- [BC Application for Health and Drug Coverage](#) ([my.gov.bc.ca/ahdc](http://my.gov.bc.ca/ahdc))
- [Apply for B.C. health and drug coverage](#) (web page about the form, with link to paper form)

## PRIME enrolment reminder

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People working in B.C. community pharmacies, including pharmacists, pharmacy technicians and anyone accessing PharmaNet on their behalf, must now be enrolled in PRIME in order to continue accessing PharmaNet.

Pharmacies must ensure that all staff are enrolled in PRIME and approved by the Ministry of Health before attempting to access PharmaNet. This also includes any new staff coming from outside B.C.

### Unauthorized users

Now that the PRIME enrolment deadline has passed, no one may use PharmaNet in a community pharmacy without being enrolled in PRIME. The Ministry is monitoring for unauthorized use and is revoking PharmaNet access for anyone using PharmaNet without Ministry approval. If the Ministry detects unauthorized access attempts by a pharmacy, the pharmacy manager will be notified, and the Ministry may take further action should unauthorized access attempts persist.

### PharmaNet credentials

When a person is approved to access PharmaNet, they are given a unique global PharmaNet ID (GPID) that is associated with all their PharmaNet activities. PharmaNet provisioners (that is, anyone who sets up user accounts for access to PharmaNet) must ensure users' GPID is included in their profiles, unless an exception is made by the Ministry. An exception may be granted, for example, to someone who does not have a BC Services Card.

The Information Management Regulation under the Pharmaceutical Services Act prohibits the sharing of PharmaNet access credentials between users.

### Renewal

PRIME enrolment is renewed annually. All users should note their renewal date. To renew, log into your PRIME profile, review/update your information and accept the terms of access. If something about your access has changed (e.g., you have a different type of access than before, or you are at a new workplace), send your PRIME approval email to your PharmaNet administrator.

### Resources

- Enrol in PRIME: [pharmanetenrolment.gov.bc.ca](https://pharmanetenrolment.gov.bc.ca)
- Information about PRIME: [gov.bc.ca/pharmanet/PRIME](https://gov.bc.ca/pharmanet/PRIME)
- [Handout for staff to explain PRIME \(PDF\)](#)
- If you cannot enrol in PRIME, contact [PRIMESupport@gov.bc.ca](mailto:PRIMESupport@gov.bc.ca)

## Monkeypox treatment – tecovirimat (TPOXX™)

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Tecovirimat (TPOXX™) is an antiviral authorized by Health Canada as an extraordinary use new drug for treatment of human smallpox disease. It does not have an approved indication for treatment of monkeypox in Canada. However, it may be considered as a treatment in select individuals with confirmed infection.

The B.C. Monkeypox Advisory Guidance Group recommends that treatment with oral tecovirimat be considered for individuals with severe disease or immunocompromised patients who are at high risk of developing severe disease. For information about prescribing, eligibility and dosing, visit the BCCDC's [monkeypox website](#).

Distribution of tecovirimat is controlled due to limited availability. Tecovirimat must be prescribed in consultation with a health-authority-based infectious disease specialist and the monkeypox expert panel. Currently, tecovirimat is dispensed through the provincial Product Distribution Centre only.

## PharmaCare seeks new prosthetist

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PharmaCare is adding a part-time prosthetist to our prosthetic and orthotic program.

The prosthetist will join PharmaCare's Prosthetic and Orthotic Committee, which adjudicates applications for coverage of prosthetic and orthotic supplies and services.

The prosthetist's responsibilities include reviewing and providing advice to the committee on applications, liaising with health care providers, and maintaining and updating the PharmaCare component price list. The time commitment is approximately 10 – 15 hours per month.

A request for proposals (RFP) will soon be posted to the [BC Bid website](#). We will initially fill this position for a 3-year contract with the option to renew, at the Ministry's discretion, for an additional 2 years.

Full details will be provided in the RFP, including a detailed description of responsibilities and expectations for the position and a link to the application. We encourage all certified prosthetists to apply.

## Payment for rapid antigen test distribution

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As announced in the [April 2022 PharmaCare Newsletter \(PDF\)](#), effective April 11, 2022, pharmacies receive \$75.00 for every case distributed of the Artron or BTNX COVID-19 rapid antigen test (RAT) kit.

