

NEW INFORMATION

Stimulant Dose Limit

On February 25th, 2015 the NIHB Program introduced a dose limit for stimulants. The limit was set at 150mg of methylphenidate equivalents per day. Methylphenidate equivalent (MEQ) refers to the total dose of methylphenidate a patient is receiving if all agents were switched to equivalent doses of methylphenidate. Dextroamphetamine has a lower limit than methylphenidate. This limit is calculated based on the total dose of all stimulants a client receives from NIHB within a 100-day period (i.e. 15 000 mg MEQ over 100 days).

The conversion of each drug to methylphenidate is:

1mg of DEXTROAMPHETAMINE (Dexedrine Spansules)	= 2mg of MEQ
1mg of METHYLPHENIDATE (Concerta, generic Ritalin)	= 1mg of MEQ
1mg of LISDEXAMFETAMINE (Vyvanse)	= 1mg of MEQ

Pharmacist Prescribing – Lice Treatment

Effective March 15, 2015, the NIHB Program will accept claims for pharmacist initiated prescriptions for First Nations and Inuit clients for lice treatment, where allowed by provincial and territorial legislation. **Please refer to your provincial or territorial regulatory authorities for specifics related to the extended scope of practice in your area, as they differ between provinces or territories and as this section may not apply to your situation.** NIHB will reimburse these prescriptions as per usual regional reimbursement policies of the Program.

The reasons for prescribing and patient specific details must be documented as per the provincial and territorial legislation and be available for review if necessary on audit.

NIHB does not compensate pharmacists for professional services including the cost of assessing the patient.

The following is a list of products accepted by NIHB for pharmacist prescribing for lice treatment:

Products – Lice Treatment	DIN	Restriction
Resultz 50% Sol	02279592	Limit of two (2) small package sizes (bottles) per client and per prescription.
Kwellada-P 1% rinse	02231480	
Nix 1% rinse	00771368	
R & C 3% & 0.3% Shampoo	02125447	
Nyda 50% Top Sol	02373785	

NIHB recognizes that pharmacists are ideally situated to provide timely access to these medications to treat lice infestations.

NIHB continues to review the expanded scope of practice legislation applicable in provinces and territories and to determine which additional conditions or minor ailments may be added to the list of items for which pharmacist initiated prescribing is accepted by the Program.

NIHB Coverage of Methadose in Manitoba

Methadose 10mg/mL oral solution is a commercially available methadone product which is approved for the treatment of opioid dependence. As of October 16, 2014, the Manitoba Provincial Drug Programs' (PDP) Methadone Reimbursement Procedure requires the conversion of compounded methadone prescription to the commercially available Methadose.

As such, for NIHB clients residing in Manitoba, the following applies:

- Effective October 16, 2014, Methadose 10mg/ml oral solution was listed on the NIHB Drug Benefit List (DBL) for methadone maintenance therapy (MMT). The DIN's affected are 02394596 and 02394618.
- To obtain an approval, pharmacy providers must call the NIHB Drug Exception Centre (DEC) where an Expedited Special Authorisation (SA) will be granted immediately.
- Once the SA is granted, the DEC will place the client in the Prescription Monitoring Program (PMP) which restricts coverage of opioids, benzodiazepines, stimulants and gabapentin until a sole prescriber is identified.
- Effective January 1st, 2015, the pseudo DIN (0908835) for compounded methadone solution for MMT was delisted from the NIHB DBL in Manitoba.

When billing for Methadose, the quantity submitted must be in millilitres (mL) of drug dispensed prior to any further dilution. For example, if a physician prescribed 75mg of methadone each day, the claims submission must indicate a quantity of 7.5mL of Methadose 10mg/mL oral solution.

Compounded methadone solution for MMT will only be reimbursed in exceptional circumstances such as when there is a shortage of Methadose oral solution or when there is a true allergy to Methadose oral solution.

Other NIHB methadone/Methadose reimbursement policies will remain in effect.

Compensation for Opioid Addiction Treatment

NIHB will consider covering Kadian for the treatment of opioid dependence where methadone and Suboxone are not available or not appropriate. As per the opioid addiction compensation model, only one opioid addiction witness fee of \$4.60 can be billed per day.

NIHB Program and Express Scripts Canada Contact Information can be found on the last page of this NIHB Newsletter.

This \$4.60 fee includes the witnessing for all strengths of Suboxone or Kadian and any instances where the client may be taking more than one medication for opioid withdrawal (e.g. methadone and Kadian). As a reminder, if the client is on methadone, the witness fee is automatically included in the fee calculation so another witness fee will not be allowed in the billing.

When Kadian is billed for the treatment of opioid addiction, the provider must use a pseudo DIN for compensation according to the opioid addiction treatment reimbursement model. The pseudo DINs are listed in the chart below according to the strength of Kadian.

