

MARCH BULLETIN

NOVA SCOTIA SENIORS' PHARMACARE PROGRAM Changes for 2007-2008 Premium Year

The Nova Scotia Department of Health announced changes to the Seniors' Pharmacare Program effective April 1, 2007.

Effective April 1, 2007, the annual premium will increase from \$390 to \$424 per senior (an increase of \$2.83 each month).

Seniors will continue to:

- pay no premium if they receive the Guaranteed Income Supplement (GIS) from the federal government
- pay a co-pay of 33% of the total prescription cost to a maximum of \$30 for each prescription. However, the annual maximum has increased from \$350 to \$382 (this prescription cost is paid by seniors directly to their pharmacies when they have their prescription filled)
- receive premium reductions if:
 - he/she is single, and their income is less than \$24,000 a year; or
 - he/she is married, and their combined income adds up to less than \$28,000 a year
- access drug coverage available to them through their private plan, Veterans Affairs Canada, or First Nations and Inuit Health. Seniors with drug coverage through Veterans Affairs Canada, First Nations and Inuit Health, or a private plan are not eligible to join the Seniors' Pharmacare Program.

- be reimbursed the difference between what they paid in co-payment amounts through their private plan, and the total they would have paid in premium and co-payments if they were enrolled in Seniors' Pharmacare. Seniors can contact Pharmacare for more information on this matter.

Seniors who are members of Seniors' Pharmacare Program will begin to receive their annual enrollment packages during March, 2007.

For more information

Nova Scotia Seniors' Pharmacare Program

For specific information on the Seniors' Pharmacare Program call 429-6565 or toll free 1-800-544-6191.

Senior Citizens' Secretariat

The Nova Scotia Senior Citizens' Secretariat operates a toll free information line for seniors and persons acting on their behalf. For information and assistance, call 424-4737 or 1-800-670-0065

This information may also be accessed from our website at www.gov.ns.ca/health/pharmacare

INCLUDED WITH THIS BULLETIN:

- ▶ **New Products**, effective April 1, 2007
- ▶ **Interchangeable Products**, effective April 1, 2007
- ▶ **Replacement Page for January 2007 MAC List**
- ▶ **Replacement Pages for Pharmacists' Guide**

NEW INTERCHANGEABLE CATEGORIES

MAXIMUM ALLOWABLE COST EFFECTIVE MAY 1, 2007

A MAC has been established for the new categories indicated on the attached Interchangeable Products list. Actual Acquisition Cost (AAC) will be paid on these categories until the MAC comes into effect on May 1, 2007. Please refer to the attached list for the new MAC prices. These categories will appear in the next publication of the MAC List.

CHANGE TO MAXIMUM ALLOWABLE COST LIST

Enclosed is a replacement page for your January 2007 Maximum Allowable Cost (MAC) List which reflects the following change:

GLUCOSE TESTING STRIPS

97799979 One-Touch SureStep (100) LFS **0.7360**

NEW NURSE PRACTITIONER

The following nurse practitioners have been added to this group of prescribers.

Dianne Corbett	(License #732280)
Sohani Welcher	(License #726424)
Marsha Wood	(License #721622)

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

NOVA SCOTIA PHARMACISTS' GUIDE

Please find enclosed revised pages for your Nova Scotia Pharmacists' Guide. Please replace these pages in your guide.

NEW OSTOMY PRODUCTS

The following ostomy products are "New Listings to the Nova Scotia Formulary" *effective April 1, 2007.*

<u>DIN</u>	<u>PRODUCT</u>	<u>MFR</u>	<u>PRESCRIBER</u>	<u>BENEFIT STATUS</u>
95098514	Assura Easiclose Drainable Pouch (#14498)	COL	DR NP P	SFC
95098515	Assura Std Wear Drainable Easiclose Pouch (#14491)	COL	DR NP P	SFC
95098488	Easiflex Drainable Pouch w Easiclose (#14525)	COL	DR NP P	SFC
95098487	Easiflex Drainable Pouch w Easiclose (#14529)	COL	DR NP P	SFC

INTERCHANGEABLE PRODUCTS ADDED TO NOVA SCOTIA FORMULARY

Effective April 1, 2007

EXISTING CATEGORIES:

Note: For those products with benefit status under the Nova Scotia Pharmacare Programs, the existing MAC will apply.

