

Information for Pharmacists

Claims Submission Procedure – Dispensing Frequency

UPDATE - Effective September 14, 2017

Please include this Procedure in your Drug Programs Information Network (DPIN) Manual under Section 4: Claims Submission.

- Effective August 18, 2017, Manitoba will not reimburse pharmacies for more than two (2) professional fees per 30-day period (or 28-day cycle) per drug if the drug is listed on the Frequency of Dispensing List.
- For clarity, this Claims Submission Procedure:
 - Applies only to medications in the Drug Categories listed on the Frequency of Dispensing List;
 - Does not prevent or restrict any pharmacy from dispensing any product, including those listed on the Frequency of Dispensing List, at a frequency more often than bi-weekly or every fourteen (14) days (such as, daily, weekly, etc. – please refer to Table 1 for products listed on the Frequency of Dispensing List);
 - Defines the process when the pharmacy wants to request that Manitoba reimburse for more than two (2) professional fees per 30-day period (or 28-day cycle) for a drug listed on the Frequency of Dispensing List;
 - Is not applicable when:
 1. The need for an additional dispensing is considered a “one-off” (such as for lost medications);
 2. The client is receiving benefits under the Palliative Drug Access Program;
 3. The drug is not listed on the Frequency of Dispensing List (such as mental health drugs);
 4. When the client is a resident of an Assisted Living and/or Group Home and the pharmacy has a formal contract to provide services to the facility.
- The drugs on the Frequency of Dispensing List and specified in this procedure only include drugs that normally do not need to be dispensed more than twice in a 30-day period (or 28-day cycle). Prescriptions that are filled regularly and are taken on a long-term basis, such as cholesterol-lowering or blood pressure medication, oral contraceptives, insulin, etc., can be safely dispensed in larger quantities to clients who are stable on these products.
- Clonidine and all anticoagulant medications are not included within the Frequency of Dispensing List. For drugs that have multiple indications, the Frequent Dispensing Authorization Form is only required when the drug is used for the indication specified on the Frequency of Dispensing List.
- The intent of the Frequent Dispensing Authorization Form is to identify specific situations where there is a special clinical need; the Procedure is to request that Manitoba reimburse the pharmacy for more than two (2) professional fees per 30-day period (or 28-day cycle) due to clinical need.

Definitions: Clinical or Medical Rationale:

- To qualify for coverage of additional professional fees for more frequent dispensing of a drug(s), a client must exhibit one of the following:
 1. A current or prior prescription for a drug product used to manage dementia (such as a cholinesterase inhibitor) or other similar condition.
 2. A current risk of self harm, assessed by an authorized prescriber. Please note that this applies only to medications listed on the Frequency of Dispensing List; prescriptions for mental health drugs do not apply.
- Please refer to the section below, “Frequency of Dispensing for Clients (not approved or where the Procedure is not Applicable)”, in the following situations:
 - The client is dispensed other medications weekly, such as mental health drugs. The usage of other agents dispensed weekly does not alone qualify a client for more than two (2) professional fees per 30-day period (or 28-day cycle) per drug if the drug is listed on the Frequency of Dispensing List.
 - For the purposes of compliance, if more frequent dispensing (eg. weekly or daily) is requested by the client (client preference, etc.), prescriber, or pharmacist.
- **This Procedure does not prevent or restrict any pharmacy from dispensing any product, including those listed on the Frequency of Dispensing List, at a frequency more often than bi-weekly or every fourteen (14) days (such as, daily, weekly, etc. – please refer to Table 1 for products listed on the Frequency of Dispensing List).**

Documentation and Assessment:

- Prescriber approval is not required in the Frequent Dispensing Authorization Form.
- The pharmacy is required to provide supporting information when the form is submitted. The following is considered acceptable documentation:
 - A DPIN history with a clinical note from the pharmacist.
 - Documentation or a clinical note from the pharmacist describing clinical cases where the client has a condition that results in a significant cognitive impairment.
 - A notation (copy of a prescription) where the prescriber notes a current risk of self-harm and that all prescriptions drugs should be dispensed more frequently than twice per 30-day period (or 28-day cycle).

Assisted Living and/or Group Homes:

- For situations where the pharmacy has a formal contract with Assisted Living and/or Group Homes to provide services to residents of Assisted Living and/or Group Homes, Manitoba will provide automatic authorization (i.e. no Frequent Dispensing Authorization Form required) for weekly dispensing for drugs on the Frequent Dispensing List. The amount billed to Manitoba must follow existing contract pricing that may already be in place between Assisted Living / Group Homes and pharmacy providers. All contracts must be kept on file.
 - For example, if a pharmacy has a contract with an Assisted Living home to dispense medications to its residents in blister packs @\$5.00/prescription/week, the pharmacy can submit the weekly claims in DPIN in that manner and without needing to submit for approval the Frequency of Dispensing Authorization Form, as long as the TOTAL professional fee per 30-day period does not exceed 2 times the U&C professional fee for any other clients. If the U&C professional fee is \$15.00, clients receiving biweekly dispensing would have a total monthly charge of $2 \times \$15.00 = \30.00 . Since $(4 \times \$5.00 = \$20.00)$ is LESS THAN \$30.00, this would be acceptable for coverage.

How to Submit a Frequent Dispensing Authorization Form

- The Frequent Dispensing Authorization Form can be found here: https://www.gov.mb.ca/health/pharmacare/profdocs/form_fda.pdf
- **Once the form has been completed, fax it to Manitoba Health at 204-946-5070.** Do not submit this form by email.

