



# PharmacareNEWS

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### **Nova Scotia Formulary Updates**

Coverage of Extra Dispensing Fees

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#### **Pharmacare coverage of extra costs associated with the 30-day prescription supply recommendation**

To address the additional out-of-pocket costs some Pharmacare beneficiaries may incur when their prescription supplies are reduced in accordance with the Nova Scotia College of Pharmacists' recommendation to limit prescription supplies to 30 days during the COVID-19 pandemic, the following changes have been made, effective April 23, 2020.

#### **Department of Community Services Pharmacare Benefits clients**

For clients enrolled in the Department of Community Services (DCS) Pharmacare Benefits program, DCS will be waiving the \$5 copay on all prescriptions starting April 23, 2020. Pharmacies must bill the usual dispensing fee for these claims and the copay will be adjusted to \$0 during adjudication.

#### **Seniors' and Family Pharmacare Program clients who are financially affected by a reduction in their usual days supply of medication**

For Pharmacare beneficiaries who would have filled a particular prescription for more than 30 days, and the quantity is being reduced because of the current recommendation, pharmacists are asked to remove the dispensing fee on any "extra" claims billed so that this fee will not be included in the calculation of the patient's copayment. For example:

- For a typical supply of 60 days, enter a dispensing fee of \$0 for the **second** refill only.
- For a typical supply of 90 days, enter a dispensing fee of \$0 for the **second** and **third** refills only.

The usual full dispensing fee must be billed when the patient would normally have filled their prescription (e.g. one dispensing fee every 60 or 90 days, the first fill of a new prescription, etc.).

**Coverage of Extra Dispensing Fees Continued...**

This approach can also be used for clients who rely solely on the Family Pharmacare Program as their drug insurance, including before they have met their deductible. It cannot be used when the client also has another form of drug insurance and Family Pharmacare is the second payer.

To ensure pharmacies are fully compensated for the dispensing fees that were not charged, a bottom-line adjustment will be applied on each pharmacy's Pharmacare payment based on their usual and customary dispensing fee for those claims that were billed as \$0. For example, if a pharmacy submitted 100 claims with a \$0 dispensing fee, and the pharmacy's usual dispensing fee is the Pharmacare maximum of \$12.25, the pharmacy will automatically receive an additional \$1,225 as part of their Pharmacare payment. These payments will appear on biweekly statements; however, it is estimated these payments may be delayed by two weeks versus the online portion of the claim. Adjusted payments will commence approximately 3-4 weeks from now.

It is important that this approach be used as accurately as possible, based on the pharmacy staff's review of the patient's prescription records, copayment history and dispensing history in order to determine the patient's eligibility for the \$0 dispensing fee.

This coverage will remain in effect until June 30, 2020, or until an earlier date should the recommendation from the College of Pharmacists be lifted prior to June 30. Any change in end date for the coverage will be communicated to pharmacies through this bulletin.

If specific Pharmacare beneficiaries are concerned that they have already been financially affected by refills after April 1st and before the effective date of this policy, please direct them to contact Pharmacare at 1-800-305-5026 to review their situation.

**Billing for Seniors' and Family Pharmacare Program clients who have not been financially affected by a reduction in their usual days supply of medication**

Claims for Pharmacare beneficiaries who are not affected financially by the 30-day supply recommendation should be billed as usual. For example:

- If an eligible Pharmacare beneficiary typically filled their prescription for a supply of 30 days or less, the claim should be billed as usual including the dispensing fee.
- If a client of any Pharmacare Program is already copay exempt, their claims should be billed as usual including the dispensing fee. This would include seniors and members of Family Pharmacare who do not pay copayment at the pharmacy or who are now copay exempt.

While we understand this approach will require the additional attention of the pharmacy staff to ensure appropriate adjudication, and a delay in the payment of some dispensing fees, it allows for immediate financial relief for Pharmacare beneficiaries at the pharmacy counter and a mechanism for government to absorb 100% of the additional costs. Along with other stakeholders, we support the lifting of the 30-day recommendation as soon as can be appropriately implemented.