

**PART 1**

**SECTION 1**

Policies  
and  
Guidelines

# Introduction

## Acknowledgments

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Alberta Health acknowledges the important role Alberta Blue Cross continues to play in the production of the List and in the development of an overall strategy and initiatives to better manage Alberta Health sponsored drug programs.

## Eligibility

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The Alberta Drug Benefit List (the “List” or “ADBL”) defines the Drug Products and Devices that are covered by Alberta government-sponsored drug programs. These programs are for Albertans and their dependents who are covered by:

1. the Alberta Blue Cross *Non-Group Coverage (Group 1)* offered by the Alberta Health Care Insurance Plan, or
2. the Alberta Blue Cross *Coverage for Seniors (Group 66)* provided to all Alberta senior citizens, or
3. the drug coverage provided to individuals approved by Alberta Health for *Palliative Coverage*. (For these individuals the *Palliative Coverage Drug Benefit Supplement* must also be considered), or
4. the drug coverage provided to Alberta Human Services clients. (For these clients the *Alberta Human Services Drug Benefit Supplement* must also be considered.)

## Additional Notes Regarding Application of the List

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1. The List is not intended to be used as a scientific reference or prescribing guide.
2. Formularies used by hospitals and continuing care facilities are developed independently of the List.
3. Drugs are classified according to the Pharmacologic–Therapeutic Classification (PTC) developed by the American Society of Health-System Pharmacists for the purpose of the American Hospital Formulary Service.

Permission to use this system has been granted by the American Society of Health-System Pharmacists. The Society is not responsible for the accuracy of transpositions or excerpts from the original content.

Where necessary, additional PTCs may have been assigned by Alberta Health to facilitate product location in the List.

4. Where appropriate, the *Compendium of Pharmaceuticals and Specialties*, published by the Canadian Pharmacist’s Association, was used as a reference source for the trade name, generic name, Manufacturer, strength and dosage form.

**The Canadian Pharmacist’s Association is not responsible for the accuracy of transpositions or excerpts from the original content.**

5. Other reference sources used for the trade name, generic name, manufacturer, strength and dosage form are:
  - Completed Drug Notification Form (DNF)
  - Notice of Compliance (NOC)
  - Product Monograph

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## ALBERTA DRUG BENEFIT LIST

6. Drug Identification Numbers (DINs) and Natural Product Numbers (NPNs) listed reflect current Manufacturer information available as the date this was published.
7. Alberta Health reserves the right to make changes, without notice, to the List through the on-line Interactive List, and any such changes to the on-line Interactive List are effective on the date of the change (unless otherwise stated) and regardless of the date of publication of the pdf version or updates.

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## Legend

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- ❶ Pharmacologic–Therapeutic Classification.
  - ❷ Pharmacologic–Therapeutic sub-classification.
  - ❸ Nonproprietary or generic ingredient name of the drug.
  - ❹ Drug strength and dosage form.
- The Drug Identification Number (DIN), assigned by the Therapeutic Products Directorate (TPD), Health Protection Branch, Health Canada, or Natural Product Number (NPN) assigned by the Natural and Non-prescription Health Products Directorate (NNHPD). For other types of Drug Products or Devices, a Product Identification Number (PIN) will be assigned.
- ❺ A box containing an X ☒ to the left of the DIN/NPN/PIN indicates that the product is not interchangeable with other products or interchangeability has not been assessed within the category.
  - ❻ All active ingredients of combination Drug Products are listed.
  - ❼ Strengths of active ingredients are listed in the same order as the ingredients. This example indicates that the topical cream contains 0.5 mg/g betamethasone dipropionate and 30 mg/g salicylic acid.
  - ❽ Brand name of the Drug Product or Device.
  - ❾ Three letter identification code assigned to each manufacturer. The codes are listed in Appendix 2 at the end of the List.
  - ❿ For Drug Products which are marked as non-interchangeable, the price is indicated in regular type (not bold type). These prices are supplied by the manufacturer and are expressed in decimal dollars.
  - ⓫ For those Drug Products and Devices which are single source, the price is indicated in regular type (not bold type). These prices are supplied by the manufacturer and are expressed in decimal dollars.
  - ⓬ Interchangeable grouping where the Least Cost Alternative (LCA) Price Policy has not been applied. This example indicates these two Drug Products are deemed interchangeable. These prices are supplied by the manufacturer and are expressed in decimal dollars.
  - ⓭ The LCA Price for the selected interchangeable category appears in bold type. The LCA price is the maximum price which will be paid. The prices listed are expressed as decimal dollars. An authorized health care provider may request special authorization if a particular brand is essential in the care of a patient where the LCA Price would otherwise apply. For further information refer to the Special Authorization Guidelines section of the ADBL or List.
  - ⓮ Drug Products or Devices designated as restricted benefits and limited restricted benefits are identified by a comment after the generic name. The comment indicates “RESTRICTED BENEFIT” or “LIMITED RESTRICTED BENEFIT” along with an explanation of the limits and/or restrictions. In this example, coverage of Emend is restricted to the drug being prescribed by the Directors of Alberta Health Services – Cancer Care “Cancer Centres” (or their designates). For more information about Drug Products or Devices designated as restricted benefits, refer to the restricted benefits section of the List.
  - ⓯ A MAC Grouping means a grouping of Drug Products or Devices that have been listed on the ADBL or the List as being subject to a MAC Price; a MAC Grouping may include a grouping of IC Drugs, in which case the grouping shall be treated as an Established IC Grouping. Groupings subject to MAC Price will have the maximum amount established by the Minister which will be paid by the Government of Alberta.

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## Example of Drug Product Listings

### 08:00 ANTI-INFECTIVE AGENTS

08:12.16.08 ANTIBACTERIALS  
PENICILLINS  
(AMINOPENICILLINS)

**AMOXICILLIN TRIHYDRATE/ CLAVULANATE POTASSIUM**  
**250 MG (BASE) \* 125 MG (BASE) ORAL TABLET**  
00002243350 APO-AMOXI CLAV

10 APX \$ 0.2467 12

### 28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:08:08 ANALGESICS AND ANTIPYRETICS  
(OPIATE AGONISTS)

**OXYCODONE HCL**  
**10 MG ORAL TABLET**  
00000443948 SUPEUDOL  
00002319985 PMS-OXYCODONE  
00002240131 OXY-IR

SDZ \$ 0.2397 14  
PMS \$ 0.2517  
PUR \$ 0.4410

### 1 28:00 CENTRAL NERVOUS SYSTEM AGENTS

2 28:08:04.92 ANALGESICS AND ANTIPYRETICS  
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS  
(OTHER NONSTEROIDAL ANTI-INFLAMMATORY AGENTS)

#### 3 DICLOFENAC SODIUM

#### 4 100 MG ORAL SUSTAINED-RELEASE TABLET

00002091194 APO-DICLO SR APX \$ 0.3124 \$ 0.6502  
5 MAC pricing has been applied based on the LCA price for 4 x 25 mg oral enteric-coated tablets.

### 08:00 ANTI-INFECTIVE AGENTS

08:12.28.20 ANTIBACTERIALS  
MISCELLANEOUS ANTIBACTERIALS  
(LINCOMYCINS)

**CLINDAMYCIN PHOSPHATE**  
**150 MG / ML (BASE) INJECTION**

00002230535 CLINDAMYCIN (60 & 120 ML) 13 SDZ \$ 4.3650  
00002230540 CLINDAMYCIN SDZ \$ 4.3650  
00000260436 DALACIN C PHOSPHATE PFI \$ 4.4469

### 84:00 SKIN AND MUCOUS MEMBRANE AGENTS

84:06 ANTI-INFLAMMATORY AGENTS

#### 7 BETAMETHASONE DIPROPIONATE/ SALICYLIC ACID

#### 8 0.5 MG / G (BASE) \* 30 MG / G TOPICAL OINTMENT

00000578436 DIPROSALIC 9 MFC \$ 0.9302

**MAGNESIUM GLUCONATE**  
**500 MG ORAL TABLET**

6 00080009539 JAMP MAGNESIUM GLUCONATE JPC \$ 0.1088  
00000555126 MAGLUCATE PPH \$ 0.1242 11

### 48:00 RESPIRATORY TRACT AGENTS

48:10.24 ANTI-INFLAMMATORY AGENTS  
(LEUKOTRIENE MODIFIERS)

#### 15 APREPITANT

RESTRICTED BENEFIT - This drug product must be prescribed by the Directors of Alberta Health Services  
- Cancer Care "Cancer Centres" (or their designates).

#### 80 MG ORAL CAPSULE

00002298791 EMEND 80 MG MFC \$ 35.6613

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## DRUG AND DEVICE REVIEWS

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The Minister of Health makes the final decisions on changes to the ADBL (List) after considering the recommendations of the Expert Committee on Drug Evaluation and Therapeutics (Expert Committee), and/or the Canadian Drug Expert Committee (CDEC), and/or Alberta Health.

Manufacturers wishing to have their Drug Product(s) or Device(s) listed on the List are required to make submissions in accordance with the procedures and criteria published in the List.

### **Common Drug Review**

Alberta is a participant in the national Common Drug Review Procedure (CDR Procedure) and considers recommendations from CDEC. Alberta Health and Alberta Blue Cross are not involved in the administration process for CDR submissions and so any questions regarding CDR submissions should be directed to the CDR. Submissions relating to New Drugs, Drugs with a New Indication(s), or New Combination Products that have received a Health Canada Notice of Compliance (NOC) or conditional NOC (NOC/c), or have a pending NOC or NOC/c for the indication(s) to be reviewed should be directed to the CDR for consideration. Submissions to the CDR must comply with the CDR Procedure and Submission Guideline requirements available on the CDR website at <https://www.cadth.ca/cadth-procedures-reimbursement-reviews>

### **Expert Committee on Drug Evaluation and Therapeutics Drug Reviews**

The Minister of Health has established an Expert Committee on Drug Evaluation and Therapeutics to refine and maintain the List on an ongoing basis. All Drug Products and Devices not eligible for review under the CDR Procedure or the Expedited Review Procedure must be reviewed by the Expert Committee prior to their determination as benefits on the List.

The Expert Committee considers the scientific, therapeutic, clinical and socio-economic merits of Drug Products and Devices. The Committee receives advice and assistance from external consultants and agencies when needed. The Expert Committee makes recommendations on the List to Alberta Health through the Executive Director, Pharmaceuticals & Supplementary Health Benefits.

### **Interchangeable Reviews**

Drug Products may be considered for listing in interchangeable groupings through Expedited Review or Full Review. Expedited Review Drug Products are not required to undergo a Full Review by the Expert Committee. Interchangeable Drug Product submissions will be screened by Alberta Blue Cross to determine eligibility for an Expedited Review and the results provided to Alberta Health. Interchangeable drug submissions requiring a Full Review will be reviewed by the Expert Committee under its usual Drug Product review procedure.

### **Biosimilar Reviews**

Biosimilar Drug Product submissions may be considered through Expedited Review.

### **Device Reviews**

Device submissions may be considered through Expedited Review.

