Number 346 • June 2012



A BULLETIN FOR PHARMACY SERVICE PROVIDERS FROM ALBERTA BLUE CROSS

Compensation for Pharmacy Services

Background

The Alberta Government supports an active participating role for Alberta's pharmacists in providing pharmacy services as part of the health care system. In February, 2012, the government committed to compensating community pharmacies when pharmacists provide select pharmacy services to Albertans.

The Ministry of Health, along with pharmacy representatives and the Alberta Pharmacists' Association, has developed a Compensation Plan for pharmacy services to compensate Alberta's pharmacists for offering these pharmacy services to Albertans, and provide them with the opportunity for more involvement in the health outcomes of their clients and patients.

In order to participate, you must be a pharmacist who is registered on the clinical register with the Alberta College of Pharmacists, and have read and be aware of the eligibility rules discussed in the Compensation for Pharmacy Services, July 2012.

Effective July 1, 2012, the Plan will compensate pharmacists for the identified pharmacy services pharmacists provide; these services will be reimbursed through a claim for compensation to Alberta Blue Cross.

What is eligible and how to submit your claim transaction for pharmacy services

On behalf of Alberta Health, Alberta Blue Cross will be facilitating payment to Alberta pharmacies for the involvement of their pharmacists in the Pharmacy Services plan. In preparation for this Plan, Alberta Blue Cross has communicated with pharmacy software vendors to ensure they have made the necessary upgrades to data element fields prior to program implementation. You may wish to contact your pharmacy software vendor to ensure your pharmacy software is updated to handle transactions associated with this Plan.

Plan highlights

Pharmacies will receive compensation for the assessment and professional opinion when providing these pharmacy services. The Comprehensive Annual Care Plan (CACP) and Standard Medication Management Assessment (SMMA) include initial and follow-up assessment fees. Pharmacists with Additional Prescribing Authorization (APA) will be compensated at a higher remuneration rate for providing these and other eligible pharmacy services. Specific PINs have been created to indicate the pharmacy service provided and to differentiate when the pharmacist has APA for claim transactions.

Pharmacy services include:

Comprehensive Annual Care Plan (CACP)

A CACP includes the completion of a patient assessment, a Best Possible Medication History (BPMH), identification of and appropriate response to any drug therapy problems, agreed goals of medication therapy, as well as a progress monitoring plan. CACPs are designed to help Albertans with complex needs better manage their medications.

Compensations for pharmacy services continued . . .

To be eligible for this pharmacy service, a patient must have:

- Two or more chronic diseases or one chronic disease and one or more risk factors.
 - A chronic disease means a diagnosis of:
 - o hypertensive disease,
 - o diabetes mellitus,
 - o chronic obstructive pulmonary disease,
 - o asthma.
 - heart failure.
 - o ischemic heart disease, or
 - o mental disorders.
 - A risk factor means a diagnosis of:
 - o tobacco usage,
 - o obesity, or
 - addiction.
- A pharmacist may claim one assessment resulting in a CACP per service year (July to June) per eligible patient and follow-up assessments resulting in an Updated CACP as follows:
 - The patient must have an in-person encounter with the pharmacist;
 - The patient is following the instructions set out in the CACP regarding a follow-up assessment:
 - The patient has been discharged from an approved hospital within the last 14 calendar days; or
 - The patient has been referred by another health professional (other than a pharmacist) for a follow-up assessment.

Standard Medication Management Assessment (SMMA)

A SMMA is similar to the CACP, whereby a complete patient assessment, a Best Possible Medication History (BPMH), identification of and appropriate response to any drug therapy problems, agreed goals of medication therapy, as well as a progress monitoring plan are documented. SMMAs are designed to help Albertans better manage their medications. In order to be eligible for a SMMA, a patient must have one Chronic Disease (as defined above) and be taking four or more different medications (Schedule 1 drugs or insulin).

 A pharmacist may claim one assessment per eligible patient per service year and follow-up SMMA assessments in accordance with the follow-up assessment criteria outlined for a CACP above.

Compensation for pharmacy services continued . . .

For CACPs, SMMAs, follow-up CACPs, or follow-up SMMAs, the initial and follow-up assessments can occur at the same or different Alberta pharmacies, by the same or different Alberta pharmacists.

In order to conduct a follow-up assessment, the pharmacist must have a complete copy of the most recent Care Plan.

Other pharmacy services payable under the Compensation Plan for Pharmacy Services include:

- Patient assessment for prescription renewal.
- Assessment for an adaptation of a prescription (excluding substituting a generic drug for the prescribed drug and altering the formulation for a Schedule 1 drug).
- Assessment for prescribing in an emergency.
- Assessment and administration of a product by injection.
 - Only pharmacists who have been authorized to administer products by injection are eligible to perform this service.
 - In accordance with the Standards of Practice, pharmacists may not administer injections to children less than five years of age.
 - Eligible products are those listed as an injection on the Alberta Drug Benefit List. Travel vaccinations are not eligible.
- Assessment for prescribing at initial access or to manage ongoing therapy.
 - Only pharmacists who have Additional Prescribing Authorization (APA) from the Alberta College of Pharmacists may perform this service.

Post claim verification

On behalf of Alberta Health, Alberta Blue Cross will be conducting post claim verifications on a sample of pharmacy claim transactions under the Compensation Plan for Pharmacy Services.

Highlights of Mandatory transactional data elements:

- All transactions for the pharmacy services framework are to be submitted under carrier code16.
- An individual's Personal Health Number (PHN) must be used as the client number. As this program covers all Albertans who are enrolled in the Alberta Health Care Insurance Plan, PHNs will be used to confirm eligibility in conjunction with other required data elements including patient date of birth, gender, surname and first name. (Netcare should be accessed to validate PHNs and demographic information See Benefact 328, January 2012).
- Pseudo-Identification Number (PIN) and Special Service Code (SSC) are found within this Benefact for claim submission
- The pharmacy service fee is to be entered into the special service fee field.



Compensation for pharmacy services continued . . .

PINs, SSCs and eligible amounts under the program

PINs will be used to differentiate the pharmacy service type provided and whether the service was provided by an APA pharmacist or not.

PIN	PIN description	Allowable special services code (SSC)	Eligible amount
00000071111	Patient Assessment without APA	F, H, I, J	\$20
00000071112	SMMA Initial Assessment without APA	L	\$60
00000071113	SMMA Follow Up Assessment without APA	М	\$20
00000071114	CACP Initial Assessment without APA	L	\$100
00000071115	CACP Follow Up Assessment without APA	М	\$20
00000081111	Patient Assessment with APA	F, H, I, J	\$20
00000081112	SMMA Initial Assessment with APA	L	\$75
00000081113	SMMA Follow Up Assessment with APA	M	\$25
00000081114	CACP Initial Assessment with APA	L	\$125
00000081115	CACP Follow Up Assessment with APA	М	\$25
00000081116	Initial Access Prescribing with APA	K	\$25

SSC	Code value - clinical activity	
F	Renew Previous prescription	
Н	Adapt prescription to current need	
1	Prescribed emergency supply of medication	
J	Medication administered by injection	
K	Prescribe 'initial supply' of medication	
L	Initial assessment of patient's need	
М	Follow-up assessment of patient's needs	

Incorrect submission of the PIN and SSC combination may result in claim rejection of **D1 – DIN/PIN/GP/SSC not a benefit.** For example, PIN 00000071113 SMMA follow-up is submitted with SSC of **F** or **H** or **I** or **J**.



For more information on pharmacy topics, please contact your Pharmacy Services representatives at:

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