PharmaCare has calculated the total monthly fees owed to each pharmacy at the rate of \$75.00 per case recorded with PIN 66128325 for a case of BTNX COVID-19 RAT kits, and PIN 66128338 for a case of the Artron RAT kits. The July 2022 payment will be included in the October 4, 2022 weekly payment. The payment will appear on the Pharmacy Remittance Advice Form under the adjustment code "7–Manual Payment."

Pharmacies are encouraged to order more RAT kits to maintain sufficient stock.

### Resource

- [Pharmacist info on COVID-10 RAT kits](#)

## Exchange rate update for prosthetic and orthotic components

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PharmaCare's price list for prosthetic and orthotic components is adjusted periodically, based on the U.S. exchange rate posted by the Bank of Canada. When that 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 September 1, 2022, and PharmaCare's exchange rate has been raised from \$1.2614 to \$1.3166.

## Limited coverage benefits

The following drugs are now covered as PharmaCare limited coverage benefits.

<b>Drug name</b>	risankizumab (Skyrizi®) 150 mg		
<b>Date effective</b>	September 27, 2022		
<b>Indication</b>	Severe to moderate plaque psoriasis		
<b>DIN</b>	02519283	<b>Strength and form</b>	150 mg/mL prefilled syringe
	02519291		150 mg/mL prefilled pen
<b>Covered under plans</b>	Special Authority		

<b>Drug name</b>	sapropterin (Kuvan®)		
<b>Date effective</b>	September 27, 2022		
<b>Indication</b>	tetrahydrobiopterin (BH4) responsive phenylketonuria (PKU)		
<b>DIN</b>	02350580	<b>Strength and form</b>	100 mg tab
	02482207		100 mg sachet
	02482215		500 mg sachet
<b>Covered under plans</b>	Special Authority		

## Expensive drugs for rare diseases

<b>Drug name</b>	elexacaftor/tezacaftor/ivacaftor (Trikafta®)		
<b>Date effective</b>	September 13, 2022		
<b>Indication</b>	Cystic fibrosis, by exceptional case-by-case funding		
<b>DIN</b>	02517140	<b>Strength and form</b>	100mg elexacaftor/50mg tezacaftor/75mg ivacaftor and 150mg ivacaftor
	02526670		50mg elexacaftor/25mg tezacaftor/37.5mg ivacaftor and 75mg ivacaftor
<b>Covered under plans</b>	<a href="#">Expensive Drugs for Rare Diseases</a>		

## Non-benefits

As of September 22, 2022, PharmaCare has determined the products below will not be covered.

<b>Drug name</b>	dupilumab (Dupixent®)
<b>Decision date</b>	September 20, 2022
<b>Indication</b>	Severe asthma in patients 12 and older
<b>DINs</b>	02470365, 02492504

<b>Drug name</b>	inclisiran (Leqvio®)
<b>Decision date</b>	September 27, 2022
<b>Indication</b>	hypercholesterolemia
<b>DIN</b>	02518376

<b>Drug name</b>	macitentan-tadalafil (Opsynvi®) 10 mg/40 mg tablet
<b>Decision date</b>	September 14, 2022
<b>Indication</b>	pulmonary arterial hypertension
<b>DIN</b>	02521083

## 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 [www.gov.bc.ca/BCyourvoice](http://www.gov.bc.ca/BCyourvoice).

Input is currently needed for the following:

<b>DRUG</b>	finerone (trade name TBC)
<b>INDICATION</b>	chronic kidney disease
<b>INPUT WINDOW</b>	Sept. 28 – Oct. 26, 2022

<b>DRUG</b>	ravulizumab (Ultomiris®)
<b>INDICATION</b>	atypical hemolytic uremic syndrome
<b>INPUT WINDOW</b>	Sept. 28 – Oct. 26, 2022

<b>DRUG</b>	caplacizumab (Cabliivi®)
<b>INDICATION</b>	acquired thrombotic thrombocytopenic purpura
<b>INPUT WINDOW</b>	Sept. 28 – Oct. 26, 2022

<b>DRUG</b>	dexamethasone intravitreal implant (Ozurdex®)
<b>INDICATION</b>	diabetic macular edema
<b>INPUT WINDOW</b>	Sept. 28 – Oct. 26, 2022

<b>DRUG</b>	eptinezumab (Vyapti®)
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<b>INDICATION</b>	migraine
<b>INPUT WINDOW</b>	Sept. 28 – Oct. 26, 2022

## FNHA Partnership series wraps up

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The Ministry of Health and the First Nations Health Authority (FNHA) partnered over the past year to provide insightful articles and stories to help increase awareness of First Nations issues and build cultural humility and safety in B.C.'s health system. The series wrapped up with our September publication of the 10<sup>th</sup> and final piece. The collected articles have been collected into the publication [Coming Together for Wellness \(PDF\)](#), available for reading and downloading from the [PharmaCare Newsletter web page](#).

