

**Date :** August 6, 2010 / *Le 6 août 2010*

**To / Dest. :** Community Pharmacists / *Pharmaciens communautaires*

**From / Exp. :** Dr Paul Van Buynder, Deputy Chief Medical Officer / *Médecin-hygiéniste en chef adjoint*

**Copies :** NBPDP, NBPA, Central Serum Depot / *PMONB, APNB, Dépôt central de sérum*

**Subject / Objet :** TB medications- a change in supply and reimbursement of dispensing fees. /  
*Médicaments antituberculeux – modification du processus d’approvisionnement et de remboursement des frais connexes*

I write to inform you of a change in the process to obtain TB medications and for reimbursement of the costs associated with the provision of these medications.

Je vous écris pour vous informer de la modification du processus d’approvisionnement en médicaments antituberculeux et de remboursement des frais qui y sont rattachés.

Beginning Tuesday August 24, 2010, the New Brunswick Prescription Drug program will manage the claims process for reimbursement of the dispensing fees and the cost of all TB drugs on behalf of the Office of the Chief Medical Officer of Health.

À compter du mardi 24 août 2010, le Plan de médicaments sur ordonnance du Nouveau-Brunswick gèrera le processus de demande de remboursement des coûts des médicaments antituberculeux et des frais rattachés à la délivrance de ceux-ci au nom du Bureau du médecin-hygiéniste en chef.

Historically, *first-line* TB formulary medications were provided through the Central Serum Depot in Saint John. Requests for exceptional medications were adjudicated through the *CDC Unit Medical Officer* and provided through community pharmacies once approved. Dispensing fees and in the case of *second-line* medications, drug costs, were reimbursed through a paper-based process.

Les médicaments antituberculeux *de première intention* figurant sur la liste de médicaments assurés étaient jusqu’à maintenant fournis par le Dépôt central de sérum de Saint John. Les demandes exceptionnelles de médicaments étaient évaluées par le *médecin de l’Unité de contrôle des maladies transmissibles*; une fois les demandes approuvées, les médicaments étaient fournis par les pharmacies communautaires. Les frais de délivrance ainsi que les coûts de médicaments *de deuxième intention* étaient remboursés au moyen d’un processus manuel.

With the August change, community pharmacies will need to obtain *first-line* TB medications directly from their wholesaler or distributor. Reimbursement will occur through the existing electronic NBPDP process and fee schedule, the details of which will be sent to you by the NBPDP.

Après l’entrée en vigueur de ces modifications en août, les pharmacies communautaires devront obtenir les médicaments antituberculeux *de première intention* directement de leur grossiste ou de leur distributeur. Le remboursement des frais connexes sera effectué selon la grille tarifaire et le processus électronique actuels du PMONB. Les renseignements connexes vous seront communiqués par le PMONB.

There is no change to the prescription process. *First-line* drugs for the treatment of active or latent TB are provided to the client upon presentation of a prescription noting that they are for the "TB program". Please see the attached document, *TB Drug Formulary* for a list of pre-approved *first-line drugs*. As in the past, physicians must request approval for *second-line* medications directly through the *CDC Unit Medical Officer*. Medavie BlueCross will confirm with the CDC Unit that approval has been obtained prior to processing claims for these medications and/or dispensing fees.

This new process will allow for speedier compensation for community pharmacies as well as better surveillance of active and LTBI in New Brunswick.

Thank you for your continued contribution to the control of tuberculosis in New Brunswick.

Aucune modification n'est apportée au processus relatif aux ordonnances. Les médicaments *de première intention* pour le traitement de la tuberculose progressive ou latente sont fournis aux clients qui présentent une ordonnance sur laquelle est inscrite : « Plan TB ». Prière de consulter le document ci-joint intitulé *Formulaire de demande d'antituberculeux*; la liste des médicaments *de première intention* approuvés y figure. Comme c'était le cas auparavant, les médicaments *de deuxième intention* doivent être approuvés par le *médecin de l'Unité de contrôle des maladies transmissibles*. Le personnel de Croix Bleue Medavie vérifiera auprès de l'Unité de contrôle des maladies transmissibles si les ordonnances ont été approuvées avant de traiter les demandes de remboursement des coûts de ces médicaments ou des frais de délivrance connexes.

