

## AUGUST BULLETIN

### CHANGE TO MAXIMUM ALLOWABLE COST LIST

The Maximum Allowable Cost (MAC) on the following categories have been updated to reflect changes in the acquisition cost of the lowest priced brand. Enclosed are replacement pages for your July 2006 MAC List which reflects these changes.

#### Effective July 17, 2006

AMPICILLIN 250mg Cap N/A

AMPICILLIN 500mg Cap N/A

#### Effective August 28, 2006

CILAZAPRIL 1mg Tab 0.3717

CILAZAPRIL 2.5mg Tab 0.4284

CILAZAPRIL 5mg Tab 0.4977

ONDANSETRON 4mg Tab 7.5450

ONDANSETRON 8mg Tab 11.5166

ONDANSETRON 4mg ODT Tab 7.5450

ONDANSETRON 8mg ODT Tab 11.5166

RANITIDINE 15mg/mL O/L 0.1174

### NOVA SCOTIA PHARMACISTS' GUIDE

Please find enclosed a revised contact page for your Nova Scotia Pharmacists' Guide. Please replace this page in your guide. Also included for your use is a Nova Scotia Pharmacare Programs telephone numbers reference card.

### NEW PRESCRIBING OPTOMETRISTS

The following optometrists have been added to the list of optometrists authorized to prescribe medications related to eye care:

Dr. Michelle J. Steenbakkers (License #50199)

Dr. Angela Langthorne (License #50202)

Dr. Charlotte Wagg (License #50201)

Please retain for your reference. See the Nova Scotia Formulary for Pharmacare benefits which can be insured if prescribed by prescribing optometrists.

### NEW NURSE PRACTITIONER

The following nurse practitioner has been added to this group of prescribers.

Gillian Yates (License #719141)

Please retain for your reference. See the Nova Scotia Formulary for Pharmacare benefits which can be insured if prescribed by nurse practitioners.

### **INCLUDED WITH THIS BULLETIN:**

- ▶ **New Products List**, effective August 28, 2006
- ▶ **Replacement page for Nova Scotia Pharmacists' Guide**
- ▶ **Replacement pages for July 2006 MAC List**

## NEW PRODUCTS

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The following products are "New Listings to the Nova Scotia Formulary" *effective August 28, 2006*. The benefit status of each product within the Nova Scotia Pharmacare Programs is indicated.

<u>DIN</u>	<u>PRODUCT</u>	<u>MFR</u>	<u>BENEFIT STATUS</u>
02269198	Aclasta 5mg/100mL Inj	NVR	E
02270439	Advicor 20/500mg Tab	ORX	SF
02270447	Advicor 20/1000mg Tab	ORX	SF
02269201	Avonex PS 30mcg/0.5mL Inj	BIG	not insured
02270528	Diovan 40mg Tab	NVR	not insured
02274728	Enbrel 50mg/mL Inj	AMG	E
02267225	Macugen 0.3mg/90mcl Prefilled Syringe	PFI	not insured
02223740	Norprolac 0.025mg Tab	FEI	E
02223759	Norprolac 0.05mg Tab	FEI	E
02223767	Norprolac 0.075mg Tab	FEI	E
02223775	Norprolac 0.15mg Tab	FEI	E
02265435	NovoMix 30 Penfill	NNO	not insured
02249472	Prevacid FasTab 30mg Tab	ABB	E
02272083	Saizen 8.8mg/vial Inj	SER	E
02268205	Twinject 0.15mg Auto-Injector	PAL	E
02247310	Twinject 0.3mg Auto-Injector	PAL	E

### CRITERIA FOR COVERAGE OF NEW BENEFITS

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**Epinephrine (Twinject®)**

- for the emergency treatment of anaphylactic reactions, when out of reach of immediate medical attention

**Etanercept (Enbrel® 50mg/mL Inj)**

- follows the same criteria as other strengths of Enbrel®

**Lansoprazole (Prevacid FasTab®)**

- for patients who meet the criteria for a proton pump inhibitor and require administration through a feeding tube

**Zoledronic Acid (Aclasta®)**

- for the treatment of Paget's disease

**Quinagolide (Norprolac®)**

- for the treatment of hyperprolactinemia (idiopathic or originating from a prolactin secreting micro or macro-adenoma of the pituitary) after failure of bromocriptine (as determined by prolactin levels) or if bromocriptine is not tolerated

**Somatropin (Saizen® 8.8mg/vial Inj)**

- for treatment of growth hormone deficiency in patients with Turner's Syndrome, upon the request of an endocrinologist and when wastage will not occur

### ADDITION TO CRITERIA FOR CAPECITABINE

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The following indication will be added to the existing criteria for coverage of Capecitabine (Xeloda®) for recipients of the Nova Scotia Pharmacare Programs:

- for adjuvant treatment of patients with stage III (Dukes' C) colon cancer and ECOG status 0-1 when prescribed by an oncologist

# ***NOVA SCOTIA PHARMACARE PROGRAMS***

It's easy to **CONTACT US**



*Monday to Friday, 8:00 a.m. to 5:00 p.m.*

## ***Pharmacy Claims***

*Inquires regarding claims, benefits and exception status drugs.*

**Local Calls: 496-7001**

**Toll Free: 1-800-305-5026**

## ***Pharmacare Programs***

*Seniors' & Community Services*

*Drug Assistance for Cancer Patients*

*Diabetes Assistance Program*

*Under 65-LTC*

**Local Calls: 429-6565**

**Toll Free: 1-800-544-6191**