

**NIHB Extemporaneous Mixture Policy – Change to Pseudo-DINs and Fee Structure for Extemporaneous Mixtures (Compounds) in Manitoba and Northern Region**

Effective November 4, 2013, NIHB will be replacing the current extemporaneous mixture open-benefit pseudo-DINs (PDINs) 00999999 and 0990019 with PDINs that are specific to the mixture being submitted. This means that as of November 4, 2013, providers will no longer be able to bill using PDINs 00999999 and 0990019 and the following message will be sent back: “DIN/PIN/GP# not a benefit”. If this happens, providers are encouraged to refer to the PDINs in Table 1 below to identify the correct billable PDIN for their claim. If providers are unable to determine the appropriate PDIN, then please call Express Scripts Canada (ESC) at 1-888-511-4666. If there is no assigned PDIN for your product, please contact the Drug Exception Centre (DEC) at 1-800-580-0950 (English) or 1-800-281-5027 (French).

By using PDINs in their respective CPhA categories, NIHB can identify what types of extemporaneous mixtures are being reimbursed by the Program, and compensate pharmacy providers a higher dispensing fee for more complex mixtures. Additionally, the new process will ensure providers know upfront whether the extemporaneous mixture claim is an eligible benefit.

*Table 1: List of Pseudo-DINs (PDIN) and Pricing Schedule*

<b>CPhA category</b>	<b>New Dispensing Fee</b>	<b>PDIN</b>	<b>Extemporaneous Mixture</b>	<b>Listing status</b>
Compounded topical cream	1.5x DF	99500000	Hydrocortisone powder & clotrimazole cream	Open
		99500001	Hydrocortisone cream & clotrimazole cream	Open
		99500002	Menthol & camphor in corticosteroid cream	Open
		99500003	Salicylic acid in corticosteroid cream	Open
		99500004	Miscellaneous topical compounded cream	Limited Use
Compounded topical ointment	1.5xDF	99501000	LCD in corticosteroid ointment	Open
		99501001	Salicylic acid in non-medicated ointment	Open
		99501002	Sulfur in non-medicated ointment	Open
		99501003	Nifedipine in calmoseptine ointment	Open
		99501004	Miscellaneous compounded topical ointment	Limited Use
Compounded external lotion	1.5xDF	99502000	Clindamycin in Dilusol	Open
		99502001	Menthol & camphor in corticosteroid lotion	Open
		99502002	Miscellaneous compounded external lotion	Limited Use
Compounded internal use liquid	1.75xDF	99503000	Hydrochlorothiazide 5 mg/mL	Open
		99503001	Spironolactone 5 mg/mL	Open
		99503002	Omeprazole 2 mg/mL	Open
		99503003	Amlodipine 1mg/ml	Open
		99503004	Nitrofurantoin 10 mg/mL	Open
		99503005	Domperidone 1 mg/mL	Open
		99503006	Tranexamic dental mouthwash 100 mg/mL	Open
		99503007	Dexamethasone 1 mg/mL	Open

CPhA category	New Dispensing Fee	PDIN	Extemporaneous Mixture	Listing status
		99503008	Prednisone 5 mg/mL	Open
		99503009	Aldactazide 5 mg/mL	Open
		99503010	Lansoprazole 3 mg/mL	Open
		99503011	Baclofen 5mg/ml	Open
		99503012	Metronidazole 50mg/ml	Open
		99503013	Enalapril 1mg/ml	Open
		99503014	Propranolol 1mg/ml	Open
		99503015	Metoprolol 10mg/ml	Open
		99503016	Amiodarone 5mg/ml	Open
		99503017	Trimethoprim 10mg/ml	Open
		99503018	Allopurinol 20mg/ml	Open
		99503019	Azathioprine 50mg/ml	Open
		99503020	Clonazepam 0.1mg/ml	Open
		99503021	Clonidine 0.1mg/ml	Open
		99503022	Rifampin 25mg/ml	Open
		99503023	Sotolol 5mg/ml	Open
		99503024	Urosodiol 50mg/ml	Open
		99503025	Miscellaneous compounded internal use liquid	Limited Use
Compounded external powder	1.5xDF	99504000	Miscellaneous compounded external powder	Limited Use
Compounded internal powder	1.75xDF	99505000	Miscellaneous compounded internal powder	Limited Use
Compounded injection or infusion	2xDF	99506015	Iron sucrose infusion	Open
		99506021	Miscellaneous compounded injection or infusion	Limited Use
Compounded eye/ear drop	2xDF	99507000	Miscellaneous compounded eye/ear drop	Limited Use
Compounded suppository	2xDF	99508000	Miscellaneous compounded suppository	Limited Use

#### Questions and Answers for Providers:

**1. Are there any extemporaneous mixtures (compounds) no longer being covered by the NIHB Program as a result of this policy change?**

No. NIHB is simply changing the PDINs to make them more specific and to enable NIHB to identify the types of extemporaneous mixtures that are being reimbursed.

