RxFiles Academic Detailing Program

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New Physician Orientation

RxFiles Advisors

(Program & Local)

Dr. S. Fenton

(Family Physician, Saskatoon)

Dr. E. Hamilton

(Family physician, Saskatoon)

Dr. C. Ryan

(Family physician, Saskatoon)

Dr. P. Smith

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(Pharmacy Director SHR, Saskatoon)

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(Associate Director, RxFiles Saskatoon)

Mr. L. Regier

(Consultant Editor RxFiles, Saskatoon)

Dr. J. Alcorn

(Dean, U of S College of Pharmacy, Saskatoon)

RxFiles Academic Detailing Program

- Seeks to provide objective, balanced drug information and education
- Provides printed drug resource materials
 - RxFiles Drug Comparison Charts book, newsletters, Q&As, trial summaries
 - GeriRxFiles book
 - RxFilesPLUS Online/App (complimentary to SK Health Care providers through SHIRP)
- Provides academic detailing or short physician office visits to discuss highlights from evidence, clinical experience and areas of question

Other Sources of Drug Information/Availability/Assistance

- **CPS** (Canadian manufacturer's monographs and other information)
- Saskatchewan Formulary (drug availability and coverage in SK)
- Online Resources: www.cma.ca; www.e-althknowledgecentral.org; www.e-althknowledgecentral.org; www.e-althknowledgecentral.org; www.e-althknowledgecentral.org;
- SK Online Web Portal: http://web.mac.com/malees/Primary Care Portal/EMB.html
- SHIRP.ca: Online Resources for SK health professionals www.shirp.usask.ca/home
- medSask: A Provincial Drug Information Service, U of S http://medsask.usask.ca
 Saskatoon: (306) 966-6340; Saskatchewan: 1-800-667-DIAL (3425)
- Saskatchewan Poison Centre: 1-866-454-1212 (24hrs/day;7days/week)
- MAC Medication Assessment Centre: 306-966-6392

What's in an RxFiles Drug Comparison Chart

 Names, dosages, comparative advantages / disadvantages, costs, evidence, and practical "pearls" for best practice drug therapy decision making

Drug Plan Items

- Computerized Real-time System
 - O Pharmaceutical Information Program (PIP) http://www.health.gov.sk.ca/pip
- Coverage
 - Coverage vs availability
 - o Generic interchangeability common & automatic unless "no-sub"
 - Full Coverage vs EDS (see other side)
 - o Maximum allowable cost (MAC)
- Duration of Script
 - o Maximum One (1) Year
 - o Subject to clinical judgment
 - Long-term / ongoing prescriptions
 - 34day; 60day; 100day lists (see formulary)
- Trial Rx Program
 - Offers option of "sample" starter option for various drugs, including antihypertensives, antidepressants and gastrointestinal medications
 - Other newer medications may also be available as industry samples

Prescription Regulations

- Narcotic and Controlled Drugs
 - o Prescription Review Program (drug use monitoring)
- Other Prescription Drugs
- Over the Counter Drugs (may be covered for Indian Affairs-NIHB)

DRUG PLAN COVERAGE IN SASKATCHEWAN

NIHB (NON-INSURED HEALTH BENEFIT) – or "First Nations Health"

Registered Indian and Inuit are covered through the federal NIHB plan. Covered medications are provided at no charge. Certain drugs require prior approval for coverage (similar to "EDS" in SK) **Phone: 1-800-580-0950**

II. SPDP (SASKATCHEWAN PRESCRIPTION DRUG PLAN COVERAGE)

Drug Status:

- Full Formulary Status Coverage Formulary published yearly (July)
- Exception Drug Status (EDS) Coverage () drugs only covered if meeting EDS criteria
 - Physicians must phone, fax or write stated criteria and request coverage from the drug plan (Pharmacists may phone if reason for EDS request is stated

EDS Toll Free: 1-800-667-2549 General Drug Plan Inquiries: 1-800-667-7578

• Non-Formulary symbol in RxFiles charts - (X)

Levels of Coverage:

Social Assistance Clients (Supplementary Health Cards)

PLAN 1:

- Adults pay \$2/prescription
- Children under 18 years of age receive prescriptions at no charge
- This plan is always initiated by a social worker

PLAN 2:

Adults on Plan 1 who need several medications on a long-term basis may apply for this plan, which covers all
prescriptions at no charge; does not cover any OTC medications

PLAN 3:

• Is available for people who cannot afford any medication cost at all. The drug plan pays for everything including some OTC's that are not listed in the formulary (ie: docusate sodium, dimenhydrinate, acetaminophen). Plan 3 people are mainly nursing home or group home residents

$Age \geq 65 \ \& \leq 14$

Children \leq 14 automatically qualify for single prescription maximum of \$25 for fully covered & approved EDS drugs. As of July 1st, 2015, seniors \geq age 65 with a net income under \$66,100 may apply for coverage under the Seniors Drug Plan to qualify for single prescription maximum of \$25 for fully covered and approved EDS drugs.

Family Health Benefit Program

Families who received the Saskatchewan Child Benefit of SK Employment Supplement are eligible for a lower family drug plan deductible. Children in these families have total costs of all prescriptions paid for, and adults have a \$200 semi-annual deductible instead of an \$850 semi-annual deductible.

Palliative Care Coverage

A doctor may submit an **application form** for a person who has been diagnosed with a terminal illness. All regular formulary, EDS drugs and some OTC items such as laxatives are covered (**Inquiries: 306-787-8744**)

SAIL Programs (Saskatchewan Aids to Independent Living)

- Special programs are available to make drugs available at no charge to patients registered in the following:
 - Paraplegia Program; Chronic End State Renal Disease Program; Cystic Fibrosis Program; Ostomy
 Program; Nebulizer Machines for Children under Age 6 on either Plan 1, Plan 2 or Plan 3
- Specialist physicians must make referral to these programs (Inquiries: 1-800-667-7581)

Special Support Program

When a person or family's drug costs are high relative to their income, they may qualify for special support:

- Applies when benefit drug costs exceed 3.4% of adjusted family income (ie: \$1,700 for income of \$50,000)
- A Special Support Application Form must be completed. Forms are available from the drug plan (online) or
 local pharmacies. Applications are reviewed annually; however if a form for the Canada Revenue Agency (CRA)
 consent is given, the renewal process will be completed automatically each year

III. PRIVATE HEALTH INSURANCE

- Many individuals may have additional private health coverage. These plans often follow the provincial formulary in terms of what is covered (including approval of EDS drugs)
- Examples: Blue Cross, MSI