



NON-INSURED HEALTH BENEFITS PROGRAM: IMPORTANT REMINDERS FOR PHARMACY PROVIDERS

1. EMERGENCY SUPPLY PROCESS FOR MEDICATIONS REQUIRING PRIOR APPROVAL

The NIHB Program has a provision allowing providers to dispense medications requiring prior approval on an emergency basis.

When a medication requiring prior approval is needed by an NIHB client on an emergency basis and the criteria for automated Prior Approval (PA) have not been met (i.e. a claim is submitted on-line and a prior approval is not electronically granted as indicated by the generated CPhA message), a provider may dispense an initial course of treatment (maximum seven-day supply).

During regular business hours*, the provider must call the Drug Exception Centre (DEC) to request prior approval for an emergency dispense.

If access to the DEC is not possible (i.e. on statutory holidays and after hours of operation), an emergency dispense may be provided without prior approval. In order to receive payment for the emergency dispense, the provider must contact DEC on the next business day for a back-dated approval. This approval number must be included when submitting the emergency supply claim.

Providers must follow the usual prior approval process to dispense the balance of the prescription. The provider will receive a new prior approval number and details of the approved benefit by fax. This new prior approval number must be included on the subsequent claim.

*DEC is open Monday to Friday from 8:00 AM to 6:00 PM in all Time Zones. Providers requesting a prior approval can call DEC at 1-800-580-0950.

2. PALLIATIVE CARE CLIENTS

NIHB clients who are diagnosed with a terminal illness and are near the end of life are eligible to receive supplemental benefits that are not included in the NIHB Drug Benefit List. These supplemental benefits are listed in the NIHB Palliative Care Formulary, included below.

If a claim is rejected for a palliative client, providers are advised to call DEC and request prior approval (or, if outside of DEC business hours, follow the emergency supply process described above). A Palliative Care Application Form will be generated and faxed to the prescriber. Once completed and submitted, the client will be eligible for all medications on the Palliative Care Formulary if the following criteria are met:

1. the client is not receiving care in a provincially funded hospital or long-term care facility; and
2. the client has been diagnosed with a terminal illness or disease which is expected to be the primary cause of death within six months or less.

When approved, the client will be eligible for all medications on the Palliative Care Formulary for six months without the need for further prior approval. If coverage is required beyond the initial six months, an additional six months may be granted upon receipt of a new "Palliative Care Application Form" request.

NIHB PALLIATIVE CARE FORMULARY

- Atropine injection
- Buscopan injection
- Diazepam injection
- Diazepam rectal gel
- Fentanyl citrate injection
- Fentanyl patches
- Furosemide injection
- Glycopyrrolate injection
- Granisetron injection
- Hydromorphone injection
- Hyoscine butylbromide injection
- Ketamine injection
- Lorazepam injection
- Metadol tablets & oral liquid
- Methotrimeprazine injection
- Methylnaltrexone injection
- Metoclopramide injection
- Midazolam injection
- Moi-Stir Spray
- Morphine injection
- Nabilone capsules
- Nutritional Supplements (Ensure, Boost)
- Ondansetron injection
- Phenobarbital injection
- Ranitidine injection
- Scopolamine injection & patches
- Sterile syringe preparation fee