

Blood Glucose Test Strip (BGTS) Benefit Changes for Pharmacare, Employment and Income Assistance, and Palliative Care Drug Access Programs

Frequently Asked Questions

1) Will DPIN claims submission for BGTS change?

- Pharmacists will continue to submit claims for BGTS in the same manner as before but will use the new therapeutic category PINs instead of the previously established PINs assigned to individual brands of BGTS.
- Pharmacists may experience more claims that are not accepted due to the new approved quantities.
- Some pharmacy software vendors have worked out a process to attach the 3 PINs to all of the test strips currently covered. The drug file in the software system will retain its current PIN for identification purposes. On June 15, the pharmacy will be responsible for choosing the appropriate PIN from the drug file during adjudication.

2) Is the BGTS approved quantity based on a benefit year or a 365 day period?

- BGTS quantity is based on a benefit year. **For 2017/2018 only**, the benefit year will begin on June 15, 2017 and end March 31, 2018. BGTS purchased after June 15, 2017 will be included in the number of BGTS covered in this fiscal year.
- On the date a BGTS claim is submitted, the Drug Program Information Network (DPIN) adjudicates against the total number of BGTS claimed up to the submission date according to the appropriate PIN.
 - If the patient has not reached his/her maximum approved quantity over the previous fiscal year, he/she will pay according to his/her deductible.
 - If the patient has reached his/her maximum approved quantity over the previous fiscal year, the patient would be responsible for the cost of the BGTS above the approved amount.
- The BGTS approved quantity applies to on-line, pharmacy paper claims and submitted patient receipts.

3) How will a pharmacist know when their patient has reached their maximum approved quantity?

- A **CR** (Exceeds maximum for this type of service/item) response code will display during claim adjudication when the total strips dispensed in a benefit year has exceeded the approved quantity (200, 400 or 3650).

4) What happens if a patient's diabetes medication management protocol changes?

- When a claim is being submitted, the pharmacist should confirm that the appropriate treatment regimen, as identified by PIN, is used. If the medication management protocol changes, the pharmacist should document the change (for auditing purposes), and update the PIN. The benefit limit will be altered automatically.

5) How is a pharmacist paid for dispensing BGTS? What should the professional fee be?

- Pharmacists are paid for dispensing BGTS as per the fee schedule on file with Provincial Drug Programs (PDP). The professional fee should be as indicated in the Schedule A or Schedule B submitted to PDP.

6) How will this change affect the patient?

- For the majority of patients, there will be no noticeable change. For patients who consume volumes of BGTS beyond the new maximums, education will be needed regarding the rationale for testing blood glucose to encourage patients to test at an appropriate frequency. Individuals who feel they need more BGTS than the maximum benefit allowed should be encouraged to speak with their health care provider. Where appropriate, Exception Drug Status (EDS) applications can be made.

7) How does a pharmacist manage a situation where a patient moves from one medication therapy category to another that requires use of a different PIN?

- If moving to a higher benefit limit i.e. moving from a low risk to a high risk oral medication or moving from an oral medication to including use of insulin in medication therapy regimen.

When the patient comes to the pharmacy to refill their blood glucose test strip prescription, the pharmacist should use the new PIN with a higher benefit and dispense blood glucose test strips accordingly to assist with patient need.

- If moving to a lower benefit limit i.e. moving from insulin therapy to an oral medication or moving from a high risk to a low risk oral medication or therapy regimen using lifestyle and diet alone.

A PIN is assigned for a complete fiscal year (April 1 to March 31 of the following year). When the patient comes to the pharmacy to refill their blood glucose test strip prescription, the pharmacist should use professional judgement in dispensing additional strips. If, for the current fiscal year, the patient has already exceeded the benefit amount for the new PIN, the pharmacist should document the rationale for dispensing additional strips when dispensing, and dispense a reasonable amount for the patient to be able to support management of their diabetes therapy under the new regimen. For instance, if a patient moves from a high risk to a low risk oral therapy, they may have already received 300 or 400 test strips in the fiscal year. If they do not have sufficient test strips to enable them to test as per the lower regimen for the remainder of the year, the pharmacist should dispense some additional strips and document the rationale.

8) How can a request for additional BGTS in a fiscal year be made?

- Physicians and Nurse Practitioners prescribing within their scope of practice may apply for EDS for patients as per exception criteria. Requests can be submitted by fax. At this time, pharmacists are not able to make requests for EDS for BGTS.
- The fax number is (204) 942-2030 or 1-877-208-3588. Please provide the following:
 - **Patient's Name**
 - **Patient's Personal Health Information Number (PHIN)**
 - **Reason for increase (see criteria above)**
 - **Primary Care Provider Name and Phone Number**

9) What should be done if a patient loses their BGTS?

There have been no changes made to the process for a patient who with lost/stolen medication. The patient is entitled to receive benefits for the number of BGTS given their current therapy. If they have exhausted their maximum allowable amount, they are not prevented from purchasing additional test strips. However, they will not be eligible for benefit status.

10) Where can pharmacists and other health care professionals find resources to assist with patient education about the appropriate use of BGTS?

- The Canadian Agency for Drugs and Technologies in Health (CADTH) developed tools to help transition the new recommendations from paper into practice. Content is available in English, French, Chinese Simplified, Chinese Traditional, Punjabi, Farsi, Korean, and Vietnamese.
- These tools can be found at <https://www.cadth.ca/smbg/tools>
- Additional patient educational information and The Diabetes Canada Guidelines, updated in 2013, can be found at: <http://guidelines.diabetes.ca/bloodglucoselowering/smbgrecommendationsheet>
- Manitoba Health, Seniors and Active Living (MHSAL) has posted a Frequently-Asked Questions document which can be viewed at http://www.gov.mb.ca/health/pharmacare/docs/coverage_changes.pdf
- Pharmacists are encouraged to share these resources with their patients, either directing patients to these sites to download and review the documents or by printing the documents to distribute to patients as a tool when discussing the changes.

11) What is the appropriate method for entering vacation supply?

There have been no changes made to the vacation supply policy. A patient is eligible for the amount of test strips given their current therapy regardless of whether they are staying in Manitoba or on vacation.

12) Is it possible to dispense BGTS in amounts less than 100?

- Yes, Pharmacare pays for BGTS on a unit basis (per strip) and not on package size.

13) Should I be concerned about being audited?

- MHSAL has the authority to audit and recover funds for claims submitted that are inconsistent with billing procedures and/or any other MHSAL policy or regulation.
- After August 1, 2017, Provincial Drug Programs (PDP) will actively monitor claims data for BGTS. Specifically, PDP will track and provide feedback to pharmacies that have shown a pattern where clients not on insulin are receiving quantities of test strips above the defined limit.
- In exercising this discretion, consideration will be given where Pharmacare recipients have attended multiple pharmacies. Pharmacies that are continually non-compliant with this change after a three-month period will be subject to audit and recoveries.
- PDP would encourage pharmacy providers to maintain documentation in situations where clients not on insulin are receiving high quantities of test strips.

14) How will a patient know how many strips they have remaining in their benefit year?

- To confirm the number of BGTS remaining for a patient in their benefit year please contact the DPIN Help Desk:

Pharmacy Line: (204) 786-8000 in Winnipeg or at 1-800-663-7774 outside Winnipeg

Public Inquiries: (204) 786-7141 in Winnipeg or at 1-800-297-8099 outside of Winnipeg TTY (204) 774-8618.

Information is also available at <http://www.gov.mb.ca/health/mdbif/index.html>