



NON-INSURED HEALTH BENEFITS PROGRAM EXPEDITED REVIEW FOR INHALERS

Effective July 25, 2016, the Non Insured Health Benefits (NIHB) Program has implemented an expedited review process for inhaler requests that are limited use (LU) and require prior approval (PA).

As part of the limited use criteria for most inhalers, NIHB requires that therapy with a first line and/or second line inhaler (pre-requisite inhalers) be used before LU authorisation is granted. As part of the expedited process, the NIHB Drug Exception Centre (DEC) will review the client's medication history prior to sending a form.

Previous Process

1. A pharmacy calls NIHB DEC requesting a PA for a limited use inhaler.
2. NIHB DEC provides a case number and faxes the limited use form to the prescriber.
3. Once the completed form is received by NIHB DEC it is reviewed and approved if it meets the LU criteria or denied if it does not. A confirmation letter is sent to the pharmacy.
4. The pharmacy is notified by fax of the approval or denial of the request.

New Process

1. A pharmacy calls NIHB DEC requesting a PA for a limited use inhaler.
2. NIHB DEC provides a case number and the request is sent to be reviewed based on the client's medication history.
3. Authorisation is granted if the client has recently tried the pre-requisite inhaler(s) for an appropriate duration of therapy. A confirmation letter is sent to the pharmacy.
4. If the client has not recently tried the pre-requisite inhaler(s) for an appropriate duration of therapy, the LU form is faxed to the prescriber for any additional details. Once the completed form is received by NIHB DEC it is reviewed and the coverage decision is faxed to the pharmacy.