**2. What if I need to submit a claim for an extemporaneous mixture that is not on this list?**

Each CPhA category has a Limited Use miscellaneous PDIN assigned. Determine the correct CPhA category and PDIN for your mixture then call the Drug Exception Centre to request prior approval for the claim.

**3. I have billed this extemporaneous mixture for my patient before and was paid without having to call the Drug Exception Centre. Why do I have to call now?**

Previously, any number of mixtures could be billed under the open-benefit PDIN, and NIHB could only determine by audit whether that mixture met Program criteria. This resulted in audit recoveries for items that were dispensed by the provider. Now, pharmacy providers will know upfront whether their mixture is an eligible benefit or not.

**4. Prescribers may write prescriptions for open-benefit extemporaneous mixtures that are not on your list of PDINs. What can be done?**

NIHB will be reviewing requests for extemporaneous mixtures billed under the “Miscellaneous” PDINs to identify common requests. If certain mixture requests are seen frequently, a PDIN for the mixture will be created, and this will be communicated to providers. In the meantime, continue billing using the Miscellaneous PDIN for the appropriate CPhA category and call the Drug Exception Centre for approval.

**5. Pharmacy providers are getting reimbursed differently for different types of extemporaneous mixtures (compounds). Why?**

Previously, NIHB reimbursed providers at a rate of 1.5 x dispensing fee for all extemporaneous mixtures. NIHB recognizes that some extemporaneous mixtures require special skills and equipment and this is reflected in the new reimbursement structure

**6. What types of extemporaneous mixtures are eligible benefits?**

Eligible benefits include those that meet the following criteria:

- a. Open benefit ingredients on the NIHB Drug Benefit List and contains no ingredients requiring prior approval;
- b. Ingredients with a documented client-specific prior approval authorization on file;
- c. Ingredients that are limited use/exception status (requires prior approval);
- d. Pharmaceutical powders of eligible ingredients may be used in lieu of tablets/capsules. These powders must be billed at AAC and must not exceed the maximum allowable AAC, which is based on the price of the DIN of the comparable listed tablet or capsule.

**7. What bases are eligible for reimbursement when compounding topical products?**

For eligible topical extemporaneous mixtures only, the following bases are eligible for reimbursement:

Glaxal Base	Cetaphil
Aquaphor	Lubriderm
Cliniderm	Eucerin
Dermabase	Mineral oil
Petrolatum (Vaseline)	Lassar’s paste
Cold cream	Dilusol
Lanolin	Cocoa Butter
Compound tincture of benzoin (Friar’s balsam)	Zinc oxide creams/ointments
Ihle’s paste	

If providers have a prescription for a topical extemporaneous mixture in a base that is not on this list, please bill the claim using the applicable miscellaneous PDIN and call the Drug Exception Centre for prior approval.

**8. What types of extemporaneous mixtures are not benefits under NIHB?**

Below are a list of ineligible ingredients and products (exclusions):

- a) Products that recreate commercial products that are available in the same strength unless there is a shortage/back-order of these products (prior approval required)
- b) Investigational products
- c) Hair growth stimulants, e.g., minoxidil in topical preparations
- d) Fertility and impotence drugs, e.g., Caverject®
- e) Compounded preparations containing any hormones
- f) Homeopathic preparations
- g) Natural Health Products
- h) Products used for cosmetic purposes
- i) Reconstitution of a dry powder oral preparation with distilled water in accordance with its product monograph
- j) Reconstitution of non-sterile commercially available products such as BenzaClin
- k) Pre-made parenteral infusion bags where no alterations are required to the product prior to administration
- l) Reimbursement for supplies used in the process of compounding (e.g. alcohol wipes, syringes, needles, papers etc.)
- m) Reimbursement for supplies used to dispense final product (e.g. ointment jars, bottles, syringes, atomizers, nasal spray bottles, eye droppers etc.)
- n) Reimbursement for non-essential, non-medicinal ingredients (e.g. flavourings, sweeteners etc.)
- o) Topical mixtures where the only eligible medicinal ingredient is hydrocortisone in strengths less than 0.5%.

**9. I have a prescription for a mixture that doesn't meet open benefit criteria, but is not on your list of exclusions. What do I do?**

Other requests may be considered on a case-by-case basis. Determine the correct CPhA category and PDIN for your mixture then call the Drug Exception Centre to request prior approval for the claim.

**Contact Information:**

Express Scripts Canada (ESC) 1-888-511-4666

NIHB Drug Exception Centre (DEC) 1-800-580-0950 (English) or 1-800-281-5027 (French)