Review Process by Manitoba:

- Responses (“approved” or “rejected”) will be faxed directly to the pharmacy, usually within two (2) business days.
- If a Frequent Dispensing Authorization Form is “approved” by Manitoba for a client:
 - for clinical/medical rationale of “dementia or similar condition”, the approval is indefinite. A renewal is not required.
 - for clinical/medical rationale of “self harm”, the approval is in effect for one (1) year. A renewal to extend the authorization for more frequent dispensing would be required annually, if the client still requires more frequent dispensing.
- When a prescription is transferred from one pharmacy to another pharmacy, the receiving pharmacy must submit a new Frequent Dispensing Authorization Form if the client still requires more frequent dispensing.

Adjudication:

- Pharmacies submitting claims for Pharmacare recipients for whom two (2) professional fees have been paid for a medication on the Frequency of Dispensing List will not be entitled to receive reimbursement for additional professional fees until 30-day period (or 28-day cycle) after the initial claim for that medication. This is not automatically tracked by DPIN and pharmacists will not receive a DPIN response code if this number has been exceeded.
- Pharmacies often dispense biweekly, resulting in a 28-day schedule rather than a 30-day schedule. In a model with 30 days and 2 professional fees eligible within those 30 days, the average number of fees per year would be 24.3 (rounded up to 25), calculated as $[2 \times (365/30) = 24.3]$. In a 28-day, biweekly model, the average number of fees per year would be 26.2 (rounded up to 27) $[365/14 = 26.1]$. This biweekly pattern **will be accepted** and the resulting two (2) to four (4) additional professional fees per year that result **will not be subject to recovery**.

Frequency of Dispensing For Clients (not approved or where the Procedure is not Applicable)

- This Procedure does not prevent or restrict any pharmacy from dispensing any product, including those listed on the Frequency of Dispensing List, at a frequency more often than bi-weekly or every fourteen (14) days (such as, daily, weekly, etc.). This Procedure is to request that Manitoba reimburse the pharmacy for more than two (2) professional fees per 30-day period (or 28-day cycle).
- In situations where 1) a Frequent Dispensing Authorization Form has not been approved by Manitoba; and 2) claims for more than two (2) professional fees per 30-day period per drug if the drug is listed on the Frequency of Dispensing List, Manitoba will not reimburse pharmacies for additional professional fees but will reimburse for the drug cost.
- If more frequent dispensing (eg. weekly or daily) is requested by the client (client preference, etc.) pharmacists may continue to dispense the product on a daily or weekly basis and split the U&C professional fee into daily or weekly amounts such that no more than two fees are charged per month. This is acceptable provided the total amount submitted to Manitoba is no more than two (2) professional fees per month per drug if the drug is listed on the Frequency of Dispensing List.

- The following table delineates how pharmacy providers may submit dispensing fees for situations where more frequent dispensing of medication(s) on the Frequency of Dispensing List is preferred but not a clinical requirement. If we assume the U&C Fee (as submitted in Schedule A or B) is \$14.00, the total amount submitted for reimbursement cannot exceed 2 x \$14.00 (\$28.00) per drug per month. Therefore, pharmacies that wish to dispense more frequently (i.e. daily or weekly) for any drug on the Frequency of Dispensing List, can do so as follows without submitting the Frequent Dispensing Authorization Form:

Table 1

Dispensing Frequency	Dispensing Fee Per Day	Total Amount per month (28 day cycle)
Daily	\$1.00 per day x 28 days	\$28.00
Weekly	\$7.00 per week x 4 weeks	\$28.00
Bi-weekly	\$14.00 per 14 days x 2	\$28.00

- If the client wants more frequent dispensing, there is no existing legislation that would prohibit a pharmacy from charging an additional fee for the service of more frequent blister packing. We encourage that the pharmacists or a pharmacy owner disclose the total price of the drug and professional fee: (a) to a client at the client's request; or (b) to a person responsible to pay for the drug if the person is authorized by law to obtain the information.

Information for Pharmacists

Frequency of Dispensing List

Effective May 31, 2019

Please include this List in your Drug Programs Information Network (DPIN) Manual under Section 4: Claims Submission.

The following represents the Frequency of Dispensing List as of May 31, 2019:

Drug Category	Drug Product Examples
ACE Inhibitors	Enalapril, ramipril, quinapril
Angiotensin II Receptor Blockers	Candesartan, irbesartan, valsartan
Beta-Blockers	Atenolol, metoprolol, sotalol
Calcium Channel Blockers	Amlodipine, diltiazem, nifedipine
Other Drugs Used for Hypertension	Methyldopa, prazosin, terazosin
Other Cardiac Drugs	Amiodarone, digoxin, isosorbide, pentoxifylline
Statin Drugs Used to Lower Cholesterol	Atorvastatin, lovastatin, rosuvastatin
Other Drugs Used to Lower Cholesterol	Bezafibrate, ezetimibe, gemfibrozil
Oral Anti-diabetic Agents	Glyburide, metformin, saxagliptin
Diuretics	Furosemide, hydrochlorothiazide, indapamide
Drugs Used for GI Conditions	Famotidine, misoprostol, omeprazole, sucralfate
Drugs Used to Prevent Gout	Allopurinol
Oral Iron Replacement Therapy	Ferrous fumarate, ferrous gluconate
Drugs Used for Osteoporosis	Alendronate, raloxifene, risedronate
Drugs Used for Prostate Conditions	Dutasteride, silodosin, tamsulosin
Thyroid Preparations	Thyroid, levothyroxine (sodium)
Drugs Used for HIV, Hep C	Darunavir/cobicistat, sofosbuvir/velpatasvir
*Blood Glucose Test Strips for Chronic Conditions (diabetes)	One Touch, Contour

*Updated – May 2019

If your questions are not answered by reviewing the Claims Submission Procedures and FAQs posted at:

<https://www.gov.mb.ca/health/pharmacare/healthprofessionals.html>

Please send an e-mail to PDPIInfoAudit@gov.mb.ca.