### **Referrals**

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## ALBERTA DRUG BENEFIT LIST

Alberta Health at all times and in all circumstances reserves the right to refer any submission to the CDR Procedure and/or the Expert Committee for further advice or for a Full Review.

### Deferrals

The Expert Committee and/or Alberta Health reserve the right to defer any submission it deems appropriate in order to ensure that it may complete a review in a manner that protects patient safety and maintains the integrity of the ADBL and the government-sponsored drug programs. Examples of reasons for deferrals include, but are not limited to:

1. To request additional information in order to conduct a review and prepare recommendations;
2. Where additional time, research and/or consultation is required before a review can be completed or a recommendation can be made;
3. Where new or novel issues are raised;
4. Where issues, questions or concerns relating to any of the listing criteria or factors arise, including but not limited to:
  - (a) interchangeable safety issues,
  - (b) whether the criteria requires expansion or clarification,
  - (c) the Drug Product or Device,
  - (d) the listing,
  - (e) the price,
  - (f) any other relevant criteria or factor.

## Alberta Health Expert Committee on Drug Evaluation and Therapeutics

### Committee Members

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## SUBMISSIONS FOR DRUG AND DEVICE REVIEWS

Only submissions satisfying all of the submission requirements of the applicable category of Drug Product or Device that are deemed complete by the applicable submission deadline date will be put forward for review.

- 1) In addition to the submission requirements, the Expert Committee and/or Alberta Health, at their sole discretion, reserve the right to request the Drug Product or Device file from Health Canada's Therapeutic Products Directorate (TPD) or Medical Devices Directorate (MDD), or any additional information from the Manufacturer, CDEC, or any other entity that the Expert Committee and/or Alberta Health considers necessary, which may result in a delay in the listing recommendation for the Drug Product or Device.
- 2) There is no obligation or guarantee that every completed submission will be reviewed, and/or a recommendation made, by a specific date or at the next scheduled meeting of the Expert Committee.
- 3) Pre-NOC submissions may be made; however, the submission will only be reviewed once it is complete.
- 4) Any request by a Manufacturer to hold a submission will result in a submission being deemed incomplete as of the date of the request. A submission on hold will only be considered complete once correspondence is received from a Manufacturer to proceed with the submission.
- 5) Only one (1) copy of a submission for a Drug Product or Device is required. A determination by Alberta Blue Cross that a submission is complete is preliminary and made only for the purposes of forwarding the submission for review.
- 6) Manufacturers are permitted to provide other information they feel may be important to the review of a submission (e.g., selected references or additional studies completed after a Drug Product had been submitted to the TPD, Health Canada). Comparative studies with other listed Drug Products or Devices are most relevant.
- 7) Drug Products or Devices that have been previously listed on the List and have had a lapse in coverage for two (2) years or more will require a new submission under the appropriate submission category.
- 8) Drug Products or Devices that have been previously listed on the List and have had a price policy submission denied over a period of two (2) years or more will require a new submission under the appropriate submission category.
- 9) Drug Product or Device submissions that remain incomplete or that have an incomplete price policy submission for twelve (12) months from the date of the original submission will be returned to the Manufacturer.
- 10) Information on submission deadlines are posted on the ADBL website which can be accessed at <https://www.ab.bluecross.ca/dbl/manufacturers.php>

**Notice of Significant Changes** - By making a submission (i.e., if a Drug Product or Device is either under review or listed on the List), Manufacturers acknowledge and agree that they are required to notify the Manager, Scientific and Research Services of any significant change to the Drug Product or Device. Significant changes are considered to be changes to the design or intended use of a Device, changes in NOC, Drug Product or Device name, Manufacturer or distributor, indication, product monograph, packaging and labelling, formulation, manufacturing specifications, issuance of safety advisories or warnings, business/marketing or cross-licensing agreements and any change that could potentially affect the bioavailability or bioequivalence of a Drug Product. Please note: Changes to product monographs must be

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itemized in covering or separate correspondence with the Date of Revision of the product monograph clearly stated.

### **Correspondence and Receipt of Submissions**

Manufacturers may provide submissions for consideration for potential addition to the ADBL via email to the following address: [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca)

Submissions sent to other email addresses will not be considered for potential addition to the ADBL. It is recommended that manufacturers place the device name or the drug name(s) and strength(s) of the submitted product(s) in the subject header in order to ensure that multiple emails can be easily associated with one another.

Manufacturers are reminded that hard copies of submissions must follow by mail and should be sent to the attention of:

#### **Manager**

Scientific and Research Services  
Alberta Blue Cross  
10009 108 Street NW  
Edmonton, Alberta T5J 3C5

A copy of covering correspondence and summary documents **only** should be forwarded to:

#### **Executive Director**

Pharmaceuticals & Supplementary Health Benefits  
Alberta Health  
11<sup>th</sup> floor, 10025 Jasper Avenue  
Edmonton, Alberta T5J 1S6

Questions or comments regarding submissions can be addressed to:

#### **Coordinator**

Scientific and Research Services  
Alberta Blue Cross  
10009 108 Street NW  
Edmonton, Alberta T5J 3C5  
Phone: (780) 498-8098  
Fax: (780) 498-3534  
Email: [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca)

Manufacturers should note that only **complete submissions, satisfying all the submission requirements of the applicable category received by 4:30 p.m. Mountain Standard / Daylight Savings Time (as applicable) on the deadline**, will be put forward for consideration by the Expert Committee on Drug Evaluation and Therapeutics or Expedited Review, as applicable. There is no guarantee that every completed submission will be reviewed and/or a recommendation made at the next scheduled meeting of the Expert Committee.

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## Criteria for Listing Drug Products or Devices

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- **The *Criteria for Listing*, as adjudicated by the Expert Committee on Drug Evaluation and Therapeutics (Expert Committee), apply to all Drug Product and Device submissions.**
  - **If more than one criterion apply, at the sole discretion of the Expert Committee, Alberta Health or the Minister, the most stringent and/or appropriate combination of criteria will apply.**
  - **For Multisource Drug Products seeking a designation of interchangeability, the Drug Product must also meet the additional criteria outlined under “*Interchangeable Drug Products - Additional Criteria*”.**
1. Clinical studies must have demonstrated the safety and efficacy of the Drug Product in appropriate populations.
  2. The Drug Product or Device must:
    - a. possess therapeutic advantage (as defined in No. 3) for the disease entity for which the Drug Product or Device is indicated, or
    - b. be more cost-effective than presently accepted therapy.
  3. Assessment of therapeutic advantage may include consideration of:
    - i. clinical efficacy;
    - ii. risk/benefit ratio;
    - iii. toxicity;
    - iv. compliance;
    - v. clinical outcomes;
    - vi. Health Canada or any other International Regulatory Agency issued warnings and advisories;
    - vii. population health issues; or
    - viii. any other factor which affects the therapeutic value of the product.
  4. The Expert Committee, Alberta Health and/or the Minister may, in addition to all of the factors listed above, also consider any factors that they consider appropriate, including but not limited to any or all of the following:
    - i. the recommendations from the CDR review,
    - ii. failure by a manufacturer to supply a sufficient quantity of Drug Product or Device to meet the demand in Alberta (as determined by Alberta Health at its sole discretion, and based on any information it deems appropriate),
    - iii. failure by a manufacturer to provide
      - (A) a Price Confirmation, or

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(B) a Price Confirmation or Confirmed Price in accordance with the Price Policy and/or the Alberta Price Confirmation (APC) Terms and Conditions;

- iv. failure by a manufacturer to comply with any APC Terms and Conditions;
- v. type of Drug Product, Device, class or category and indications for use,
- vi. other available alternative products, treatments or therapies,
- vii. whether the Drug Product is interchangeable,
- viii. cost of the Drug Product or Device and/or potential cost savings or impact on Drug Product or Device expenditures under the List,
- ix. volume of use and amounts paid out for similar Drug Products or Devices, classes or categories,
- x. utilization patterns
- xi. expenditure management and resources,
- xii. patent issues,
- xiii. coverage provided by other programs,
- xiv. for interchangeable Drug Products, concerns that are related to or affect the interchangeability of the Drug Product,
- xv. issues, concerns, objectives, goals and/or mandates related to any government policies, plans or programs, and
- xvi. patient care concerns related to factors external to the Drug Product or Device.

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## Interchangeable Drug Products - Additional Criteria

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### Principle:

Decisions respecting interchangeability and drug lists remain in the domain of the institution responsible for the costs of the product which includes hospitals, provincial governments and other third party payers (6/9/95 *Canada Gazette Part II, Vol. 129, No. 18*)

### Preface:

The Alberta Drug Benefit List (ADBL) contains designations of interchangeability for approved Multisource Drug Products. The Expert Committee on Drug Evaluation and Therapeutics makes recommendations on interchangeability to Alberta Health through the Executive Director, Pharmaceuticals & Supplementary Health Benefits. The Minister of Health makes the final decisions on interchangeability after reviewing the recommendations of the Expert Committee and/or Alberta Health.

### Definitions:

(Note: additional definitions in the applicable Appendices may apply)

**Canadian Innovator Reference Product (CIRP):** A CIRP is a Drug Product that is marketed in Canada by the innovator manufacturer of the Drug Product and for which safety and efficacy have been demonstrated clinically.

**Canadian Non-Innovator Reference Product (CNIRP):** A CNIRP is a subsequent-entry generic Drug Product that is used as a Reference Product in a comparative study (e.g., bioequivalence, pharmacodynamic, therapeutic equivalence, or physical-chemical comparison) when the CIRP or a suitable Non-Canadian Innovator Reference Product (NCIRP) is no longer available on the market. *See also 4 c) of the Additional Criteria.*

**Cross Licensed Product:** A cross licensed or pseudo-generic Drug Product is a Drug Product that is manufactured according to the identical master formula and manufacturing and quality control specifications as a) the innovator brand of the drug; or b) any Drug Product that is currently listed on the ADBL within the submission product's interchangeable grouping.

**Interchangeable Drug Product:** An Interchangeable Drug Product is a Drug Product that has been designated as interchangeable by the Minister of Health after reviewing the recommendations of the Expert Committee or Alberta Health. Recommendations regarding interchangeability are made taking into consideration the scientific, therapeutic, clinical and socio-economic merits of Drug Products in accordance with the published criteria. Drug Products designated as interchangeable are expected to be safe when interchanged with other Drug Products in the interchangeable grouping, and to have the same therapeutic effectiveness when administered to patients under the conditions specified in the labeling. The designation of interchangeability is made only for the purpose of funding of drug benefits covered under the Alberta government-sponsored drug benefit programs and is not to be used as a scientific reference or prescribing guide.

**Multisource Drug Product:** Drug Products are considered to be Multisource Drug Products when they are manufactured and/or distributed by more than one manufacturer.

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**Non-Canadian Innovator Reference Product (NCIRP):** A NCIRP is a Drug Product that is marketed elsewhere in the world by the same innovator, corporate entity, or through a licensing arrangement with the innovator or corporate entity, that currently markets or historically marketed, the same drug in the same dosage form in Canada.

