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Pharmacy Services Compensation Update

The new four-year Memorandum of Understanding (MOU) between the Alberta government and the Alberta Pharmacists' Association supports the expanding role of pharmacists in communities across Alberta. This MOU provides for the Compensation Plan for Pharmacy Services to be updated on April 1, 2014. Important changes were agreed to that will enhance accessibility for Albertans to primary health care services provided by pharmacists.

The April 1, 2014 Compensation Plan for Pharmacy Services has been posted online at http://www.health.alberta.ca/professionals/fees.html. The Alberta Pharmacists' Association web site at http://www.rxa.ca will also contain a link to the Compensation Plan.

A high-level description of the new pharmacy services, amendments to existing pharmacy services and administrative rule changes follows. Please refer to the Compensation Plan for Pharmacy Services for details.

New Pharmacy Services

Tobacco Cessation Services — An SMMA Tobacco Cessation Initial Assessment may be claimed for a resident using a tobacco product daily and willing to receive Tobacco Cessation Services. Up to four SMMA Tobacco Cessation Follow-up Assessments may be claimed during the 365 day period after the SMMA Tobacco Cessation Initial Assessment. An SMMA Tobacco Cessation Initial Assessment and the related SMMA Tobacco Cessation Follow-up Assessments may be claimed even though the resident has already received a CACP, SMMA or Diabetes SMMA in the previous 365 days. Tobacco Cessation Services are defined as the provision by a clinical pharmacist of evidence-based tobacco cessation support and counselling including pharmacotherapy support. Use ICD-9 diagnosis code 305.1 for Tobacco Use.

SMMAs for Albertans with Diabetes Mellitus — An SMMA Diabetes Initial Assessment and SMMA Diabetes Follow-up Assessments may be claimed for Albertans with diabetes mellitus taking at least one Schedule 1 drug or insulin.

Discontinuation of a Prescribed Schedule 1 Drug — An Assessment for an Adaptation of a Prescription may be billed when adaptation results in the discontinuation of a prescribed Schedule 1 drug for a resident if the prescribed drug confers little or no benefit and/or excessive risk of harm.

Amended Pharmacy Services

Section 3 Assessments — The Section 3 Assessments (Prescription Renewal, Adaptation of a Prescription, Administration of a Product by Injection, Prescribing at Initial Access or to Manage Ongoing Therapy, Prescribing in an Emergency, Refusal to Fill a Prescription, Trial Prescription, Administration of a Publicly Funded Vaccine), may be claimed during the 365 day period after an initial assessment (CACP, SMMA, diabetes SMMA or tobacco cessation SMMA).

Two injections per Day — A maximum of two Assessments for the Administration of a Product by Injection may be billed per day per resident. Assessments for the Administration of a Product by Injection are excluded from the one fee per day limitation.

Updated CACPs and SMMAs — Updated CACPs and SMMAs no longer require the signature of the resident.

Administration of Publicly Funded Vaccines — Payment for Assessments for the Administration of a Publicly Funded Vaccine has been transferred from the Alberta Public Health Activities Program to the Compensation Plan for Pharmacy Services. Assessments for the Administration of a Publicly Funded Vaccine are excluded from the one fee per day limitation. Further details will be provided in advance of the next influenza season.

Definition of Obesity — The definition of obesity has been changed to a Body Mass Index (BMI) of "30 or more."

Definition of Mental Disorders — The definition of mental disorders has been changed to ICD-9 diagnosis codes 290 to 319, excluding codes 303, 304 and 305.1.

Administrative Rule Changes

Four-Year Term — The term of the Compensation Plan is April 1, 2014 to March 31, 2018, to align with the term of the new four-year MOU signed by the Alberta government and the Alberta Pharmacists' Association.

Alberta Blue Cross Pharmaceutical Services Provider Agreement – The Compensation Plan has been amended to use the new name of the new agreement between Alberta Blue Cross and a pharmaceutical services provider.

365 Day Rule — The concept of "service year" has been replaced with "per 365 day period," "next 365 days" or "previous 365 days," as appropriate. This is known colloquially as the "365 day rule." The initial assessments (CACP, SMMA, diabetes SMMA and tobacco cessation SMMA) may be billed once per 365 day period. The related Follow-up Assessments may be billed for the purpose of updating the initial assessment which has been completed within the previous 365 days.