Ce nouveau processus permettra d'effectuer plus rapidement le remboursement des frais admissibles aux pharmacies communautaires et d'améliorer la surveillance de la tuberculose progressive et latente au Nouveau-Brunswick.

Je vous remercie de votre participation continue au contrôle de la tuberculose au Nouveau-Brunswick.

*Original signed by / Original signé par :*



D<sup>r</sup> Paul Van Buynder  
Deputy Chief Medical Officer / Médecin-hygiéniste en chef adjoint

Bulletin # 793

August 5, 2010

## NB PROVINCIAL TUBERCULOSIS (TB) DRUG PLAN NEW ELECTRONIC CLAIMS PROCEDURES

The New Brunswick Prescription Drug Program (NBPDP), on behalf of the Department of Health will be managing the claims process for community pharmacies seeking reimbursement for the dispensing and cost of drugs for the management of active or latent tuberculosis (TB) infection. The ability to submit claims electronically will be possible as of August 24, 2010.

NBPDP Plan "P" has been set-up to allow for electronic claims adjudication. For billing purposes, the following procedures should be followed when any patient (regardless of permanent residence) presents with a prescription on which "TB Plan" is written by the prescriber.

- A patient profile should be set-up as for any patient. In the patient ID field enter the patient's NB Medicare number. In the event the patient has not been issued a NB Medicare number, then the generic ID 999999999 may be used. *The patient's profile should be updated as soon as possible once a NB Medicare number has been issued.* Note: the above process applies to NBPDP beneficiaries as well.
- In the Plan field enter "P".
- In the Patient ID field enter the NB Medicare number.
- In the Drug Cost field(s) enter the appropriate AAC or MAP.
- In the Dispensing Fee field enter \$9.40 or the applicable fee as per Schedule 3 of the Regulations to the *Prescription Drug Payment Act* (dispensing physicians will be reimbursed 80% of the applicable fee).

**IMPORTANT NOTE:** TB drugs will no longer be supplied by the provincial serum depot. Pharmacies should order TB drugs directly from their wholesaler or distributor. The New Brunswick TB Drug Formulary is listed on page 2. Should second-line medications other than those listed on the TB Formulary be indicated, the prescriber must request special authorization (SA) by contacting the CDC Medical Officer, once an SA request has been approved the system will accept the claim automatically. Pharmacists should consider inquiring to NBPDP (1-800- 332-3691) on the status of a second-line medication SA approval before processing or placing their drug order.

For additional information on the treatment of active and latent tuberculosis, please refer to the Canadian Tuberculosis Standards, 6th edition, 2007  
<http://www.phac-aspc.gc.ca/tbpc-latb/pubs/tbstand07-eng.php>

## NEW BRUNSWICK TB DRUG FORMULARY

Drug/Form/Route/Strength			Brand/Generic Name	DIN	Manufacturer	\$
<b>Ethambutol</b>						
Tab	Orl	100mg	Etibi	247960	VLN	AAC
		400mg	Etibi	247979		
<b>Isoniazid</b>						
Tab	Orl	100mg	pms-Isoniazid	577790	PMS	AAC
		300mg	pms-Isoniazid	577804	PMS	
			Dom-Isoniazid	2181428	DOM	
Syr	Orl	50mg/5mL	pms-Isoniazid	577812	PMS	
<b>Pyrazinamide</b>						
Tab	Orl	300mg	Rifater	2148625	SAV	AAC
		500mg	pms-Pyrazinamide	618810	PMS	
<b>Rifampin</b>						
Cap	Orl	150mg	Rifadin	2091887	SAV	AAC
			Rofact	393444	VLN	
		300mg	Rifadin	2092808	SAV	
			Rofact	343617	VLN	