**Pharmaceutical Alternative:** Drug Products may be considered to be pharmaceutical alternatives if they use the same route of administration and contain the same active therapeutic ingredient(s) but are different salts, esters or complexes of that moiety, or are different dosage forms or strengths.

**Pharmaceutical Equivalent:** Drug Products are considered to be pharmaceutical equivalents if they contain the same active therapeutic ingredient(s), are of comparable dosage form(s), route of administration, and are identical in strength or concentration.

**TPD Reports** - refers collectively to the following TPD, Health Canada guidance publications as of April 1, 2015:

- *Guidance Document: Conduct and Analysis of Comparative Bioavailability Studies (2012)*; (which may be referred to in the List as “**TPD Report No.1**”); and
- *Guidance Document: Comparative Bioavailability Standards: Formulations Used for Systemic Effects (2012)*; (which may be referred to in the List as “**TPD Report No.2**”)

### **Review of Interchangeable Drug Product Submissions:**

- A. The Expert Committee and/or Alberta Health and/or the Minister may, in addition to considering the *Interchangeable Drug Products - Additional Criteria*, also consider any other criteria in the ADBL, including but not limited to the *Criteria for Listing Drug Products or Devices*.**
- B. Recommendations regarding interchangeability are made taking into consideration the scientific, therapeutic, clinical and socio-economic merits of Drug Products in accordance with the published criteria. Drug Products designated as interchangeable are expected to be safe when interchanged with other Drug Products in the interchangeable grouping, and to have the same therapeutic effect when administered to patients under the conditions specified in the labeling.**
- C. Issuance of a Notice of Compliance by the TPD which includes a Declaration of Equivalence does not mean the Drug Product will automatically be designated as interchangeable.**

### **Expedited Reviews**

Alberta Health and/or the Minister reserves the right to refer any Drug Product submission that would otherwise meet the Expedited Review requirements for Full Review by the Expert Committee.

1. Multisource Drug Products seeking a listing designation as interchangeable may be eligible for an Expedited Review if:

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## ALBERTA DRUG BENEFIT LIST

- a. The Drug Product submission complies with the submission requirements.
- b. The Drug Product does **NOT** fall into any of the categories of Drug Products that require a Full Review (below).
- c. The Drug Product is a cross licensed Drug Product with the innovator brand of the drug or any Drug Product that is currently listed on the ADBL within the submission product's interchangeable grouping.
- d. The Drug Product is **NOT** a biosimilar (biosimilars are not eligible for review as interchangeable products).
- e. The Drug Product has been granted a Notice of Compliance (NOC) by Health Canada that includes a declaration of equivalence with a CIRP that is listed or has been previously listed on the ADBL; or a declaration of equivalence with a NCIRP where the CIRP is listed or was previously listed on the ADBL; or a declaration of equivalence with a Drug Product that meets the criteria of a CNIRP as described in Full Reviews, section 4.c. vi.
- f. The Drug Product must be a pharmaceutical equivalent to the CIRP.
- g. The proposed price in Alberta provided in the manufacturer's submission complies with the Price Policy.
- h. Even if the drug submission review is expedited, the Minister may decide not to list a Drug Product, or the listing of the Drug Product may be delayed, if the manufacturer has failed
  - (A) to provide a Price Confirmation,
  - (B) to provide a Price Confirmation or Confirmed Price in accordance with the Price Policy and/or the applicable APC Terms and Conditions; or
  - (C) to comply with the terms and conditions of an applicable APC.
- i. The Drug Product was granted a Biopharmaceutics Classification System (BCS)-based biowaiver (i.e. met the criteria and conditions of the International Council for Harmonization of Technical Requirements for Pharmaceuticals for Human Use (ICH) BCS M9 harmonized guideline) as noted in the Health Canada-approved product monograph.

### **Full Reviews**

Multisource Drug Products seeking a listing designation as interchangeable that fall within the categories listed below are required to undergo a Full Review by the Expert Committee. The following additional interchangeability criteria will apply to Full Reviews:

1. The Drug Product must be a
  - a. pharmaceutical equivalent; or
  - b. pharmaceutical alternative,as determined at the sole discretion of the Expert Committee.

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2. The Drug Product is not a biosimilar (biosimilars are not eligible for review as interchangeable products).
3. The proposed price in Alberta contained in the manufacturer's submission complies with the Price Policy.
4. The Drug Product has been demonstrated to be bioequivalent, or has provided evidence of comparative therapeutic efficacy, with the reference Drug Product as outlined below:
  - a. **For Drug Products in the following categories, for which comparative bioequivalence studies CAN be conducted:**
    - i. For Critical Dose Drug Products, the Drug Product must meet the criteria in the *Critical Dose Drug Product Appendix*.
    - ii. For Drug Products for which Bioequivalence is Supported by Measurement of the Drug in a Matrix other than Plasma or Serum (e.g., whole blood, urine, tissue), the Drug Product must meet the criteria in the *Drug Product with Alternate Matrix Measurement Appendix*.
    - iii. For Old Drug Products, the product must meet the criteria in the *Old Drug Product Appendix*.
    - iv. For Drug Products which possess complex delivery systems, the product must meet the criteria in the *Complex Delivery System Drug Product Appendix*.
  - b. **For Drug Products in the above categories for which comparative bioequivalence studies CANNOT be conducted:**
    - i) Evidence of comparative therapeutic efficacy of the submitted product with the reference product via:
      - (A) a therapeutic equivalence study; or
      - (B) Studies that meet the requirements and standards for pharmacodynamic studies outlined in TPD Report No.2; or
      - (C) surrogate comparisons using *in vivo* or *in vitro* test methods;and
    - ii) Sufficient rationale for why a comparative bioequivalence study cannot be conducted and an explanation of why the method submitted is a valid surrogate for bioequivalence assessment.
  - c. **For Drug Product submissions using a Canadian Non-Innovator Reference Product (CNIRP) the following criteria apply:**
    - i) The CIRP or a suitable NCIRP for the active therapeutic ingredient(s) contained in a CNIRP is no longer available on the market.
    - ii) The CNIRP must be currently listed on the ADBL at the time the Drug Product submission is under review.

The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment



## ALBERTA DRUG BENEFIT LIST

- iii) There must be evidence from historical product reviews for the ADBL that the CNIRP was directly compared with the CIRP in a suitable study/studies and shown to be bioequivalent.
- iv) Except as otherwise set out in this paragraph if a subsequent-entry generic Drug Product was approved by Health Canada based on a comparison with a NCIRP, then the Drug Product is not eligible for consideration as a CNIRP for the ADBL. Where though it is confirmed that there is no CNIRP currently available in Canada that has been directly compared with the CIRP, a CNIRP that has been approved by Health Canada based on a comparison to a NCIRP may be considered.
- v) For lyophilized powder injectable formulations: In the case that the original CIRP was discontinued prior to any currently marketed drug product in Canada AND there are no currently marketed products that were compared to the CIRP, a CNIRP may be designated that has not been directly compared to the CIRP.
- vi) Once a CNIRP for an interchangeable grouping has been established for the ADBL, the specific CNIRP must be used consistently thereafter in comparative studies for submitted Drug Products to be considered for a potential interchangeability designation. This is true as long as the established CNIRP is listed on the ADBL.

In situations where a manufacturer wishes to use a CNIRP in a comparative study to support an interchangeability designation on the ADBL, the manufacturer is advised to contact the Scientific and Research Services Department of Alberta Blue Cross to confirm the identity of the CNIRP for the interchangeable grouping in the ADBL, if one has been established.

- 5. The Drug Product must meet all other criteria outlined in the applicable Appendix.
- 6. In addition, the Expert Committee may also consider any other factor that may affect the interchangeability of a Drug Product, including but not limited to:
  - characteristics of the Drug Product (e.g. shape, scoring, configuration, packaging, labelling);
  - excipients and non-medicinal ingredient(s) (e.g. sugar, sodium);
  - expiration times;
  - storage conditions.

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## Interchangeable Drug Products - Additional Criteria

### APPENDICES

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#### Critical Dose Drug Product Appendix

**Critical Dose Drug:** Is a drug where comparatively small differences in dose or concentration lead to dose- and concentration-dependent, serious therapeutic failures and/or serious adverse drug reactions which may be persistent, irreversible, slowly reversible or life threatening, which could result in inpatient hospitalization or prolongation of existing hospitalization, persistent disability or incapacity, or death.

Critical dose drugs include:

- a) Any drug listed in TPD Report No. 2; and
- b) Any other drug that the Expert Committee determines meets the above definition, which determination may include consideration of any other matter that may affect the interchangeability of a product containing a critical dose drug.

**Criteria:** Comparative bioequivalence studies must meet the requirements and standards in the TPD Reports, with the exception that the following standards will be used:

1. The 90% confidence interval of the relative mean AUC of the test to reference formulation should be within 90.0 to 112.0% inclusive; the relevant AUC or AUCs as described in TPD Report No. 2 are to be determined.
2. The 90% confidence interval of the relative mean C<sub>max</sub> of the test to reference formulation should be between 80.0 and 125.0%.
3. These requirements are to be met in both the fasted and fed states.
4. These standards should be met on log transformed parameters calculated from the measured data.
5. If a steady-state study is required, the 90% confidence interval of the relative mean measured C<sub>min</sub> of the test to reference formulation should also be between 80.0 and 125.0%.

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### **Drug Product with Alternate Matrix Measurement Appendix**

For Drug Product submissions for which bioequivalence data is supported by measurement of the drug in a matrix other than plasma or serum (e.g., whole blood, urine, extravascular tissue).

**Criteria:**

1. Comparative bioequivalence studies must meet the requirements and standards in the TPD *Reports*.
2. The assay used for measurement of the drug must be validated for the alternate matrix of measurement.
3. The use of metabolite concentrations in an alternate matrix is not acceptable.
4. Sufficient rationale for why the use of an alternate matrix measurement study is appropriate.

## Old Drug Product Appendix

**Old Drugs:** Are Drug Products where the active moiety or moieties is/are designated as an “old drug” by Health Canada and the Drug Product is approved on the basis of a DIN application (i.e. an NOC is not issued by Health Canada).

**Criteria:**

1. Comparative bioequivalence studies must meet the requirements and standards in the TPD *Reports*.
2. For old Drug Products for which comparative bioequivalence studies CANNOT be conducted, the submission must include:
  - i) Evidence of comparative therapeutic efficacy of the submitted product with the reference product via:
    - a) a therapeutic equivalence study; or
    - b) studies that meet the requirements and standards for pharmacodynamic studies outlined in TPD Report No. 2; or
    - c) surrogate comparisons using *in vivo* or *in vitro* test methods.

and

  - ii) Sufficient rationale for why a comparative bioequivalence study cannot be conducted.

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### Complex Delivery System Drug Product Appendix

**Complex Delivery System Drugs:** Are Drug Products that possess complex drug release characteristics in the pharmaceutical dosage form that are intended to:

1. deliver the drug at a rate that is independent of time and the concentration of the drug (i.e. zero order process), or
2. deliver the drug to a specific physiological site (i.e. site-specific release).

