



Non-Insured Health Benefits

Drug Bulletin

September 2003

The NIHB Program provides supplementary health benefits, including prescription and non-prescription drugs, for registered Indians, and recognized Inuit and Innu throughout Canada.
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CHANGE IN BENEFIT STATUS

(Effective October 1, 2003)

1. Rabeprazole Sodium, Tablet, 10 mg, 02243796 (Pariet, Janssen-Ortho Inc.)

This product was listed as a Limited Use Benefit since December 1, 2002. On October 1, 2003, it will revert to an Open Benefit. The remaining PPI drugs listed in the DBL will remain Limited Use Benefits and require a prior approval.

2. Methadone for Opioid Dependency, pseudodin 00908835

Effective October 1, 2003, a new policy will be put in place for the submission and the reimbursement of methadone used for the **treatment of addictions for all provinces and territories, excluding Quebec.**

Methadone claims must be submitted by using the **pseudodin 00908835**. Claims submitted with another pseudodin will be subject to reclaim;

The provider **will no longer have to contact the National Drug Exception Centre to obtain a special authorization**, before submitting claims for methadone;

Claims must be submitted **once a week (every seven days) at the end of the week**. In Ontario, due to legislation, claims will continue to be submitted daily.

Cost of the Drug: The drug cost submitted will be the actual acquisition cost (AAC). The drug cost submitted will reflect the **number of milligrams dispensed** as opposed to the volume dispensed. Where applicable, the mark-up (MU) submitted will be in accordance with the NIHB Program pharmacy pricing guidelines defined by region.

Dispensing Fee (DF): The DF, submitted at the end of the week, will be a weekly fee calculated as follows:
Day one: 1.5 times the current DF and an **“interaction fee”** at \$3.50 per day for Day one to seven.

The interaction fee will be reimbursed for each dose that the pharmacist witnesses. For doses that the patient carries home, the interaction fee shall not be claimed. In summary, the total claim submitted weekly (every seven days) will be the addition of the drug cost + the MU (where applicable) + DF. In Ontario, the total weekly amount will be divided by seven and submitted daily.

* For treatment using methadone for other indications, please refer to the NIHB Drug Bulletin dated January 2002.

OVER THE COUNTER REVIEW

(Effective October 1, 2003)

Effective October 1, 2003, a number of drugs will no longer be reimbursed under the NIHB Program.

1. Codeine Containing Cough Preparations

There is insufficient evidence to recommend combination therapies for symptoms of the common cold, a self-limited condition, and may expose individuals to medication that may not be required. Codeine also has the potential for abuse and dependence. Cough suppressants should also not be used when the cough is productive, rather the underlying cause should be treated and identified. The following DINs will no longer be reimbursed under the Program.

02244078	Dimetapp-C Liquid
02169126	Ratio-Cotridin Syrup
00068594	CoActifed Syrup
02243063	Covan Syrup
00068608	CoActifed Tablets

2. Xylometazoline 52:32:00 Pseudoephedrine 12:12:00

Pseudoephedrine and xylometazoline are used primarily for the short-term management of nasal congestion due to the common cold, a self-limited condition. Some individuals may be intolerant

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of the stimulating effects of oral pseudoephedrine and the drug should be used with caution in patients with hypertension, hyperthyroidism and possibly diabetes and cardiovascular disease. Overuse of topical xylometazoline is associated with rebound congestion. The following DINs will no longer be reimbursed under the Program.

02238868	Otrivin 0.05% Nose Drops
00650854	Otrivin 0.1% Drops
02238867	Otrivin 0.05% Nasal Spray
00881147	Decongestant 0.1% Nasal Spray
02054701	Decongestant 0.1% Nasal Spray
00653330	Otrivin 0.1% Nasal Spray
02122979	Otrivin menthol 0.1% Spray
00741043	Otrivin M.D. 0.1% Pump
02130416	Triaminic Oral Infant Drops
00815993	PMS- Pseudoephedrine Oral Liquid
02103109	Eltor 120mg SR Tablets
02238099	Sudafed 120mg SR Tablets
00294462	Pseudoefrin Syrup
01950401	Congest-Eze Tablet
00307912	Pseudoefrin Tablet
02237793	Sudafed Extra Strength Tablets
01905619	Tantafed Tablet

3. Dental Agents 34:00:00

Fluoride supplements are only required for high dental caries risk patients and may be unnecessary if the patient is receiving adequate fluoride from other sources. Fluoride treatment is also offered through First Nation and Inuit Health Branch community dental therapy services. Drugs listed under this class will no longer be reimbursed under the Program. Certain requests will be reviewed on a case by case basis.

4. Antacids and Adsorbents 56:04:00

Antacids are used primarily for trivial or occasional mild heartburn and indigestion. Current guidelines for the management of gastroesophageal reflux disease suggest non-pharmacological and lifestyle changes plus treatment with histamine-2 blockers or antacids. Chronic use of antacids is also associated with rebound hyperacidity and current utilization suggests use of antacids is being replaced by histamine-2 blockers and proton pump inhibitors. Drugs listed under this class will no longer be reimbursed under the Program, with the exception of aluminum hydroxide for the relief of hyperphosphatemia in end-stage renal disease which will remain on the Renal Formulary. In addition to aluminum hydroxide, calcium carbonate will remain on the Drug Benefit List under AHFS 40:12:00.

5. Antipruritics and Local Anesthetics 84:08:00

These products are for symptom control only, and provide only moderate temporary relief and have low utilization rates. The following DINs will no longer be reimbursed under the Program.

00095230	Calamine Lotion
00301256	Calamine Lotion
00454575	Calamine Lotion
00485969	Calamine Lotion
00623385	Nupercainal Ointment
00623407	Nupercainal Cream
01945939	Anusol Ointment
00621447	Anuzinc Ointment
01945920	Anusol Suppository
00621439	Anuzinc Suppository
02144417	Egozinc Suppository
01945912	Anusol Plus Ointment
02229647	Hemorrhoid Ointment
01945904	Anusol Plus Suppository

6. Sunscreen Agents 84:80:00

Although sunscreens are promoted as part of a comprehensive strategy to prevent skin cancer, sun safe behaviour is unlikely to be modified by the provision of sunscreens as a program benefit. In clients who should not or cannot be exposed to the sun, (e.g., radiation or chemotherapy, sunsensitizing drug therapy, etc.) and other conditions where sun exposure is likely to exacerbate underlying disease (i.e., prior evidence of solar keratosis in individuals who cannot avoid sun exposure), sunscreen agents would remain a benefit through the Drug Exception Centre.

Sunscreens listed under this class will no longer be reimbursed under the Program, with the exception of the SPF 60 under the criteria noted above.

7. Emollients, Glaxal Base

This product is considered a cosmetic item, and therefore it is no longer a benefit under the NIHB Program.