NIHB NEWSLETTER

EXPRESS SCRIPTS®

PHARMACY PROVIDERS IN MANITOBA

Non-Insured Health Benefits (NIHB) Program
SUMMER 2017

NEW INFORMATION

Dimenhydrinate (Gravol) Dose Limit

On June 5, 2017, the NIHB Program will introduce a dose limit for dimenhydrinate (Gravol) tablets. For client safety reasons, the limit is set at 400 mg per day. This limit is calculated based on the total dose of all eligible dimenhydrinate tablets a client receives from the NIHB Program within a thirty (30) day period. This limit will not apply to dimenhydrinate injectable, liquid or suppositories.

Opioid Dose Escalation Limit

The NIHB Program implemented an opioid dose escalation policy in June 2016. This policy is in addition to the overall opioid dose limit of 400 mg morphine equivalents per day.

Effective June 1, 2017, NIHB will reduce the opioid dose escalation limit from 300 mg to 200 mg morphine equivalents per day. This means that the NIHB Program will not approve coverage requests to increase opioid doses above 200 mg morphine equivalents per day.

In addition, clients who are currently approved on opioid doses above 200 mg morphine equivalents per day (but below the NIHB Program's maximum opioid dose limit of 400 mg morphine equivalents per day) will be permitted to continue at their current dose, but will not be approved for dose escalations. Requests sent to the Drug Exception Centre (DEC) to increase doses above 200 mg morphine equivalents per day will be considered only on a case-by-case basis for acute, temporary pain conditions. This policy does not apply to palliative clients or clients undergoing cancer treatment. This policy is part of NIHB's Prescription Drug Abuse strategy and is intended to promote the safe and appropriate use of opioids.

Adjustment to NIHB Compensation for Methadone Dispensing for Opioid Addictions Treatment

Effective August 1, 2017, the NIHB Program will increase the maximum compensation for the dispensing of methadone for opioid addictions treatment. The dispensing fee adjustment will be based upon the following formula (usual and customary dispensing fee*/7) + $5.17 per dose. All other aspects related to claims submission requirements remain unchanged. Providers are encouraged to contact the Provider Claims Processing Call Centre 1(888) 511-4666 for questions concerning the methadone fee structure for opioid addictions treatment.

**up to the Program's regional maximum.*

Price Adjustment Requests for Out of Stock and/or Back Ordered Generics

Price adjustments for generic drugs that are out of stock or on back order and that do not require prior approval may be requested and submitted to the Express Scripts Canada Provider Claims Processing Centre with the following documentation:

1) Invoice from the supplier indicating that the generics are on back order
2) Invoice showing the acquisition cost of the brand
3) Claim reference number supplied by the Express Scripts Canada Provider Claims Processing Centre.

As a reminder, please contact the Express Scripts Canada Provider Claims Processing Centre prior to submitting the documentation and request a claim reference number for the claim that is cutting back to generic pricing. This claim reference number must be included on the price adjustment request.

2017 Claims Submission Kit

The NIHB Pharmacy Claims Submission Kit sets out terms and conditions for the submission of claims under the NIHB Program. The 2017 Kit is now available on the NIHB Claims Services Provider website at provider.express-scripts.ca/documents/Pharmacy/Claims Submission Kit/NIHB Pharmacy Claims Submission Kit.pdf. Providers who do not have Internet access or email are invited to contact the Provider Claims Processing Call Centre to request a copy.

Correction – Update to List of Medications and Conditions for Pharmacist-Initiated Treatment

The Spring 2017 newsletter contained an updated list of products and medications that can be prescribed or recommended by pharmacists under NIHB's Pharmacist Initiated Treatment Policy, and included medications to treat oral thrush. In fact, medications to treat oral thrush are Schedule 1 medications, and as such, do not fall under NIHB's Pharmacist Initiated Treatment Policy.

For a full list of health conditions and medications that may be prescribed or recommended under the Pharmacist Initiated Treatment Policy, please consult the NIHB Guide for Pharmacy Benefits (Section 3.13).

Pharmacists Dispensing Medical Supplies and Equipment (MS&E)

Pharmacists are asked to refer to the MS&E NIHB Newsletter for most recent changes related to:

- hearing aid battery frequency guidelines and pricing
- incontinence pricing

Visit provider.express-scripts.ca/medical-supplies-and-equipment/newsletters and select the newsletter for your region.

REMINDERS

Consulting the Guide for Pharmacy Benefits

Providers are encouraged to consult and retain the most current version of the Guide for Pharmacy Benefits. Policy changes are communicated via the regular newsletter publication, and the NIHB Program updates the Guide for Pharmacy Benefits on a quarterly basis, when needed, to reflect policy changes communicated through provider and client newsletters. To refer to the most recent version of the Guide, please visit canada.ca/nihb or provider.express-scripts.ca.

