



February 13, 2006

Changes to Pharmacare & Family Services Drug Programs benefit coverage for Proton Pump Inhibitors effective March 13, 2006

Proton Pump Inhibitors currently covered under Pharmacare and Family Services Drug Programs include: Apo-Omeprazole®, Losec®, Pariet®, Pantoloc® and Prevacid®.

Since their introduction, Proton Pump Inhibitors (PPIs) have been in increasing demand. Although they are extremely effective medications, the wide spread use of PPIs exerts significant cost pressure on Pharmacare and Family Services Drug Programs and on consumers. As a result, Pharmacare and Family Services Drug Programs are changing the way they provide benefit coverage of the PPIs.

New patients starting PPI therapy on or after March 13, 2006

Effective **March 13, 2006**, Pharmacare and Family Service Drug Programs will require physicians to apply for Part 3 Exception Drug Status (EDS) coverage for all **new patients** starting PPI therapy. Patients will be required to have tried and failed a course of Pariet 10 mg and omeprazole 20 mg before they will be considered for benefit coverage for other PPI medications.

Patients currently on PPI therapy prior to March 13, 2006

Patients who have been on existing PPI therapy prior to March 13, 2006 will be provided benefit coverage for all eligible PPIs until **January 15, 2007**. Effective January 15, 2007, Pharmacare and Family Services Drug Programs will require Part 3 Exception Drug Status (EDS) be in place for a patient's PPI therapy if they wish to have continued benefit coverage for these medications. The period between March 13, 2006 and January 15, 2007 will allow patients time to try Pariet and omeprazole. If they try and fail on these two products, EDS coverage for an alternate PPI must be applied for by January 15, 2007.

Question and Answer Fact Sheet

What if a patient is currently taking Pariet or Apo-Omeprazole?

Patients currently taking Pariet 10 mg or Apo-Omeprazole 20 mg have been approved for coverage of these agents under EDS until January 15, 2007. Patients should be advised that if they want continued Pharmacare or Family Services Drug Programs benefit coverage past January 15, 2007 they should talk to their physician at their next scheduled appointment and ask that they apply for EDS coverage on their behalf. This application process can be done any time prior to January 15, 2007.

What happens if Pariet and Apo-Omeprazole aren't effective?

If patients try treatment with Pariet and Apo-Omeprazole for a reasonable length of time and neither agent is effective or well tolerated, physicians may apply for EDS coverage for an alternative PPI presently eligible for benefit coverage under Pharmacare and Family Services Drug Programs.

What if a patient is taking Losec?

Patients on Losec will be allowed EDS coverage until January 15, 2007; however, the rules of interchangeability apply and Pharmacare and Family Services Drug Programs will only pay up to the price of Apo-Omeprazole **except** when Losec is being **used in the treatment of H. pylori**. Physicians will still be required to call EDS to receive approval for cost difference consideration/reimbursement for the indication of H. pylori only. Please refer to Bulletin #48.

What if a patient is currently taking Pantoloc or Prevacid?

Patients currently taking Pantoloc or Prevacid have been approved for benefit coverage of all eligible PPIs until January 15, 2007. Patients who wish to receive benefit coverage for Pantoloc or Prevacid after January 15, 2007 must have tried treatment with **Pariet and omeprazole**. If neither of these medications are effective or are not well tolerated physicians may then apply to EDS for coverage of Pantoloc or Prevacid. Allowing 10-month coverage for all eligible PPI's allows patients to try these alternative medications before their benefit approval expires on January 15, 2007.

Can patients choose to continue with the PPI that they are currently taking after January 15, 2007 without having their physician apply for EDS?

Yes, however it is important to note that after January 15, 2007 the eligible cost of their prescription will not count towards their Pharmacare deductible nor will Pharmacare cover any costs of the prescription once they meet their deductible. For Family Services Drug Program clients their costs will no longer be covered under the program. The EDS approval must be in place by January 15, 2007 for continued benefit coverage.

Does the physician have to wait until January 15, 2007 to apply for Part 3 EDS for a patient?

Physicians can determine if their patient meets criteria established for PPI coverage and apply for EDS at any time prior to January 15, 2007. For existing PPI patients, the 10-month period allows time for physicians to determine which PPI medication is most effective for their patient.

Have physicians been advised of these changes?

Yes. Physicians have been advised of these changes as well as receiving a list of their patients who have been granted EDS benefit coverage until January 15, 2007. Physicians may choose to discuss these changes with their patients during their next scheduled appointment or when they require a new prescription for their PPI medication.

Who has received notification of this change?

Physicians and pharmacists are being notified of these changes. Pharmacists are asked to advise patients, when they require their PPI prescription filled, that they should discuss their PPI therapy with their physician at their next scheduled visit.

Is Nexium covered as a benefit under Part 3 EDS?

Nexium is presently not covered as an eligible benefit under Pharmacare or Family Services Drug Programs.

Will this change affect a patient's private insurance plan coverage?

Please be aware that some private and extended health insurance providers require their clients to have Part 3 EDS approval before they are considered as eligible for benefit coverage.

Patients should contact their private drug plan directly for further information.