

BULLETIN

RPNs: BC PharmaCare tie-in starts February 1

February 1, 2013

In the last round of bargaining, the Nurses Bargaining Association negotiated changes to the extended health care plan. Prescription drug coverage now includes a PharmaCare tie-in. The change will go into effect on February 1, 2013.

The NBA agreed to introduce a managed formulary through the PharmaCare tie in to help manage rising costs, and ensure that members can continue to obtain the medications they need, or an equivalent alternative.

Drug coverage is based on the provincial formulary: PharmaCare - which is usually developed by a committee of physicians and pharmacists, based on quality and cost criteria.

A rigorous, evidence-based process is used to determine which medications will be covered by the formulary and by Special Authority. Details about how decisions are made by PharmaCare are available on their website at www.health.gov.bc.ca/pharmacare/decision.html.

Reimbursement of prescription drugs purchased from a licensed pharmacy will apply only to those medications covered by the formulary unless a Special Authority is granted.

Covered drugs are chosen for their cost and therapeutic value. New medications are not automatically covered by the formulary. For example, a newer, more expensive capsule form of a drug may not be covered, while the less expensive tablet form is covered. Or, a brand name drug may not be covered because a less expensive version of the drug -- a generic version -- is covered.

Your pharmacist or doctor can help identify when generic products are available. Sometimes the drug your physician is considering prescribing will not be eligible, but a different drug (therapeutic alternative) that provides similar treatment may be included on the formulary. It is important to discuss your drug plan coverage with your doctor so that s/he may be able to prescribe a drug therapy that is eligible for coverage.

As before, prescription drugs continue to be reimbursed in accordance with PharmaCare's Low Cost Alternative (LCA) and Referenced Based Pricing (RBP) restrictions, and the PharmaCare price limit including maximums for mark up and dispensing fees.

After February 1, 2013, drugs that are not included in the PharmaCare formulary, or covered by Special Authority, will not be eligible for reimbursement. If you are currently taking medication that is not covered, you need to visit your physician to discuss your medication and be prescribed an alternative drug that is eligible under the new plan. In some circumstances you may be eligible for partial coverage for a medication.

Exceptions to this include Prometrium, standard oral contraceptives, and contraceptive injectables, which will continue to be reimbursed.

For details about how decisions are made by PharmaCare, whether a medication is covered by the formulary or requires Special Authority, you can check online at <http://www.health.gov.bc.ca/pharmacare/decision.html> or speak to your doctor.

If you have questions specifically related to your coverage, please contact Pacific Blue Cross at 604-419-2600.

For all other enquiries, please contact HSA's benefits advocate Dennis Blatchford at 604.439.0994 or toll free 1.800.663.2017 or dblatchford@hsabc.org.

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