Medication	pDIN
Kadian 10mg	09991310
Kadian 20mg	09991311
Kadian 50mg	09991312
Kadian 100mg	09991313

Reduction in the Opioid Dose Limit

To ensure appropriate opioid use amongst NIHB clients, on September 30, 2013, NIHB implemented an opioid dose limit of 600mg morphine equivalents per day for clients with non-cancer/non-palliative pain. This limit is calculated based on the total daily dose of all opioids in morphine equivalents (ME) that a client is receiving through NIHB. A second dose limit of 500mg in ME was implemented October 20, 2014.

According to the Canadian Guideline for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain,

Chronic non-cancer pain can be managed effectively in most patients with dosages at or below 200mg/day of morphine or equivalent. Consideration of a higher dosage requires careful reassessment of the pain and of risk for misuse, and frequent monitoring with evidence of improved patient outcomes.

Effective March 4, 2015, the daily opioid dose limit was further decreased to 450mg morphine equivalents per day for non-cancer/non-palliative pain.

Benzodiazepine Dose Limit Policy

On March 4, 2013, the NIHB Program introduced a dose limit for benzodiazepines. This limit was initially set at 120mg of diazepam equivalents per day. This limit has been lowered since 2013 and on **March 4, 2015** it was decreased to 40mg of diazepam equivalents per day. According to the product monograph for diazepam, the recommended usual adult dosage is up to 40mg per day. Diazepam equivalents refer to the total amount of benzodiazepines a client is receiving if all benzodiazepines were switched to equivalent doses of diazepam. For a comparison of equivalent doses, see the Canadian Pharmacists Association (CPhA) monograph for benzodiazepines: www.e-therapeutics.ca/cps.showCphaMonograph.action. If you are unable to access this link, please contact Express Scripts Canada for inquiries.

REMINDERS

Modification Return Process

When returning claims, please ensure the entire claim form is complete before sending it to Express Scripts Canada for claims processing. Forwarding the updated return letter is insufficient and the claim will not be processed. As a result, the letter will be sent back to the provider for the correctly completed claim form.

Importance of Most Current Provider Information

It is important that the most current provider information is provided to Express Scripts Canada, otherwise providers may not receive new and important information from NIHB and Express Scripts Canada regarding NIHB coverage, claims submission procedures, etc.

A verbal request is accepted at the Express Scripts Canada Provider Claims Processing Call Centre to change the following important provider information:

- Email address, fax number, phone number and/or *correction* to your current address.

All other changes to provider information must be completed on the *Modification to Pharmacy/Medical Supplies & Equipment Provider Information Form*, signed by the director or owner of the business, and submitted by fax or mail as indicated on the form.

These types of changes include:

- Usual and Customary (U&C) Dispensing Fee, new complete address (e.g., moved), bank information and/or name and/or ownership of your business.
- Providers must notify Express Scripts Canada when a pharmacy location closes and where the clients' files will be transferred.

The *Modification to Pharmacy/Medical Supplies & Equipment Provider Information Form* can be downloaded from the NIHB Claims Services Provider Website or contact the Express Scripts Canada Provider Claims Processing Call Centre to request a copy.

Pharmacy Change of Ownership or New Registration

Important Message

When changing ownership of a pharmacy or registering/re-registering a new pharmacy, please advise Express Scripts Canada immediately, Express Scripts Canada needs 10 business days to make changes/updates within the adjudication system. A new **fully completed Express Scripts Canada Pharmacy Provider Agreement** noting the effective date of the pharmacy is required. Please include a **cover page with the Agreement including the effective date, the current phone number for the contact at the pharmacy and the reason for the request for registration** (e.g., new pharmacy opening or ownership change, etc.).

Note: All fields on Page 18 of the *Express Scripts Canada Pharmacy Provider Agreement* must be *completed in full*. Ensure Page 20 is signed by the owner or director of the business including the **date** the Agreement was signed.

Fax all pages of the Agreement to **1-855-622-0669** with a cover sheet advising the reason for the new Agreement:

- Change of Ownership
- New opening/registration
- NIHB re-registration to Express Scripts Canada

Provider numbers are not activated until Express Scripts Canada receives college and Health Canada approval to proceed with registration. Providers are contacted by the Provider Relations Department the week to a few days prior to the opening/effective date of the pharmacy.

Note: A provider must first register with Express Scripts Canada before submitting claims.

New Pharmacy Openings

New pharmacy providers must advise Express Scripts Canada that they have had their college inspection and have been approved by the college prior to Express Scripts Canada activating their profile. Any changes (e.g., legal name, operating name, address, etc.) must be updated with the college before Express Scripts Canada can process these modifications. Please provide an **alternate phone number** for the contact person at the pharmacy, if the direct phone number for the pharmacy has not yet been activated.

2014 Updated Drug Benefit List and Drug Benefit List Updates

Health Canada maintains a Drug Benefit List (DBL) of NIHB eligible drugs that are to be used in a home or ambulatory setting. The DBL indicates to prescribers and pharmacy providers which drug products are eligible NIHB benefits. The DBL encourages the most optimal and cost-effective drug therapy for NIHB clients. It is recommended that prescribers and pharmacy providers regularly review the list to ensure they are aware of the drugs eligible for NIHB coverage. The DBL is published annually, and changes made during the year will continue to be communicated via regular NIHB DBL Updates. Both the DBL and DBL Updates may be viewed on Express Scripts Canada's NIHB Claims Services Provider Website (select Pharmacy link "**Drug Benefit List**" or "**Benefit Updates**").