\$0 Claim for CACP or SMMA Funded by Alberta Health Services (AHS)—Where AHS has paid a clinical pharmacist for a CACP or SMMA similar in form and effect as a CACP or SMMA provided under the Compensation Plan, a fee of \$0 may be claimed. This will permit Follow-up Assessments to be claimed for the purpose of updating the AHS-funded CACP or SMMA which has been completed within the previous 365 days.

Substitute Decision Maker — The Compensation Plan is intended to be a fee schedule. Clinical pharmacists are able to look to the Alberta College of Pharmacists for guidance with respect to provision of pharmacy services to residents without sufficient mental capacity to give consent. As such, reference to "Resident's Personal Representative" has been removed from the Compensation Plan and replaced with Section 2(16) on consent and use of a substitute decision maker.

Please refer to the attached Pharmacy Services Price List, with PINs, Special Service Codes and Intervention Codes.

When you have questions:

For assistance with benefit or claim inquiries, please contact an Alberta Blue Cross Pharmacy Services Provider Relations call centre representative at:

780-498-8370 (Edmonton and area) • **403-294-4041** (Calgary and area) • **1-800-361-9632** (toll free) **FAX 780-498-8406** (Edmonton and area) • **FAX 1-877-305-9911** (toll free)



Pharmacy Services Price List, PINs, Special Services Codes and Intervention Codes, as of April 1, 2014 New and amended text is shown in bold print.

| Pharmacy Service | Eligible Amount | Product Identification Number (PIN) | Special Service Code (SSC) | Intervention Code |
|--|--|--|----------------------------------|---|
| Section 3(1) – Assessment for a Prescription Renewal | \$20 | 71111 81111 (with APA) | F | |
| Section 3(2) – Assessment for an Adaptation of a Prescription means (a) altering the dosage or regimen for a Schedule 1 drug that has been prescribed for a Resident; (b) substitution of another Drug for a prescribed Schedule 1 drug for a Resident if the substituted Drug is expected to deliver a therapeutic effect that is similar to the therapeutic effect of the prescribed Drug; or (c) discontinuation of a prescribed Schedule 1 drug for a Resident if the prescribed Drug confers little or no benefit and/or excessive risk of harm. | \$20 | 71111 81111 (with APA) | Н | |
| Section 3(3) – Assessment for the Administration of a Product by Injection | \$20 | 71111 81111 (with APA) | J | |
| Section 3(4) – Assessment for Prescribing at Initial Access or to Manage Ongoing Therapy | \$25 | 81116 (with APA) | К | |
| Section 3(5) – Assessment for Prescribing in an Emergency | \$20 | 71111 81111 (with APA) | I (alphabet) | |
| Section 3(6) – Assessment for Refusal to Fill a Prescription | \$20 | 71111 81111 (with APA) | 1 (number) | |
| Section 3(7) – Assessment for a Trial Prescription | \$0 Dispensing fee charged to patient's coverage plan | DIN of new prescription for newly prescribed drug that is eligible for a trial | | MT – Trial Rx Program |
| | \$20 | 71111 81111 (with APA) | H OR | MT – Trial Rx Program |
| | | | M | VN – Trial not tolerated, patient advised MD VQ – Trial OK, no side effects/ concerns |
| Section 3(8) – Assessment for the Administration of a Publicly Funded Vaccine | \$20 | Immunization Reason Codes | | |
| Section 4(1) – CACP Initial Assessment | \$100 \$125 | 71114 81114 (with APA) | L | |
| Section 4(5) – CACP Follow-up Assessment | \$20 \$25 | 71115 81115 (with APA) | М | |
| Section 5(1)(a) – SMMA Initial Assessment | \$60 \$75 | 71112 81112 (with APA) | L | |
| Section 5(5)(a)(i) – SMMA Follow-up Assessment | \$20 \$25 | 71113 81113 (with APA) | М | |
| Section 5(1)(b) – SMMA Diabetes Initial Assessment | \$60 \$75 | 71117 81117 (with APA) | L | |
| Section 5(5)(a)(ii) – SMMA Diabetes Follow-up Assessment | \$20 \$25 | 71117 81117 (with APA) | М | |
| Section 5(1)(c) – SMMA Tobacco Cessation Initial Assessment | \$60 \$75 | 71118 81118 (with APA) | L | |
| Section 5(5)(a)(iii) – SMMA Tobacco Cessation Follow-up Assessment | \$20 \$25 | 71118 81118 (with APA) | М | |