	<u>DIN</u>	<u>PRODUCT</u>	<u>MFR</u>	<u>PRESCRIBER</u>	<u>BENEFIT STATUS</u>
ALENDRONATE 5mg Tab	02288079	Sandoz Alendronate	SDZ		not insured
ALENDRONATE 10mg Tab	02288087	Sandoz Alendronate	SDZ	DR NP	E
ALENDRONATE 70mg Tab	02288109	Sandoz Alendronate	SDZ	DR NP	E
CILAZAPRIL 1mg Tab	02291134	Apo-Cilazapril	APX	DR	SF
CILAZAPRIL 2.5mg Tab	02291142	Apo-Cilazapril	APX	DR	SF
CILAZAPRIL 5mg Tab	02291150	Apo-Cilazapril	APX	DR	SF
FENOIBRATE 100mg Tab	02288044	Sandoz Fenofibrate S	SDZ	DR NP	SF
FENOIBRATE 160mg Tab	02288052	Sandoz Fenofibrate S	SDZ	DR NP	SF
FENTANYL 25mcg/hr Patch	02282941	ratio-Fentanyl	RPH	DR	E
FENTANYL 50mcg/hr Patch	02282968	ratio-Fentanyl	RPH	DR	E
FENTANYL 75mcg/hr Patch	02282976	ratio-Fentanyl	RPH	DR	E
FENTANYL 100mcg/hr Patch	02282984	ratio-Fentanyl	RPH	DR	E
HYDROCHLOROTHIAZIDE 25mg Tab	02247386	pms-Hydrochlorothiazide	PMS	DR NP	SF
HYDROCHLOROTHIAZIDE 50mg Tab	02247387	pms-Hydrochlorothiazide	PMS	DR NP	SF
LACTULOSE 667mg/mL O/L	02280078	GPI-Lactulose	ORB	DR	E
ONDANSETRON 4mg Tab	02288184	Apo-Ondansetron	APX	DR	E
ONDANSETRON 8mg Tab	02288192	Apo-Ondansetron	APX	DR	E
PRAVASTATIN 10mg Tab	02248182	Co Pravastatin	COB	DR NP	SF
PRAVASTATIN 20mg Tab	02248183	Co Pravastatin	COB	DR NP	SF
PRAVASTATIN 40mg Tab	02248184	Co Pravastatin	COB	DR NP	SF
SERTRALINE 25mg Tab	02287390	Co Sertraline	COB	DR	SFC
SERTRALINE 50mg Tab	02287404	Co Sertraline	COB	DR	SFC
SERTRALINE 100mg Tab	02287412	Co Sertraline	COB	DR	SFC
SUMATRIPTAN 25mg Tab	02286815	Novo-Sumatriptan DF	NOP	DR NP	E
SUMATRIPTAN 50mg Tab	02286823	Novo-Sumatriptan DF	NOP	DR NP	E
SUMATRIPTAN 100mg Tab	02286831	Novo-Sumatriptan DF	NOP	DR NP	E
*TICLOPIDINE 250mg Tab	02243587	Sandoz Ticlopidine	SDZ	DR	E
TRAZODONE 50mg Tab	02277344	ratio-Trazodone	RPH	DR	SFC
TRAZODONE 100mg Tab	02277352	ratio-Trazodone	RPH	DR	SFC
TRAZODONE 150mg Tab	02277360	ratio-Trazodone	RPH	DR	SFC

**Please Note:* Interchangeability for this category is no longer restricted to only blister packaging. Both bulk and blister packaging formats have been approved for interchangeability.

NEW CATEGORIES:

Note: AAC will be paid for those products with benefit status under the Nova Scotia Pharmacare Programs until May 1, 2007. These categories will appear in the next publication of the MAC List.