**Criteria:**

1. Comparative bioequivalence studies must meet the requirements and standards in the *TPD Reports*.
2. A detailed description of the pharmaceutical dosage forms and specific drug release characteristics of the submitted Drug Product and reference Drug Product must be provided to permit evaluation of the similarity of drug release of the respective formulations.

## Review of Benefit Status (ROBS) Criteria

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The Expert Committee and/or Alberta Health may at any time review the benefit status of a Drug Product or Device, a group of Drug Products or Devices, a class or classes of Drug Products or Devices, or a category or categories of Drug Products or Devices listed or being considered for listing on the ADBL. The Expert Committee and/or Alberta Health may, at their sole option and discretion, recommend altering or discontinuing the benefit status for Products if one or more of the following criteria are met. These are general criteria only, which are intended to be applied flexibly, having regard to each individual case. The criteria may be modified or adapted as the situation may require, and not all criteria will apply to each case:

1. There has been a significant change to the Drug Product(s) or Device(s). Significant changes may include changes in NOC, DIN, product name, manufacturer or distributor, indication, product monograph, packaging, formulation, or any change that could potentially affect the bioavailability or bioequivalence of a product.
2. The Drug Product(s) or Device(s), no longer possesses demonstrated therapeutic advantage compared to other presently accepted therapies or treatments of the disease entity for which the Drug Product(s) and Device(s) is/are indicated. Assessment of therapeutic advantage may include consideration of clinical efficacy, risk/benefit ratio, toxicity, compliance, clinical outcomes, Health Canada advisories, population health issues, and any factor which affects the therapeutic value of the product, class or category.
3. The Drug Product(s) or Device(s) is/are no longer cost-effective compared to other presently accepted therapies or treatments of the disease entity for which the Drug Product(s) or Device(s) is/are indicated.
4. To enable broader coverage of higher priority Drug Product(s) or Device(s).
5. When a Drug Product or Device has been discontinued by the manufacturer.
6. When Drug Product(s) is/are changed from prescription to non-prescription status, the Expert Committee may recommend continuing, altering or discontinuing benefit status of the Drug Product(s) based upon scientific, therapeutic, clinical and socio-economic merits of the Drug Product(s).
7. For all ROBS reviews, the Expert Committee, Alberta Health and/or the Minister may, in addition to all of the factors listed above, also consider any factors that they consider appropriate, including but not limited to any of the criteria for listing Devices, Drug Products and Interchangeable Drug Products.

**Unsolicited information from manufacturers relating to ROBS Reviews will not be put before the Expert Committee. However, if the Expert Committee determines that a change in benefit status may be warranted, manufacturers of the affected Product(s) will be notified and provided with an opportunity to make submissions to the Expert Committee prior to the final recommendation being made. Notification will include advice regarding the form of submission that will be accepted, the deadline for filing the submission and any other relevant advice. Any submissions that do not comply with the notification advice will not be put before the Expert Committee.**

## SUBMISSION REQUIREMENTS

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The following Submission Requirements pertain to submissions for Drug Products not eligible for review under the CDR Procedure.

### A) New Chemical Entities/Single Source Drug Products

The following submission requirements pertain to New Chemical Entities or New Combination Products where one or more of the active moieties have never been listed on the List, and other single source Drug Products that have never been listed on the List, and are not eligible for review under the CDR Procedure.

1. Consent Letter
  - an unconditional consent letter authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Drug Product and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Drug Product submission and resubmission information and information about the Drug Product in the possession of Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert Committee, and the government of a province or territory
2. Letter Confirming Ability to Supply
  - a confirmation letter signed by a senior official of the Manufacturer stating that the Manufacturer is able and willing to supply the Alberta market with the subject Drug Product in a quantity consistent with applicable APC or Interim APC requirements.
3. A hard copy and electronic (CD) copy only of the following from the Common Technical Document:
  - Clinical Overview (Module 2.5), and
  - Clinical Summary (modules 2.7.1, 2.7.3, 2.7.4 and 2.7.6).

Note: If a Common Technical Document was not prepared for Health Canada, a Comprehensive Summary may be acceptable in lieu.
4. Copy of completed Drug Identification Number (DIN) notification form
5. Copy of Notice of Compliance (NOC)
6. Current Patent Status
  - a signed statement from the Manufacturer stating that the submitted Drug Product does not infringe any patents
  - expiry date(s) of all Canadian patent(s)
7. Price Information
  - The proposed price for Alberta (which must be in compliance with the Price Policy)
8. Health Canada-approved Product Monograph
  - A hard copy, and
  - an electronic (CD) copy compatible with Microsoft Word

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## ALBERTA DRUG BENEFIT LIST

9. Economic Information
  - a comprehensive pharmacoeconomic analysis in accordance with: the “*Guidelines for the economic evaluation of health technologies: Canada* [4th Edition]”. Ottawa: Canadian Agency for Drugs and Technologies in Health; 2017; cost-effectiveness and cost-utility data and the impact on “direct” healthcare costs are most useful, and
  - a completed *Budget Impact Assessment for the Alberta Drug Benefit List* form. The form can be obtained at <https://www.ab.bluecross.ca/dbl/manufacturers.php> or by contacting the Coordinator, Scientific and Research Services, Alberta Blue Cross by phone at (780) 498-8098, by fax at (780) 498-3534, or by email at [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca).
10. If requested, the Manufacturer must provide written confirmation from the CDR that the Drug Product is not eligible for review under the CDR Procedure.

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## B) Changes to Special Authorization or Restricted Benefit Status of Listed Single Source Drug Products Due to a New Indication

The following submission requirements pertain to single source Drug Products currently listed via special authorization or as restricted benefits on the List that have received a new indication from Health Canada, where the Manufacturer wishes to request expansion of the coverage criteria or change in benefit status due to the new indication and where the Drug Products are not eligible for review under the CDR Procedure.

1. Consent Letter
  - an unconditional consent letter authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Drug Product and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Drug Product submission and resubmission information and information about the Drug Product in the possession of Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert Committee, and the government of a province or territory
2. Letter Confirming Ability to Supply
  - a confirmation letter signed by a senior official of the Manufacturer stating that the Manufacturer is able and willing to supply the Alberta market with the subject Drug Product in a quantity consistent with applicable APC or Interim APC requirements.
3. Justification for the Expanded Coverage Criteria or Change in Benefit Status
  - a separate document indicating the reason for and evidence to justify the need for the expanded coverage criteria or change in benefit status due to the new indication
4. A hard copy and electronic (CD) copy only of the following from the Common Technical Document:
  - Clinical Overview (Module 2.5), and
  - Clinical Summary (modules 2.7.1, 2.7.3, 2.7.4 and 2.7.6)

Note: If a Common Technical Document was not prepared for Health Canada, a Comprehensive Summary may be acceptable in lieu.
5. Copy of Notice of Compliance (NOC) for the new indication.
6. Current Patent Status
  - a signed statement from the Manufacturer stating that the submitted Drug Product does not infringe any patents
  - expiry date(s) of all Canadian patent(s)
7. Price Information
  - The proposed price for Alberta (which must be in compliance with the Price Policy)
8. Health Canada-approved Product Monograph (revised to include the new indication)
  - A hard copy, and
  - an electronic (CD) copy compatible with Microsoft Word
9. Economic Information
  - a comprehensive pharmacoeconomic analysis **prepared with respect to the new indication only** in accordance with: the “*Guidelines for the economic evaluation of health technologies: Canada* [4<sup>th</sup> Edition]”. Ottawa: Canadian Agency for Drugs and

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## ALBERTA DRUG BENEFIT LIST

Technologies in Health; 2017; cost-effectiveness and cost-utility data and the impact on “direct” healthcare costs are most useful

- a completed Budget Impact Assessment for the Alberta Drug Benefit List form **prepared with respect to the new indication only**. The form can be obtained at <https://www.ab.bluecross.ca/dbl/manufacturers.php> or by contacting the Coordinator, Scientific and Research Services, Alberta Blue Cross by phone at (780) 498-8098, by fax at (780) 498-3534, or by email at [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca).
10. If requested, the Manufacturer must provide written confirmation from the CDR that the Drug Product is not eligible for review under the CDR Procedure.

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## C) Line Extension Drug Products

The following submission requirements pertain to new strengths and formulations or reformulations of Drug Products that are currently listed or are under consideration for listing on the List and where Drug Products are not eligible for review under the CDR Procedure.

1. Consent Letter
  - an unconditional consent letter authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Drug Product and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Drug Product submission and resubmission information and information about the Drug Product in the possession of Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert Committee, and the government of a province or territory.
2. Letter Confirming Ability to Supply
  - a confirmation letter signed by a senior official of the Manufacturer stating that the Manufacturer is able and willing to supply the Alberta market with the subject Drug Product in a quantity consistent with applicable APC or Interim APC requirements.
3. Justification for the Line Extension
  - a separate concise, one page document indicating the reason for and evidence to justify the need for the new strength, formulation or reformulation of the Drug Product, AND
  - a separate signed statement clearly identifying:
    - i. the DIN of the Drug Product(s) being submitted as a Line Extension, AND
    - ii. the DIN of the Manufacturer's Drug Product(s) currently listed or under consideration for listing on the ADBL, to which the submitted Drug Product(s) is/are being directly linked via clinical, bioequivalence or formulation proportionality/dissolution profile data.
4. A hard copy and electronic (CD) copy only of the following from the Common Technical Document:
  - Clinical Overview (Module 2.5), and
  - Clinical Summary (modules 2.7.1, 2.7.3, 2.7.4 and 2.7.6).

Note: If a Common Technical Document was not prepared for Health Canada, a Comprehensive Summary may be acceptable in lieu.

In the event a Comprehensive Summary was not prepared for Health Canada (i.e. clinical studies have not been conducted on the new strength, formulation or reformulation) then the Manufacturer must provide evidence establishing a clear linkage between the submitted Drug Product(s) and a currently listed or under consideration Drug Product(s).

This can be in the form of:

  - i. bioequivalence data; or
  - ii. evidence of formulation proportionality (i.e. a comparison of master formulae for all submitted strengths) and evidence of a similar dissolution profile.
5. Copy of completed Drug Identification Number (DIN) notification form
6. Copy of Notice of Compliance (NOC)

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## ALBERTA DRUG BENEFIT LIST

7. Current Patent Status
  - a signed statement from the Manufacturer stating that the submitted Drug Product does not infringe any patents
  - expiry date(s) of all Canadian patent(s)
8. Copy of completed and approved Certified Product Information Document (CPID)
  - in lieu of the CPID, a Master Formula and Final Product Specifications must be provided
9. Price Information
  - The proposed price for Alberta (which must be in compliance with the Price Policy)
10. Health Canada-approved Product Monograph (revised to include the line extension)
  - A hard copy, and
  - an electronic (CD) copy compatible with Microsoft Word
11. Economic Information
  - a completed *Budget Impact Assessment for the Alberta Drug Benefit List* form. The form can be obtained at <https://www.ab.bluecross.ca/dbl/manufacturers.php> or by contacting the Coordinator, Scientific and Research Services, Alberta Blue Cross by phone at (780) 498-8098, by fax at (780) 498-3534, or by email at [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca).
12. If requested, the Manufacturer must provide written confirmation from the CDR that the Drug Product is not eligible for review under the CDR Procedure.