## Special release (October 13, 2022)

### Updates to pharmacist services: administration of injections and adapting & renewing prescriptions

Starting October 14, 2022, B.C. pharmacists will be able to administer injections and adapt prescriptions for more medications, and renew prescriptions for a longer period, as [announced on September 29](#).

#### Administration of injections

PharmaCare has created a new fee of \$11.41 that pharmacies can claim for administering medication by injection and for administering most non-publicly funded vaccines (e.g., shingles, pneumococcal). Updates to pharmacist services: administration of injections and adapting & renewing prescriptions

#### Adapting & renewing prescriptions

The College of Pharmacists of BC [has updated PPP-58](#) to allow pharmacists to adapt and renew prescriptions for a wider range of medications and conditions.

The PharmaCare adaptation fee can be claimed for the following adaptations, for all drugs and conditions in the expanded range:

- renewing a prescription
- changing the dose, formulation or regimen of a prescription
- making a therapeutic drug substitution within the same therapeutic class

#### Fees

Fee schedule for existing and expanded services		
Service	Fee	Procedures
Drug administration and most non-publicly funded vaccines	\$11.41 - new	Use PIN 66128366 in PharmaNet for the administration fee. In the SIG field, enter the DIN, generic drug name, route and administration site (RIGHT or LEFT or BILATERAL), e.g., 0273497_Vitamin B12_IM_LEFT
Publicly funded vaccines	\$12.10 (\$18.00 for COVID-19) - unchanged	No change. For details: <a href="#">Publicly funded vaccines</a>
Prescription renewals (up to 2 years)	\$10.00 - unchanged	Details: <a href="#">Section 8.4 – PharmaCare Policy Manual</a>
Therapeutic substitutions	\$17.20 - unchanged	
Note: A pharmacy can claim fees for any combination of clinical services – prescription renewals, vaccine administrations, drug administrations, drug adaptations and medication reviews – to a daily maximum of \$78 per patient.		

#### Injections

Beginning October 14, 2022, pharmacists will be able to give patients injections of all medications, including Schedule IA drugs, but excluding allergy serums and substances for cosmetic use.

The drug administration fee can be claimed when a pharmacist administers an injection to a patient enrolled in MSP who has a prescription for an injectable drug from an authorized prescriber. Schedule II drugs (e.g., vitamin B12,



dimenhydrinate) can continue to be dispensed without a prescription; however, a prescription is required to claim the administration fee. The only Schedule II drugs that are eligible for a PharmaCare fee without a prescription are those used for immunization.

In addition, the drug administration fee cannot be claimed for travel vaccines or products designed for patient self-injection, such as insulin and low molecular weight heparins. Specifically, the fee cannot be claimed for medications in auto-injectors and pens.

### Multi-dose vials

Multi-dose vials can only be dispensed once, with a single dispensing fee. The drug administration fee PIN may be claimed for each injection administered from a multi-dose vial.

### Multiple daily injections

To claim multiple injections for one patient on the same day, use the PharmaNet intervention code UF. The pharmacy will be paid the dispensing fee and the drug administration fee for each injection.

Resources:

- [September 29, 2022, provincial news release](#)
- College of Pharmacists of BC [Professional Practice Policy 58 update](#)

### Extended validity period for prescriptions

All prescriptions previously had an expiry date of one year from the date the original prescription was written, with an exception for oral contraceptives. As of October 14, 2022, this validity period is being extended to two years for all prescription medications. Consistent with current practice, pharmacists may adapt and renew prescriptions up to two years from the original prescription date, if appropriate.

### Upcoming information sessions on pharmacy practice and services

The B.C. Ministry of Health will host two virtual townhall meetings on October 18 (from noon to 1 p.m.) and October 20 (from 6:30 – 7:30 p.m.) to provide information on the latest changes to pharmacy practice and the upcoming pharmacy service changes announced on [September 29, 2022](#). Invitations to the meetings, to be held virtually on Zoom, has been shared with pharmacies by the College of Pharmacists of BC. Both townhalls will include time for Q&As.



Did you  
know?

PharmaCare expanded its formulary in 2020-21 to fund 29 new brand-name drugs and 183 new generic drugs.

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