The 2014 version of the DBL is also available on the Health Canada website at: www.healthcanada.gc.ca/dbl

NIHB Pharmacy Claims Submission Kit

Please be sure to visit Express Scripts Canada's NIHB Claims Services Provider Website to download a copy of the most current NIHB Pharmacy Claims Submission Kit. A copy can also be requested by contacting the Express Scripts Canada Provider Claims Processing Call Centre at 1-888-511-4666.

Eligible General MS&E Products

Some general MS&E products require a prior approval and can be subjected to a frequency and/or a dollar limitation. The list of eligible general MS&E products can be found at www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/provide-fournir/med-equip/criter/general-eng.php.

Adding Specialized MS&E Products

Nationwide, any NIHB approved pharmacy location wishing to add specialized MS&E products to its pharmacy services **at the same location** must contact Express Scripts Canada and register as a specialized MS&E provider. The provider must ensure that all employees and contracts have the required licenses, certificates and permits that are necessary to allow the provider and its personnel (as applicable) to lawfully provide the following specialized MS&E products. The list of eligible specialized MS&E products can be found at: www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/provide-fournir/med-equip/criter/index-eng.php.

Dispensing General and/or Specialized MS&E Products outside the Pharmacy Location

If you open a new general and specialized MS&E business **outside your pharmacy location**, please complete the Medical Supplies and Equipment Provider Agreement and fax back all completed pages to Express Scripts Canada (1-855-622-0669). Please include a copy of the professional diploma or the certification from the licensing bodies for each specialized MS&E items selected on page 18 of the agreement. Express Scripts Canada can only allow one Specialized MS&E provider number per location.

Eligible specialized MS&E services

Specialized MS&E claims must be submitted manually. All NIHB forms including the manual claim form can be found on the NIHB Claims Services Provider website (www.provider.express-scripts.ca). Please note that all pharmacy, general and specialized MS&E claims can be subjected to a various type of verifications and/or an audit.

NIHB PROGRAM AND EXPRESS SCRIPTS CANADA CONTACT INFORMATION

EXPRESS SCRIPTS CANADA

Provider Claims Processing Call Centre

Please have your Provider Number readily available

Inquiries and Password Resets 1-888-511-4666

Pharmacy Extended Hours

Monday to Friday:
6:30 a.m. to 12 a.m. Eastern Time
Saturday, Sunday and Statutory Holidays:
8 a.m. to 12 a.m. Eastern Time

MS&E Extended Hours

Monday to Friday:
6:30 a.m. to 8:30 p.m. Eastern Time
Excluding Statutory Holidays

Pharmacy and MS&E Claims

Mail Pharmacy claims to:

Express Scripts Canada
NIHB Pharmacy Claims
P.O. Box 1353, Station K, Toronto, ON M4P 3J4

Mail MS&E claims to:

Express Scripts Canada
NIHB MS&E Claims
P.O. Box 1365, Station K, Toronto, ON M4P 3J4

Pharmacy/MS&E Provider Relations Department & Provider Agreements

Fax Completed

Pharmacy/MS&E Provider Agreements to:

Toll Free Fax No.: 1-855-622-0669

Other Correspondence

Mail to:

Express Scripts Canada
5770 Hurontario St., 10th Floor,
Mississauga, ON L5R 3G5

NIHB Forms

Download from the
NIHB Claims Services Provider Website or contact
the Provider Claims Processing Call Centre

www.provider.express-scripts.ca

NIHB PROGRAM

PHARMACY BENEFITS

Drug Exception Centre (DEC)

PRIOR APPROVALS

Pharmacy Benefits

1-800-580-0950 (English)

1-800-281-5027 (French)

Fax No.: 1-877-789-4379

Health Canada Regional Offices

PRIOR APPROVALS

MS&E Benefits

Alberta	1-800-232-7301
Atlantic	1-800-565-3294
Manitoba	1-800-665-8507
Northwest Territories/Nunavut	1-888-332-9222
Ontario	1-800-881-3921
Quebec	1-877-483-1575
Saskatchewan	1-866-885-3933
Yukon	1-866-362-6717

INQUIRIES

Pharmacy/MS&E Benefits

Alberta	1-780-495-2694
	1-800-232-7301
Atlantic	1-902-426-2656
	1-800-565-3294
Manitoba	1-800-665-8507
Northwest Territories/Nunavut	1-888-332-9222
Ontario	1-800-881-3921
Quebec	1-877-483-1575
	1-514-283-1575
Saskatchewan	1-306-780-8294
	1-866-885-3933
Yukon	1-866-362-6717

British Columbia First Nations Health Authority

PRIOR APPROVALS

British Columbia	1-888-299-9222
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INQUIRIES

British Columbia	1-604-666-3331
	1-800-317-7878