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## D) Interchangeable Drug Products

The following submission requirements pertain to Multisource Drug Products submitted for listing in an interchangeable grouping in the List.

### **For Expedited and Full Reviews:**

1. Consent Letter
  - an unconditional consent letter authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Drug Product and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Drug Product submission and resubmission information and information about the Drug Product in the possession of Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert Committee, and the government of a province or territory
2. Letter Confirming Ability to Supply
  - a confirmation letter signed by a senior official of the Manufacturer stating that the Manufacturer is able and willing to supply the Alberta market with the subject Drug Product in a quantity consistent with applicable APC or Interim APC requirements.
3. Copy of completed Drug Identification Number (DIN) notification form
4. Copy of Notice of Compliance (NOC)
  - Note: For Old Drug Products (a Drug Product where the active ingredient is designated as an “old drug” by Health Canada and the Drug Product was approved on the basis of a DIN application), a Notice of Compliance is not required.
5. Current Patent Status
  - a signed statement from the Manufacturer stating that the submitted Drug Product does not infringe any patents
6. *For Cross Licensed Drug Products:* Letters from both the Manufacturer of the submission Drug Product and the Manufacturer of the innovator brand or a currently listed Drug Product within the submission Drug Product’s interchangeable grouping, stating that the submission Drug Product is manufactured under the identical master formula and manufacturing and quality control specifications, as the innovator brand or the currently listed Drug Product.
7. Price Information
  - The proposed pricing in Alberta must be in compliance with the Price Policy. Exceptions to the Fixed Pricing Rules may be considered at the sole discretion of the Minister. Accordingly, a request for an exception (as per the Price Policy) must accompany a submission that does not meet the Price Policy in order for it to be deemed complete.
8. Copy of completed and approved Certified Product Information Document (CPID)
 

Note: In lieu of the CPID, a Master Formula and Final Product Specifications must be provided

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## ALBERTA DRUG BENEFIT LIST

### 9. Health Canada-approved Product Monograph

- A hard copy, and
- an electronic (CD) copy compatible with Microsoft Word

Note: For Old Drug Products, the Prescribing Information may be provided in lieu of the Product Monograph.

### **For FULL REVIEWS ONLY, the following ADDITIONAL information must be provided:**

10. Evidence that the listing criteria for Interchangeable Drug Products have been met. See *Criteria for Listing Drug Products or Devices* **and** *Interchangeable Drug Products* sections for specific applicable criteria.
11. Except as otherwise set out in this paragraph if a submitted drug product has been compared with a Canadian Non-Innovator Reference Product (CNIRP) (as defined in *Interchangeable Drug Products - Additional Criteria*) in a comparative bioavailability study, the full TPD review of the submitted Drug Product must be provided. The Comprehensive Summary - Bioequivalence (CS-BE) that is prepared by the Manufacturer prior to filing an Abbreviated New Drug Submission (ANDS) is not sufficient. Where though a submitted drug product has been compared with a CNIRP that was approved by Health Canada based on a comparison to a NCIRP (as described in 4 c) of the *Interchangeable Drug Products - Additional Criteria*), the Manufacturer must provide a signed declaration that a) A currently marketed NCIRP was not available, and b) A suitable CNIRP that was directly compared with the CIRP was not available.

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## E) Natural Health Products

**Natural Health Product:** A Natural Health Product is a Drug Product where the active moiety or moieties are defined as a “natural health product” by Health Canada under the *Natural Health Products Regulations*.

The following submission requirements pertain to Natural Health Products submitted for listing on the Alberta Drug Benefit List.

1. Consent Letter
  - an unconditional consent letter authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Natural Health Product and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Natural Health Product submission and resubmission information and information about the Natural Health Product in the possession of Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert Committee, and the government of a province or territory.
2. Letter Confirming Ability to Supply
  - a confirmation letter signed by a senior official of the Manufacturer stating that the Manufacturer is able and willing to supply the Alberta market with the subject Natural Health Product in a quantity consistent with applicable APC or Interim APC requirements.
3. Copy of Market Authorization for Sale (current Product License that is not suspended or cancelled at the time the submission is made)
4. Current Patent Status (if applicable)
  - a signed statement from the Manufacturer stating that the submitted Natural Health Product does not infringe any patents
5. Price Information
  - The proposed price for Alberta (which must be in compliance with the ADBL Price Policy)
6. Copy of completed and approved Certified Product Information Document (CPID)
 

Note: In lieu of the CPID, a Master Formula, Final Product Specifications and Certificate of Analysis must be provided
7. Single Ingredient Monographs or Product Monographs
  - The Prescribing Information may be provided in lieu of Single Ingredient Monographs or Product Monographs.
8. The submission must include:
  - I. Evidence that the active moiety or moieties of Natural Health Product was previously or is currently listed in the same formulation on the ADBL and;
  - II. Evidence from the Manufacturer to demonstrate that there is an unmet need for the submitted Natural Health Product(s) (e.g. therapeutic need, therapeutic dose, stability of supply, formulation).

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Note: Submissions for combination products where one or more of the active moieties was previously listed as a single entity will not be accepted. Similarly, submissions for single entity products where one or more of the active moieties was previously listed in a combination product will not be accepted.

9. Interchangeability may be evaluated based upon evidence submitted by the Manufacturer. The Expert Committee on Drug Evaluation and Therapeutics will provide recommendations on interchangeability to the Minister for a final decision. Acceptable evidence to support interchangeability includes:
  1. Bioequivalence studies which meet the requirements and standards in the TPD *Reports*.
  2. For Natural Health Products for which bioequivalence studies CANNOT be conducted, the submission must include:
    - i) Evidence of comparative therapeutic efficacy of the submitted product with the reference product via:
      - (A) a therapeutic equivalence study; or
      - (B) studies that meet the requirements and standards for pharmacodynamic studies outlined in TPD Report No. 2 (as defined in *Interchangeable Drug Products - Additional Criteria*); or
      - (C) surrogate comparisons using *in vivo* or *in vitro* test methods;
    - and
    - ii) Sufficient rationale for why a bioequivalence study cannot be conducted.
10. Economic Information
  - A completed *Budget Impact Assessment* for the Alberta Drug Benefit List form. The form can be obtained at <https://www.ab.bluecross.ca/dbl/manufacturers.php> or by phone at (780) 498-8098, by fax at (780) 498-3534, or by email at [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca).

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## F) Non-Interchangeable Old Drug Products

**Non-Interchangeable Old Drug Products:** Are Drug Products where the active moiety or moieties are designated as an “Old Drug” by Health Canada and evidence to support interchangeability CANNOT be provided. The Drug Product is approved on the basis of a DIN application (i.e. a NOC is not issued by Health Canada).

**Previously Listed** means the Drug Product was previously listed in the same formulation on the ADBL at any time in the past.

**Not Previously Listed** means the Drug Product was NOT previously listed in the same formulation on the ADBL at any time in the past.

The following submission requirements pertain to both **Previously Listed** and **Not Previously Listed** Non-Interchangeable Old Drug Products that are submitted for listing, but not as interchangeable, with another Drug Product that is currently listed in the ADBL.

1. Consent Letter
  - an unconditional consent letter authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Drug Product and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Drug Product submission and resubmission information and information about the Drug Product in the possession of Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert Committee, and the government of a province or territory.
2. Letter Confirming Ability to Supply
  - a confirmation letter signed by a senior official of the Manufacturer stating that the Manufacturer is able and willing to supply the Alberta market with the subject Drug Product in a quantity consistent with applicable APC or Interim APC requirements.
3. Copy of completed Drug Identification Number (DIN) notification form
4. Current Patent Status
  - a signed statement from the Manufacturer stating that the submitted Drug Product does not infringe any patents
5. Price Information
  - The proposed price for Alberta (which must be in compliance with the ADBL Price Policy)
6. Copy of completed and approved Certified Product Information Document (CPID)  
Note: In lieu of the CPID, a Master Formula, Final Product Specifications and Certificate of Analysis must be provided
7. Product Monograph
  - The Prescribing Information may be provided in lieu of the Product Monograph.
8. Evidence from the Manufacturer to demonstrate that there is an unmet need for the submitted Drug Products (e.g., therapeutic need, therapeutic dose, stability of supply, formulation)

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9. Economic Information

- A completed *Budget Impact Assessment* for the Alberta Drug Benefit List form. The form can be obtained at <https://www.ab.bluecross.ca/dbl/manufacturers.php> or by phone at (780) 498-8098, by fax at (780) 498-3534, or by email at [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca).

**For Non-Interchangeable Old Drug Products that were Previously Listed ONLY, the following ADDITIONAL information must be provided:**

10. Evidence that the Drug Product was previously listed on the ADBL for the same indication and use in the past; and

- Assurance that the formulation of the Drug Product has remained unchanged since the time of listing, or
- If any Notifiable Changes have occurred since the time of listing, summary documentation describing the changes that have occurred since the time of listing must be provided.

**For Non-Interchangeable Old Drug Products that were NOT Previously Listed ONLY, the following ADDITIONAL information must be provided:**

11 Clinical evidence for the efficacy and safety of the active therapeutic ingredient(s) for the submitted indication that may be in the form of (in order of preference):

- An electronic (CD) copy only of the following from the Common Technical Document:
  - Clinical Overview (Module 2.5), and
  - Clinical Summary (Modules 2.7.1, 2.7.3, 2.7.4 and 2.7.6).
- If a Common Technical Document was not prepared for Health Canada, a Comprehensive Summary may be acceptable in lieu.
- If a Comprehensive Summary was not prepared for Health Canada, a concise summary of the efficacy and safety evidence based on an up-to-date literature review of the current medical literature may be acceptable in lieu.

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## G) Resubmissions

### Resubmission Requests – General

1. A resubmission request may be made for a Drug Product or Device that is not currently listed on the ADBL in a case where the Drug Product or Device:
  - a. was previously listed on the ADBL;
  - b. was the subject of a previous submission for listing on the ADBL; or
  - c. is listed on the ADBL but is subject to restrictions.
2. A resubmission request:
  - a. must comply with the requirements set out below; and
  - b. may be made by a Manufacturer for a Drug Product or Device only once in a 12 month period, running from April 1<sup>st</sup> through to March 31<sup>st</sup>, unless the Minister of Health (Minister), in the Minister's sole discretion, invites a Manufacturer to make a resubmission request.
3. The Minister, the Expert Committee on Drug Evaluation and Therapeutics (Expert Committee), and Alberta Health:
  - a. may request information in addition to the requirements set out below; and
  - b. may from time to time set deadlines by which a resubmission request may be made, or a request for additional information must be provided.
4. In the case where:
  - a. additional information has been requested by the Minister, the Expert Committee or Alberta Health, the resubmission request is not considered to be complete unless and until the requested additional information is provided to the Minister, the Expert Committee or Alberta Health; and
  - b. a deadline has been set as referred to above, failure to provide a complete resubmission request within such deadline means that a resubmission request will not be reviewed by the Expert Committee or Alberta Health or considered by the Minister.
5. The Minister may, in the Minister's sole discretion, refer a Drug Product or Device, that was the subject of a resubmission request which meets the requirements set out in this policy, to an Alberta Price Confirmation (APC) or Interim APC process.
6. In the event that a Drug Product or Device is referred to an APC or Interim APC process, the Manufacturer must comply with the Price Policy and the Terms and Conditions of the APC or Interim APC. A referral to an APC or Interim APC or the submission of a Price Confirmation or Confirmed Price for the Drug Product or Device by the Manufacturer does not obligate the Minister to list a Drug Product or Device on the ADBL.