	<u>DIN</u>	<u>PRODUCT</u>	<u>MFR</u>	<u>PRESCRIBER</u>	<u>BENEFIT STATUS</u>	<u>MAC PRICE MAY 1, 2007</u>
DESMOPRESSIN 0.1mg Tab	02284030	Apo-Desmopressin	APX	DR	E	<u>0.9913</u>
	00824305	DDAVP	FEI	DR	E	
DESMOPRESSIN 0.2mg Tab	02284049	Apo-Desmopressin	APX	DR	E	<u>1.9826</u>
	00824143	DDAVP	FEI	DR	E	
DIGOXIN 0.0625mg Tab	02281236	Apo-Digoxin	APX	DR	SF	<u>0.1520</u>
	02242321	Lanoxin	VCO	DR	SF	
DIGOXIN 0.125mg Tab	02281228	Apo-Digoxin	APX	DR	SF	<u>0.1412</u>
	02242322	Lanoxin	VCO	DR	SF	
	02245427	pms-Digoxin	PMS	DR	SF	
DIGOXIN 0.25mg Tab	02281201	Apo-Digoxin	APX	DR	SF	<u>0.1412</u>
	02242323	Lanoxin	VCO	DR	SF	
	02245428	pms-Digoxin	PMS	DR	SF	
ISOTRETINOIN 10mg Cap	00582344	Accutane	HLR	DR	F	<u>0.9313</u>
	02257955	Clarus	PRE	DR	F	
ISOTRETINOIN 40mg Cap	00582352	Accutane	HLR	DR	F	<u>1.9003</u>
	02257963	Clarus	PRE	DR	F	
PERINDOPRIL 8mg Tab	02289296	Apo-Perindopril	APX	DR	SF	<u>0.8927</u>
	02246624	Coversyl	SEV	DR	SF	
PRAMIPEXOLE 0.25mg Tab	02292378	Apo-Pramipexole	APX	DR	SF	<u>0.6930</u>
	02237145	Mirapex	BOE	DR	SF	
	02269309	Novo-Pramipexole	NOP	DR	SF	
	02290111	pms-Pramipexole	PMS	DR	SF	
PRAMIPEXOLE 0.5mg Tab	02292386	Apo-Pramipexole	APX		not insured	
	02241594	Mirapex	BOE		not insured	
	02269317	Novo-Pramipexole	NOP		not insured	
	02290138	pms-Pramipexole	PMS		not insured	
PRAMIPEXOLE 1mg Tab	02292394	Apo-Pramipexole	APX	DR	SF	<u>1.3860</u>
	02237146	Mirapex	BOE	DR	SF	
	02269325	Novo-Pramipexole	NOP	DR	SF	
	02290146	pms-Pramipexole	PMS	DR	SF	
PRAMIPEXOLE 1.5mg Tab	02292408	Apo-Pramipexole	APX	DR	SF	<u>1.3860</u>
	02237147	Mirapex	BOE	DR	SF	
	02269333	Novo-Pramipexole	NOP	DR	SF	
	02290154	pms-Pramipexole	PMS	DR	SF	
RAMIPRIL 1.25mg Cap	02221829	Altace	SAV	DR NP	SF	<u>0.4550</u>
	02251515	Apo-Ramipril	APX	DR NP	SF	
	02287692	ratio-Ramipril	RPH	DR NP	SF	
RAMIPRIL 2.5mg Cap	02221837	Altace	SAV	DR NP	SF	<u>0.5250</u>
	02251531	Apo-Ramipril	APX	DR NP	SF	
	02287706	ratio-Ramipril	RPH	DR NP	SF	
RAMIPRIL 5mg Cap	02221845	Altace	SAV	DR NP	SF	<u>0.5250</u>
	02251574	Apo-Ramipril	APX	DR NP	SF	
	02287714	ratio-Ramipril	RPH	DR NP	SF	
RAMIPRIL 10mg Cap	02221853	Altace	SAV	DR NP	SF	<u>0.6650</u>
	02251582	Apo-Ramipril	APX	DR NP	SF	
	02287722	ratio-Ramipril	RPH	DR NP	SF	
TAMSULOSIN 0.4mg Cap	02238123	Flomax	BOE		not insured	
	02281392	Novo-Tamsulosin	NOP		not insured	
URSODIOL 250mg Tab	02273497	pms-Ursodiol C	PMS	DR	E	<u>0.8635</u>
	02238984	Urso	AXC	DR	E	
URSODIOL 500mg Tab	02273500	pms-Ursodiol C	PMS	DR	E	<u>1.6380</u>
	02245894	Urso DS	AXC	DR	E	