

NOVA SCOTIA DEPARTMENT OF HEALTH CONTINUING CARE BRANCH

Subject: Under 65 - LTC Pharmacare Plan Policy

Effective Date: April 1, 2005 Approved Date: March 4, 2005

Original Signed by Keith Menzies

Approved by: _____
Keith Menzies, Executive Director, Continuing Care Branch

1.0 POLICY STATEMENT

The Department of Health will provide prescription drug coverage as specified in the Nova Scotia Formulary to eligible residents of long term care facilities under its jurisdiction.

2.0 APPLICATION OF THE POLICY

This policy applies to individuals who are under the age of 65 and who are residents of facilities under the mandate of the Department of Health which exclusively admit individuals referred through the Department of Health's "Single Entry Access" process.

3.0 ELIGIBILITY CRITERIA

An individual is eligible to access Pharmacare benefits when the following criteria have been met:

- the individual is a regular bed resident of a long term care facility,
- is under the age of 65,
- has a valid Nova Scotia Health Card Number (HCN),
- does not have access to or coverage under another drug plan, be it from a public or private entity.

4.0 PHARMACARE GUIDELINES

- 4.1 Coverage shall become effective upon admission to a long term care facility.
- 4.2 The unique resident identifier will be the Nova Scotia HCN.
- 4.3 Only those pharmacies who have on-line access to the program administrator for the Pharmacare Programs will be authorized providers for this plan.
- 4.4 The maximum supply of an eligible product to be dispensed at any one time by a pharmacy is in accordance with the Pharmacare tariff agreement.
- 4.5 Coverage will be consistent with the Community Services Pharmacare benefit list in the Nova Scotia Formulary.
- 4.6 Those drugs not listed as benefits in the Nova Scotia Formulary, or drugs not approved for exception status drug coverage, will not be covered.
- 4.7 The program administrator for the Pharmacare Programs shall administer the plan on behalf of the Department of Health.
- 4.8 There will be no resident premium, co-pay or deductible attached to this plan.

5.0 EXCEPTION DRUG STATUS

The *Under 65 Long Term Care Pharmacare Plan* is administered by Department of Health, Pharmaceutical Services through their program administrator. The *Under 65 Long Term Care Pharmacare Plan* follows the Community Services Pharmacare benefit list in the Nova Scotia Formulary. This list provides access to drugs, biological and related preparations, diabetes, and ostomy supplies. Certain drugs are only eligible for coverage when a resident meets criteria developed by the Department of Health, Pharmaceutical Services. These drugs are referred to as “exception status drugs”.

If a resident is being prescribed a drug that has not been approved for exception drug status coverage, the resident should be advised to have their physician request approval through Department of Health, Pharmaceutical Services for coverage.

Approval may be obtained from the Pharmacare Program to cover exception status drugs which are indicated with an ‘FE’ in the benefit status column of the Nova Scotia Formulary. Criteria and request forms are listed in Appendix IV of the Nova Scotia Formulary.

6.0 ENROLLMENT PROCESS

- 6.1 Upon admission of an eligible resident, the long term care facility shall provide written notification to the program administrator for the Pharmacare Programs to enroll the resident in the *Under 65 Long Term Care Pharmacare Plan*. Facsimile notification is acceptable. The following information must be provided by the facility:
- facility name and address
 - name and number for facility contact
 - name of resident
 - resident's date of birth
 - resident's Health Card Number
 - date of admission
 - date of discharge (where applicable)
- 6.2 The program administrator for the Pharmacare Programs will confirm that the resident has a valid Health Card Number and set up the resident as a beneficiary of the *Under 65 Long Term Care Pharmacare Plan*.

7.0 DISCONTINUATION OF ELIGIBILITY

- 7.1 When a resident enrolled in the *Under 65 Long Term Care Pharmacare Plan*, becomes no longer eligible for continued coverage under the plan, the long term care facility shall provide written notification of this to the program administrator for the Pharmacare Programs. Facsimile notification is acceptable. Discontinuation of eligibility may occur for a variety of reasons including, but not limited to:
- discharge
 - transfer to a non DoH facility
 - death
 - age