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7. In the event that the Minister, in the Minister's sole discretion, requires additional advice or input on a resubmission request, the Minister may refer the resubmission request to the CDR Procedure, the Expert Committee or any other entity for further advice or a full review.
8. For additional clarity, the provisions outlined under the "Submissions for Drug Product and Device Reviews" are also deemed to apply to resubmission requests except as specifically modified by the provisions in this subsection "G) Resubmissions", in which case this subsection applies.

### **Resubmission Requests Requiring Expert Committee Review**

9. In addition to the requirements in "Resubmission Requests – General" above, this section applies to a resubmission request for a Drug Product or Device that was reviewed by the Expert Committee and a decision was made by the Minister to:
  - a. not add the Drug Product or Device to the ADBL for reasons other than those specified in section 12 below;
  - b. add the Drug Product or Device to the ADBL with restrictions; or
  - c. maintain current listing status of the Drug Product or Device on the ADBL despite the Manufacturer's request for change.
10. A general resubmission request may be made for a previously submitted Drug Product or Device on the *Resubmission for the Alberta Drug Benefit List* form. The form can be obtained at <https://www.ab.bluecross.ca/dbl/manufacturers.php> or by contacting the Coordinator, Scientific and Research Services, Alberta Blue Cross by phone at (780) 498-8098, by fax at (780) 498-3534, or by email at [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca).
11. A resubmission request must be complete and must include:
  - a. a completed *Resubmission for the Alberta Drug Benefit List* form. A resubmission request requires review by the Expert Committee and a recommendation made by the Expert Committee for the Minister's consideration for listing or not listing the Drug Product or Device on the ADBL. The form must contain new information not previously submitted for a review of the Drug Product or Device by the Expert Committee, unless otherwise indicated;
  - b. an unconditional consent letter authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Drug Product or Device and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Drug Product or Device submission and resubmission information and information about the Drug Product or Device in the possession of

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## ALBERTA DRUG BENEFIT LIST

Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert

Committee, and the government of a province or territory;

- c. a confirmation letter signed by a senior official of the Manufacturer stating that the Manufacturer is able and willing to supply the Alberta market with the subject Drug Product or Device in a quantity consistent with applicable APC or Interim APC requirements; and
- d. a revised Budget Impact Assessment (BIA) form in the case where new economic information about the Drug Product or Device is available, that has not been previously submitted, to support the resubmission request. The form can be obtained at <https://www.ab.bluecross.ca/dbl/manufacturers.php> or by contacting the Coordinator, Scientific and Research Services, Alberta Blue Cross by phone at (780) 498-8098, by fax at (780) 498-3534, or by email at [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca).

### Resubmission Requests based on the ADBL Price Policy

12. In addition to the requirements in “Resubmission Requests – General” above, this section applies to resubmission requests for a Drug Product or Device that:

- a. has not been listed on the ADBL, or that has been removed from the ADBL, by the Minister where the requirements of an Alberta Price Confirmation (APC), Interim APC or the Price Policy were not satisfied; or
- b. has been removed from the ADBL at the request of the Manufacturer.

13. A price policy resubmission request may be made on the *Alberta Price Policy Resubmission Form for the Alberta Drug Benefit List*. The form can be obtained at <https://www.ab.bluecross.ca/dbl/manufacturers.php> or by contacting the Coordinator, Scientific and Research Services, Alberta Blue Cross by phone at (780) 498-8098, by fax at (780) 498-3534, or by email at [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca).

14. A resubmission request must be complete and must include:

- a. a completed *Alberta Price Policy Resubmission Form for the Alberta Drug Benefit List*;
- b. an unconditional consent letter authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Drug Product or Device and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Drug Product or Device submission and resubmission information and information about the Drug Product or Device in the possession of

The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment

## ALBERTA DRUG BENEFIT LIST

Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert Committee, and the government of a province or territory; and

- c. a confirmation letter signed by a senior official of the Manufacturer stating that the Manufacturer is able and willing to supply the Alberta market with the subject Drug Product or Device in a quantity consistent with applicable APC or Interim APC requirements.

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## H) Biosimilar Drug Products

**Biosimilar Drug Product:** a biosimilar (previously referred to as subsequent-entry biologic) is a Drug Product demonstrated to be highly similar to a biologic drug that has previously been authorized for sale in Canada (Reference Biologic Drug). Biosimilars are approved by Health Canada based on a thorough comparison to a Reference Biologic Drug. A Biosimilar and a Reference Biologic Drug can be shown to be similar, but not identical.

**Reference Biologic Drug:** a biologic drug authorized by Health Canada on the basis of a complete quality, non-clinical, and clinical data package, to which a Biosimilar Drug Product is compared to demonstrate similarity.

Biosimilar Drug Product submissions may be considered through Expedited Review. However, Alberta Health and/or the Minister reserves the right to refer any Biosimilar Drug Product submission for Full Review by the Expert Committee.

Even if a Biosimilar Drug Product submission review is expedited, the Minister may decide not to list a Biosimilar Drug Product, or the listing of the Product may be delayed, if the Manufacturer has failed:

- (A) to provide a Price Confirmation,
- (B) to provide a Price Confirmation or Confirmed Price in accordance with the Price Policy and/or the applicable APC Terms and Conditions; or
- (C) to comply with the terms and conditions of an applicable APC.

The following submission requirements pertain to biosimilars of Reference Biologic Drugs that are currently, or were previously, listed on the ADBL.

1. Cover Letter:
  - Specify drug name with active pharmaceutical ingredient, strength(s), dosage form(s), route of administration(s), and Drug Identification Number(s) (DINs).
  - Specify the reference biologic product with active pharmaceutical ingredient
  - Specify the Health Canada-approved indication(s) for each product including those not being sought by the Manufacturer in this submission
  - Health Canada-approved indication(s) submitted
  - Manufacturer's reimbursement request
2. Consent Letter
  - an unconditional consent letter authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Drug Product and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Drug Product submission and resubmission information and information about the Drug Product in the possession of Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert Committee, and the government of a province or territory.

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## ALBERTA DRUG BENEFIT LIST

3. Letter Confirming Ability to Supply
  - a confirmation letter signed by a senior official of the Manufacturer stating that the Manufacturer is able and willing to supply the Alberta market with the subject Drug Product in a quantity consistent with applicable APC or Interim APC requirements.
4. Copy of completed Drug Identification Number (DIN) notification form
5. Copy of Notice of Compliance (NOC)
6. Current Patent Status
  - a signed statement from the Manufacturer stating that the submitted Drug Product does not infringe any patents
7. Price Information
  - The proposed price for Alberta (which must be in compliance with the Price Policy)
8. Health Canada-approved Product Monograph
  - A hard copy, and
  - an electronic (CD) copy compatible with Microsoft Word
9. If requested, the Manufacturer must provide the following Economic Information
  - a completed *Budget Impact Assessment* for the Alberta Drug Benefit List form. The form can be obtained at <https://www.ab.bluecross.ca/dbl/manufacturers.php> or by contacting the Coordinator, Scientific and Research Services, Alberta Blue Cross by phone at (780) 498-8098, by fax at (780) 498-3534, or by email at [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca).
10. If requested, additional clinical or economic information as requested by the Expert Committee, Alberta Health and/or the Minister.

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## **I) Devices - Blood Glucose Test Strips, Continuous Glucose Monitoring Systems and Insulin Pumps**

A Device refers to a Medical Device that is listed or under consideration for listing by the Minister on the ADBL. Medical Devices are approved by Health Canada and are monitored and evaluated through the Health Canada Medical Devices Directorate.

At this time, the only Device submissions being accepted to be reviewed through the Expedited Review process are submissions for blood glucose test strips, continuous glucose monitoring systems and insulin pumps.

Alberta Health and/or the Minister reserves the right to refer any Device submission that would otherwise meet the Expedited Review requirements for Full Review by the Expert Committee.

Even if a Device submission review is expedited, the Minister may decide not to list a Device, or the listing of the Device may be delayed, if the Manufacturer has failed:

- (A) to provide a Price Confirmation,
- (B) to provide a Price Confirmation or Confirmed Price in accordance with the Price Policy and/or the applicable APC Terms and Conditions; or
- (C) to comply with the terms and conditions of an applicable APC.

The following submission requirements pertain to blood glucose test strip, continuous glucose monitoring system and insulin pump products that are submitted for listing on the ADBL:

1. Consent Letter
  - an unconditional consent letter authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Device and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Device submission and resubmission information and information about the Device in the possession of Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert Committee, and the government of a province or territory.
2. Letter Confirming Ability to Supply
  - a confirmation letter signed by a senior official of the Manufacturer stating that the Manufacturer is able and willing to supply the Alberta market with the subject Device in a quantity consistent with applicable APC or Interim APC requirements.
3. Evidence of Health Canada Issued Authorization
  - a copy of the Medical Device License
4. Price Information
  - must provide unit pricing
  - The proposed price for Alberta (which must be in compliance with the Price Policy)
5. Evidence of the Product's Effectiveness
  - a summary of specifications of the Device

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## ALBERTA DRUG BENEFIT LIST

6. All Promotional Materials
  - such as product labels, instructions, product descriptions and/or package Inserts
7. If requested, the Manufacturer must provide the following Economic Information
  - a comprehensive pharmacoeconomic analysis in accordance with: the “*Guidelines for the economic evaluation of health technologies: Canada* [4<sup>th</sup> Edition]”. Ottawa: Canadian Agency for Drugs and Technologies in Health; 2017; cost-effectiveness and cost-utility data and the impact on “direct” healthcare costs are most useful, and
  - a completed *Budget Impact Assessment for the Alberta Drug Benefit List* form. The form can be obtained at <https://www.ab.bluecross.ca/dbl/manufacturers.php> or by contacting the Coordinator, Scientific and Research Services, Alberta Blue Cross by phone at (780) 498-8098, by fax at (780) 498-3534, or by email at [submissions@ab.bluecross.ca](mailto:submissions@ab.bluecross.ca)