Update on the Coverage of Treatments for Chronic Hepatitis C

Effective March 31, 2017, the Non-Insured Health Benefits (NIHB) Program expanded the coverage criteria and added new medications for the treatment of hepatitis C as limited use (LU) benefits:

- Harvoni (ledipasvir/sofosbuvir)
- Sovaldi (sofosbuvir)
- Epclusa (sofosbuvir/velpatasvir)
- Zepatier (elbasvir/grazoprevir)
- Daklinza (daclatasvir)
- Sunvepra (asunaprevir)
- Ibavyr (ribavirin)

Coverage Criteria:

For adult patients with **chronic** hepatitis C infection who meet **ALL** of the following criteria:

- Treatment is prescribed by a hepatologist, gastroenterologist, or infectious disease specialist (or other prescriber experienced in treating patients with chronic hepatitis C); **AND**
- Laboratory confirmed hepatitis C genotype 1, 2, 3, 4, 5, 6 or mixed genotype; **AND**
- Laboratory confirmed quantitative HCV RNA level taken in the last 12 months; **AND**
- Fibrosis stage of F2 or greater (Metavir scale or equivalent); **OR**
- Fibrosis stage less than F2 **AND** at least one of the following:
    - Co-infection with human immunodeficiency virus (HIV) or hepatitis B virus
    - Co-existent liver disease with diagnostic evidence of fatty liver disease (Example: non-alcoholic steatohepatitis [NASH])
    - Post organ transplant (may include liver and/or non-liver organ transplant)
    - Extra-hepatic manifestations
    - Chronic kidney disease stage 3, 4 or 5 as defined by National Kidney Foundation Kidney Disease outcomes Quality Initiative (K/DOQI)
    - Diabetic patients receiving treatment with anti-diabetic drugs
    - Women of childbearing age who plan to get pregnant within the next 12 months

Update on Infliximab Coverage

Effective May 1, 2017, all Non-Insured Benefits Program (NIHB) patients who are infliximab-naïve and whose therapy is initiated on or after this date, Inflectra will be the product approved, provided the patient meets the criteria for coverage similar to other biologic therapies. Inflectra was approved by Health Canada and supported by the national Common Drug Review based upon evidence demonstrating no meaningful differences compared to the reference product, but has a significantly lower cost. Inflectra will be reimbursed for rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis, plaque psoriasis, Crohn's disease and ulcerative colitis. Patients who received approval for Remicade before May 1, 2017 will continue to have this brand covered and will also be eligible for coverage of Inflectra.

Indian Status Card, NIHB Client Identification and Card Renewal Date

For registered First Nations clients, their Indian status registration number also serves as their NIHB client identification number, and is required on all claims, predeterminations, post determinations. It is recommended that First Nations clients present their Indian status card (either a paper-laminate Certificate of Indian Status or a Secure Certificate of Indian Status) at the point-of-service to ensure that client information is entered correctly and to protect against mistaken identity.

It is important for providers to be aware that a First Nations NIHB client should not be denied services because a renewal date on their Indian status card has passed. Service providers can still use the Indian status registration number to submit NIHB claims. Providers can call the Express Scripts Canada call centre to verify client eligibility with NIHB.

Please note that Inuit clients do not have status cards and are assigned an N number (a client identification number used by the NIHB Program). For eligible Inuit from the Northwest Territories or Nunavut, the N number is linked to the territorial health card, so the health card number can be used to submit claims. Inuit clients who do not have a territorial health card should provide photo identification, and will also need to provide their NIHB N number.

Clients can contact their NIHB Program Regional Office for assistance with their status card or N number.

NIHB PROGRAM AND EXPRESS SCRIPTS CANADA CONTACT INFORMATION

EXPRESS SCRIPTS CANADA

Provider Claims Processing Call Centre

Please have your Provider Number readily available

1 (888) 511-4666

Pharmacy Extended Hours

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

Fax Pharmacy and MS&E claims to:

1 (888) 249-6098

Provider Relations Department

Fax completed provider agreements to:

1 (855) 622-0669

Other Correspondence

Mail to:

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

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/Yukon	1 (888) 332-9222
Ontario	1 (800) 881-3921
Quebec	1 (877) 483-1575
Saskatchewan	1 (866) 885-3933

FIRST NATIONS HEALTH AUTHORITY

PRIOR APPROVALS

British Columbia* (fax number)	1 (888) 299-9222

INQUIRIES

British Columbia*	1 (800) 317-7878

**For First Nation residents in British Columbia only.*
For non-residents and Inuit, contact the Alberta region.

NIHB Forms

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