

Bulletin #817

August 19, 2011

## **NBPDP FORMULARY UPDATE**

This update to the New Brunswick Prescription Drug Program (NBPDP) Formulary is effective August 19, 2011

Included in this bulletin:

- **Regular Benefit Additions**
- **Extemporaneous Preparations – Temporary Benefit Changes**
- **Special Authorization Additions**
- **Drugs Reviewed and Not Listed**

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If you have any questions, please contact our office at 1-800-332-3691.

## REGULAR BENEFIT ADDITIONS

Drug/Form/Route/Strength	Brand Name	DIN	Manufacturer	Plans	\$
<b>Azelaic acid</b> Gel Top 15%	Finacea <sup>®</sup>	02270811	BAY	AEFGVW	AAC
<b>Bimatoprost</b> Liq Oph 0.01%	Lumigan <sup>®</sup> RC	02324997	ALL	AEFGVW	AAC
<b>Insulin Glulisine</b> Liq SC 100U/mL	Apidra <sup>®</sup>	02279479	SAV	EFG-18	AAC

## EXTEMPORANEOUS PREPARATIONS – TEMPORARY BENEFIT CHANGES

### Addition

Due to the manufacturer shortage of medroxyprogesterone 2.5mg, 5mg and 10mg tablets, compounded medroxyprogesterone has been added as a temporary regular benefit until the commercial dosage forms become available. Please note that claims for extemporaneous preparations will be reimbursed at the AAC of the ingredients plus the applicable dispensing fee.

Product Name	PIN	Plans	\$
Medroxyprogesterone compounded for oral use	00903682	AEFGVW	AAC

### Deletions

The following compounded products were added as temporary benefits in 2010 due to manufacturer shortages of amitriptyline 10mg tablets and clonidine 0.025mg, 0.1mg and 0.2mg tablets. These compounded products have been removed as benefits since the commercial dosage forms are now available.

Product Name	PIN
Amitriptyline 10 mg compounded for oral use	00903048
Clonidine 0.025, 0.1 and 0.2 mg compounded for oral use	00999330

## SPECIAL AUTHORIZATION ADDITIONS

### **Denosumab**

(Prolia<sup>®</sup>)

60mg/mL prefilled syringe

For women with postmenopausal osteoporosis who would otherwise be eligible for coverage of oral bisphosphonates, but for whom bisphosphonates are contraindicated due to hypersensitivity or abnormalities of the esophagus (e.g. esophageal stricture or achalasia), and who have at least two of the following:

- Age >75 years
  - A prior fragility fracture
  - A bone mineral density (BMD) T-score  $\leq$  -2.5
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### **Insulin Glulisine**

(Apidra<sup>®</sup>) 100 U/mL

3mL cartridge

(new format)

For patients with type I or II diabetes who have experienced frequent episodes of postprandial hypoglycemia; have unpredictable mealtimes; have insulin resistance; or who are using continuous subcutaneous insulin infusion.

Prescriptions written by New Brunswick endocrinologists and internists do not require special authorization. Subsequent refills ordered by other practitioners will not require special authorization.

Note: Insulin glulisine is a regular benefit for Plans EFG<18 years of age.

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### **Insulin Lispro**

(Humalog<sup>®</sup> KwikPen<sup>™</sup>)

3mL prefilled pen

(new format)

For patients with type I or II diabetes who have experienced frequent episodes of postprandial hypoglycemia; have unpredictable mealtimes; have insulin resistance; or who are using continuous subcutaneous insulin infusion.

Prescriptions written by New Brunswick endocrinologists and internists do not require special authorization. Subsequent refills ordered by other practitioners will not require special authorization.

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### **Levodopa/carbidopa/entacapone**

(Stalevo<sup>®</sup>)

75mg/18.75mg/200mg and

125mg/31.25mg/ 200mg tablets

(new strengths)

For the treatment of patients with Parkinson's disease

- Who are currently receiving immediate-release levodopa/carbidopa and entacapone, or
  - Who are not well controlled and are experiencing significant "wearing off" symptoms despite optimal therapy with levodopa/decarboxylase.
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## SPECIAL AUTHORIZATION ADDITIONS (continued)

**Oseltamivir**  
(Tamiflu®)  
30mg, 45mg capsules  
(new strengths)

For beneficiaries residing in long-term care facilities\* during an influenza outbreak situation and further to the recommendation of a Medical Officer of Health:

- For treatment of long-term care residents with clinically suspected or lab confirmed influenza A or B. A clinically suspected case is one in which the patient meets the criteria of influenza-like illness and there is confirmation of influenza A or B circulating within the facility or surrounding community.
- For prophylaxis of long-term care residents where the facility has an influenza A or B outbreak. Prophylaxis should be continued until the outbreak is over. An outbreak is declared over 7 days after the onset of the last case in the facility.

\* In these criteria, *long-term care facility* refers to a licensed nursing home and does not include special care homes.

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## DRUGS REVIEWED AND NOT LISTED

The review of the following products found they did not offer a therapeutic and/or cost advantage over existing therapies. Requests for special authorization will not be considered.

<b>Botulinum Toxin Type A</b>	(Botox®)	200 Allergan units/vial
<b>Canakinumab</b>	(Ilaris®)	150mg vial
<b>Prasugrel hydrochloride</b>	(Effient®)	10mg tablets
<b>Sapropterin</b>	(Kuvan®)	100mg tablets