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## Non-Innovator Policy

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1. The Minister may request submissions or direct Alberta Health and/or the Expert Committee to request submissions for products from time to time. Specifically, the Minister may request submissions for Multisource Drug Products seeking a listing designation as interchangeable with a Canadian Innovator Reference Product (CIRP) that is not currently listed on the *Alberta Drug Benefit List* (ADBL) when that CIRP has been identified by the Minister.
2. The Minister may identify a CIRP which has been considered but never listed on the ADBL and where the availability of a Multisource Drug Product(s) may now alter the cost effectiveness of the molecule:
  - a. During the Minister's evaluation of a CIRP to be identified under this Policy, the Minister will provide written notice of the evaluation to the CIRP manufacturer who may, at their discretion, provide materials to the Minister to be considered as part of the evaluation.
3. If such a CIRP is identified by the Minister, it will be included in the list included in this Non-Innovator Policy and any manufacturers with a valid Notice of Compliance (NOC) may make a submission (including the CIRP manufacturer).
4. Submissions must fulfill the applicable submission guidelines outlined below:
  - a. For Interchangeable products, the applicable Expedited or Full Submission Guidelines outlined in the ADBL as if the CIRP was currently listed on the ADBL including compliance with the prevailing Price Policy.
  - b. CIRP manufacturers must fulfill the following Submission Requirements outlined in Section A) New Chemical Entities/Single Source Drug Products in the ADBL (Section 1.25 – 1.26): Consent Letter, Letter Confirming Ability to Supply, Hard Copy and CD copy of the following Common Technical Document sections (Module 2.5 and 2.7.1, 2.7.3, 2.7.4 and 2.7.6), Copy of Drug Identification Number (DIN) Notification Form, Copy of NOC, Current Patent Status, Price Information, Therapeutic Products Directorate (TPD) - approved Product Monograph:
  - c. Only pricing information submitted according to the prevailing Price Policy will be evaluated for CIRPs under this Non-Innovator Policy. The Product Listing Agreement Policy will not be considered.
5. For clarity, Special Authorization requests for coverage of a specific brand under the Special Authorization Guidelines outlined in the ADBL will not be considered unless the specific brand requested is a benefit on the ADBL.
6. Where the Minister has requested submissions for a specific Drug Product through this Requested Submissions Policy by including it in Section 7 below, but no submissions are received and the drug product continues to be funded through an Alberta Government Sponsored program (for example, Health Benefits Exception Committee), Alberta Health may publish the price established for the molecule through that pan-Canadian Generic Initiative (please refer to the Price Policy for further details) and will pay no more than that price for beneficiaries under any Government of Alberta Sponsored Drug program.

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## ALBERTA DRUG BENEFIT LIST

7. Submissions are currently being accepted for Multisource Drug Products for the following non-listed CIRPs. For clarity, the CIRP itself continues to be eligible to submit for listing on the ADBL.
- Adderall XR (amphetamine sulfate/amphetamine aspartate/dextroamphetamine sulfate/dextroamphetamine saccharate) 5mg, 10 mg, 15 mg, 20 mg, 25 mg & 30 mg capsules
  - Concerta (methylphenidate hydrochloride) 18 mg, 27 mg, 36 mg & 54 mg tablets
  - CellCept (mycophenolate mofetil) 250 mg capsules & 500 mg tablets
  - Kuvan (sapropterin dihydrochloride) 100 mg oral powder packet & 500 mg oral powder packet
  - Lyrica (pregabalin) 25 mg, 50 mg, 75 mg, 150 mg & 300 mg capsules
  - Revia (naltrexone hydrochloride) 50 mg tablet
  - Strattera (atomoxetine hydrochloride) 10 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg & 100 mg capsules
  - Truvada (emtricitabine/ tenofovir disoproxil fumarate) 200 mg/300 mg tablet

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## Supply Shortages

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Where a Manufacturer has not supplied, or is not supplying, a sufficient quantity of a Drug Product or Device to meet the demand in Alberta (as determined by Alberta Health at its sole option and discretion, and based on any information it deems appropriate):

1. If the unavailable Drug Product is a Single Source Drug Product on the List, Drug Products not otherwise allowed as benefits may be added temporarily or temporarily reimbursed for the Alberta government-sponsored drug programs.
2. Drug Products or Devices added or reimbursed under this policy may remain as temporary benefits until the supply shortage is rectified.
3. In order to remain as benefits after the shortage is rectified, Manufacturers of these Drug Products or Devices must follow the usual submission and review process for listing.
4. Alberta Health may recover any cost difference from the manufacturer unable to supply a Drug Product or Device.
5. Alberta Health may at its sole discretion, take any other steps or require any information from a manufacturer or other person that is reasonably required to manage a supply shortage.
6. Alberta Health may:
  - refuse to list any Drug Product or Device of the manufacturer,
  - refuse to consider any Drug Product or Device submission of the manufacturer for expedited or priority review; or
  - cancel or modify the listing of the Drug Product or Device that is not meeting the supply demand.

## Units of Issue for Pricing

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These units of issue are used for presenting prices in the List.

<b>Dosage Form</b>	<b>Unit of Issue Priced in <i>ADBL</i></b>
Ampoules.....	Millilitre
Bladder Irrigation Solutions .....	Millilitre
Dental Pastes .....	Gram
Devices.....	Device
Inhalation Capsules .....	Capsule
Inhalation Cartridges .....	Cartridge, Dose
Inhalation Disks .....	Disk
Inhalation Solutions or Suspensions .....	Millilitre – all preparations including nebulas
Inhalation Unit Dose Solution.....	Millilitre, Dose, Actuation
Injections.....	Vial – where reconstitution is required (or Millilitre or Unit where indicated)
Injections.....	Millilitre – where no reconstitution is required (or Vial where indicated)
Injections – Cartridges.....	Millilitre
Injections – Emulsion .....	Millilitre
Injections – Syringes.....	Syringe (or Millilitre where indicated)
Injection – Implant.....	System
Injection Syringe/Oral Capsule .....	Kit
Injection Vial/Oral Capsule.....	Kit
Injection Vial/Oral Tablet.....	Kit
Injection Syringe/Oral Tablet .....	Kit
Intrauterine Insert.....	System
Irrigating Solutions.....	Millilitre
Lock Flush .....	Millilitre
Metered Dose Aerosols .....	Dose
Metered Inhalation Powder .....	Dose
Nasal Metered Dose Aerosols .....	Dose
Nasal Metered or Unit Dose Sprays .....	Dose
Nasal Solutions .....	Millilitre
Nasal Sprays.....	Millilitre
Ophthalmic Solutions or Suspensions or Drops .....	Millilitre
Ophthalmic Gels or Ointment.....	Gram
Ophthalmic Long Acting Gellan Solutions.....	Millilitre
Oral Caplets .....	Caplet
Oral Capsules – all formulations .....	Capsule
Oral Drops .....	Millilitre
Oral Granules.....	Bulk size – Gram
Individual Packet .....	Packet

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## Units of Issue for Pricing, continued

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Dosage Form	Unit of Issue Priced in ADBL
Oral Liquids – all formulations .....	Millilitre
Oral Powders.....	Gram (or Dose where indicated)
Oral Powder Packets .....	Individual Packet
Oral Rinses.....	Millilitre
Oral Tablets – all formulations .....	Tablet
Oral Tablets – oral contraceptives.....	Tablet
Oral Tablet/Capsule.....	Kit
Oral Wafer.....	Wafer
Otic Ointments or Gels.....	Gram
Otic Solutions or Suspensions or Drops .....	Millilitre (or Vial where indicated)
Rectal Enemas .....	Enema
Rectal Foams .....	Gram
Rectal Ointments .....	Gram
Rectal Retention Enemas .....	Enema
Rectal Suppositories - all formulations.....	Suppository
Scalp Lotions .....	Millilitre
Scalp Solutions .....	Millilitre
Sublingual Metered Dose Spray .....	Dose
Sublingual Tablet .....	Tablet
Topical Bars .....	Gram
Topical Cleansers .....	Millilitre
Topical Creams/Ointments - all formulations..	Gram
Topical Gauzes.....	Dressing
Topical Gels - all formulations .....	Gram
Topical Jellies.....	Millilitre
Topical Lotions.....	Millilitre or Gram
Topical Powders.....	Gram
Topical Solutions .....	Millilitre
Topical Washes .....	Millilitre or Gram
Transdermal Gel.....	Gram
Transdermal Patches.....	Patch
Vaginal Capsules or Ovules or Tablets.....	Capsule or Ovule or Tablet
Vaginal Creams or Ointments or Gels.....	Gram
Vaginal Douches .....	Millilitre
Vaginal Ovule/Topical Cream.....	Kit
Vaginal Slow Release Rings .....	Ring
Vaginal Suppositories.....	Suppository

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## Alberta Health Expert Committee on Drug Evaluation and Therapeutics: Policy for Administering Interchangeability Challenges

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**Note: This Policy is not applicable for Drug Products that are eligible for, and are reviewed under, the Expedited Review Process for Interchangeable Drug Products.**

From time-to-time, the Expert Committee on Drug Evaluation and Therapeutics receives unsolicited information (“Challenge Information”) from a Manufacturer (the “Challenger”) suggesting that additional information should be taken into account when a submission for interchangeability for a Multisource product is being considered by the Expert Committee. Alberta Health is not prepared to have any Challenge Information considered by the Expert Committee unless the Manufacturer whose Drug Product is being challenged (the “Applicant”) is provided with a full copy of the Challenge Information and is given an opportunity to respond to it.

As a result, Alberta Health has developed and approved the following process for the handling of Challenge Information.

1. Challenge Information must comply with the following conditions.
2. Challenge Information must be received by Alberta Blue Cross:
  - For first-entry interchangeable product submissions – Within 15 days of the date of issuance of the NOC for the Applicant’s product.
  - For all other submissions, by the submission deadline date.
3. All Challenge Information must include an unconditional Written Consent, signed by the Challenger, authorizing Alberta Health and its employees, contractors, consultants and agents to collect and use information respecting a Drug Product and to disclose the subject information to Alberta Health, its employees, contractors, consultants and agents, Health Canada, the Canadian Agency for Drugs and Technologies in Health (CADTH), all persons, parties or entities involved in the CDR Procedure, the Patented Medicine Price Review Board (PMPRB), Alberta Health Services (AHS) and the government of a province or territory in Canada. Information that may be collected, used and disclosed includes, but is not limited to, all Drug Product submission and resubmission information and information about the Drug Product in the possession of Health Canada, CADTH, all persons, parties or entities involved in the CDR Procedure, PMPRB, AHS, Alberta Health, the Expert Committee, and the government of a province or territory.
4. If the above unconditional Written Consent is not submitted as required, the Challenge Information will not be considered by the Expert Committee.
5. If Written Consent is submitted as required, the Challenge Information will be duplicated in its entirety and forwarded by Alberta Blue Cross to the Applicant, inviting a response (“Applicant Response”). The Applicant Response must be received by Alberta Blue Cross no later than 15 days after the date of the letter from Alberta Blue Cross.
6. If an Applicant Response is not received by Alberta Blue Cross within the time provided, only the Challenge Information will be provided to the Expert Committee for consideration. If an Applicant Response is received within the time provided, both the Applicant Response and the Challenge Information will be provided to the Expert Committee for consideration.
7. No further information may be submitted to the Expert Committee for consideration.
8. The Applicant Response should only address information contained in the Challenge Information. Anything in the Applicant Response that does not relate to information

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## ALBERTA DRUG BENEFIT LIST

contained in the Challenge Information may, at the sole discretion of the Expert Committee, be disregarded.

9. It is a condition of each and every Submission and Challenge that the terms, conditions, criteria and time limitations contained in this policy will apply and that:
  - a) Applicants, by filing a Submission and Applicant Response; and,
  - b) Challengers, by submitting Challenge Information agree to and are bound by this policy.
10. In the event the anticipated Applicant submission is not received, Challenge Information will be destroyed 6 months after receipt.

Inquiries may be made to:

Manager  
Scientific and Research Services  
Alberta Blue Cross  
10009 - 108 Street NW  
Edmonton AB T5J 3C5  
Phone: (780) 498-8098  
Fax: (780) 498-3534

## Your Comments Disclosure for Potential Conflicts of Interest

Anyone who wants to give comments about Drug Products to the Alberta Health Expert Committee on Drug Evaluation and Therapeutics (ECDET) must complete a Declaration of Conflict of Interest Form. A conflict of interest is when opinions may be affected by family, friendships, or relationships with support groups, or by receiving money or gifts from companies related to the Drug Product.

If the Conflict of Interest form is not completed, or if you do not report conflicts on the form you send in but we find there are conflicts when your form is looked over; your comments will not be sent to the Expert Committee.

### Your Contact Information:

Mailing Address: \_\_\_\_\_

Fax: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### **Check off your position. I am a...**

Patient      Health Care Professional      Other, Please explain: \_\_\_\_\_

Did you receive help to complete this request?      Yes      No      If yes, please explain and list who helped you.

Please complete the table below. Report relationships from the last 2 years before the date you send this form.

I do not have a relationship (financial or anything else) with any for-profit or not-for-profit organizations.

I have a relationship (financial or anything else) with a for-profit or not-for-profit organization.

Were you ever paid (gifts, money or support) or put money into any drug companies, medical devices companies, or other companies (for profit or non-profit e.g. disease-specific support groups) that support the Drug Product? If yes, please explain:	Yes	No
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Are you a member on an advisory board, support group or committee for this Drug Product or for a medical condition related to this Drug Product? If yes, please explain:	Yes	No
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Have you ever been or are a part of a clinical trial for this Drug Product? If yes, please explain:	Yes	No
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Were you ever paid or received gifts to speak for a drug company or medical communication company related to this Drug Product or medical condition related to this Drug Product? If yes, please explain:	Yes	No
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*If you have any other conflicts or are not sure, please include here. Attach extra sheets if you need more space:*

I have mentioned all of my conflicts of interest.

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Company or Organization you are a part of (state position): \_\_\_\_\_

E-Signature: \_\_\_\_\_

If e-signature is not possible for you, you can email this form without a signature but please use your own email to send it, so that we can be sure who is providing this information. Or, you can print and sign the form.

## **Your Comments are Important to Us Form**

To improve the high standards established for this publication, the Alberta Health Expert Committee on Drug Evaluation and Therapeutics would like to offer you an opportunity for input. Should you have any concerns and/or suggestions concerning product listings or criteria for coverage of products available via special authorization, etc. please let us know. If you are writing in support of a product listing change or a revision to the special authorization criteria for coverage, you must provide evidence in support of your comments from the peer-reviewed scientific literature.

**Please note: this is not a mechanism for an appeal for a specific patient.**

Please write your comments in the space provided below. Attach extra sheets if you need more space, or if printing this form. Please send the Comments form and the completed conflict of interest form by mail/fax/email to:

Alberta Health Expert Committee on Drug Evaluation and Therapeutics c/o  
Manager, Scientific and Research Services Alberta Blue Cross, 10009 108 Street NW  
Edmonton, Alberta T5J 3C5  
submissions@ab.bluecross.ca  
Fax: (780) 498-3534

## RESTRICTED BENEFITS

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Selected Devices or Drug Products are eligible benefits with restrictions in the Alberta Drug Benefit List. For these products a comment is displayed in the List after the ingredient name. The comment initially states "RESTRICTED BENEFIT" and is followed by an explanation of the restriction. For an example, refer to the Legend in the Introduction section of the List.

### Products Designated as Restricted Benefits

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The products listed below are restricted benefits in the List.

#### PTC 00:00:02

- **Diabetes Supplies** Blood Glucose Test Strips, Blood Letting Lancet, Insulin Pen Needles, Insulin Syringes, Urine Test Strips, Glucose Monitoring Transmitter, Glucose Monitoring Receiver, Transmitter and Sensor

#### PTC 08:12.06.04

- **Cefadroxil** 500 mg oral capsule

#### PTC 08:12.07.08

- **Ertapenem** 1 g/vial injection
- **Meropenem** 500 mg/vial and 1 g/vial injection

#### PTC 08:12.07.12

- **Cefoxitin Sodium** 1 g/vial and 2 g/vial injection

#### PTC 08:12.12.92

- **Azithromycin** 600 mg oral tablet

#### PTC 08:12.16.08

- **Ampicillin** 250 mg and 500 mg oral capsule

#### PTC 08:12.16.16

- **Piperacillin Sodium/ Tazobactam Sodium** 2 g/vial / 250 mg/vial, 3 g/vial / 375 mg/vial, and 4 g/vial / 500 mg/vial injection

#### PTC 08:12.28.24

- **Linezolid** 600 mg oral tablet

#### PTC 08:14.08

- **Fluconazole** 10 mg/ml oral suspension
- **Isavuconazonium Sulfate** 100 mg capsule and 200 mg/vial injection
- **Itraconazole** 10 mg/ml oral suspension
- **Voriconazole** 50 mg, 200 mg oral tablet and 200 mg/vial injection

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**PTC 08:14.16**

- **Caspofungin** 50 mg/vial injection and 70 mg/vial injection

**PTC 08:16.92**

- **Rifabutin** 150 mg oral capsule

**PTC 08:18.08.20**

- **Lamivudine** 100 mg oral tablet
- **Tenofovir Disoproxil Fumarate** 300 mg oral tablet

**PTC 08:18.20**

- **Peginterferon Alfa-2A** 180 mcg/0.5 ml injection syringe

**PTC 08:18.32**

- **Adefovir Dipivoxil** 10 mg oral tablet
- **Entecavir** 0.5 mg oral tablet

**PTC 08:18.92**

- **Nirmatrelvir/ Ritonavir** 150 mg/100 mg Tablet

**PTC 12:20.04**

- **Cyclobenzaprine HCL** 10 mg oral tablet

**PTC 12:92:00**

- **Varenicline Tartrate** 0.5 mg and 1 mg oral tablet, 0.5 mg/1 mg oral tablet
- **Varenicline Tartrate/ Varenicline Tartrate** 0.5 mg/1 mg oral tablet

**PTC 20:12.18**

- **Ticagrelor** 90 mg oral tablet

**PTC 28:08.08**

- **Codeine Phosphate/ Acetaminophen** 1.6 mg/ml / 32 mg/ml oral elixir

**PTC 28:16.08.04**

- **Aripiprazole** 2 mg and 5 mg oral tablet
- **Risperidone Tartrate** 1 mg/ml oral solution

**PTC 28:20.04**

- **Amphetamine Sulfate/ Amphetamine Aspartate/ Dextroamphetamine Sulfate/ Dextroamphetamine Saccharate** 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg oral extended-release capsule
- **Lisdexamfetamine Dimesylate** 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg oral capsule

**PTC 28:20.92**

- **Methylphenidate HCL** 10 mg, 15 mg, 18 mg, 20 mg, 25 mg, 27 mg, 30 mg, 35 mg, 36 mg, 40 mg, 45 mg, 50 mg, 54 mg, 55 mg, 60 mg, 70 mg, 80 mg, 85 mg, 100 mg oral controlled-release capsule

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**PTC 28:32.28**

- **Almotriptan Malate** 6.25 mg and 12.5 mg oral tablet
- **Naratriptan HCL** 1 mg and 2.5 mg oral tablet
- **Rizatriptan Benzoate** 5 mg oral tablet, 10 mg oral tablet, 5 mg oral disintegrating tablet and 10 mg oral disintegrating tablet
- **Sumatriptan Hemisulfate** 5 mg/dose and 20 mg/dose nasal unit dose spray
- **Sumatriptan Succinate** 50 mg oral tablet, 100 mg oral tablet and 12 mg/syringe injection
- **Zolmitriptan** 2.5 mg oral tablet, 2.5 mg oral dispersible tablet and 5 mg/dose nasal unit dose spray

**PTC 48:10.24**

- **Montelukast Sodium** 4 mg oral chewable tablet, 4 mg oral granule, 5 mg oral chewable tablet, and 10 mg oral tablet

**PTC 52:56:00**

- **Aflibercept** 2 mg/vial injection
- **Brolucizumab** 6 mg/syringe injection
- **Faricimab** 2.3 mg/vial injection
- **Ranibizumab** 2.3 mg/vial injection

**PTC 56:22.92**

- **Aprepitant** 80 mg oral capsule
- **Aprepitant/Aprepitant** 80 mg/125 mg oral capsule

**PTC 68:04:00**

- **Mometasone Furoate** 100 mcg/dose metered inhalation powder

**PTC 68:22:12**

- **Glucagon** 3 mg/dose nasal powder

**PTC 86:12:00**

- **Propiverine Hydrochloride** 5 mg oral tablet

**PTC 92:36:00**

- **Leflunomide** 10 mg and 20 mg oral tablet

**PTC 94:00:00**

- **Aerosol Holding Chamber** device
- **Aerosol Holding Chamber/Mask** infant, pediatric and adult chamber/mask device

## Limited Restricted Benefits

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Selected Drug Products and Devices are eligible benefits with limits and restrictions in the Alberta Drug Benefit List. For these products a comment is displayed in the List after the ingredient name. The comment initially states “LIMITED RESTRICTED BENEFIT” and is followed by an explanation of the limits and restrictions. For an example, refer to the Legend in the Introduction of the List.

# SPECIAL AUTHORIZATION GUIDELINES

## Special Authorization Policy

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### Drug Products and Devices Eligible for Consideration by Special Authorization

Drug Products and Devices may be considered for coverage by special authorization under one or more of the following circumstances, unless a specific product falls under the criteria for Drug Products or Device **not** eligible for consideration by special authorization. Please see the end of this section for information regarding Drug Products and Devices not eligible for consideration by special authorization.

1. The Drug Product or Device is covered by Alberta Health under specified criteria (listed in the following sections). Devices and Drug Products and indications other than those specified are not eligible for consideration by special authorization.
2. The Drug Product or Device is normally covered by another government program or agency for a specific approved clinical condition, but is needed for the treatment of a clinical condition that is not covered by that government program or agency.
3. The Drug Product or Device is required because other Drug Products or Devices listed in the Alberta Drug Benefit List are contraindicated or inappropriate because of the clinical condition of the patient.
4. The particular brand of Drug Product is considered essential in the care of a patient, where the LCA price policy would otherwise apply. Coverage of a specific brand may be considered where a patient has experienced significant allergic reactions or documented untoward therapeutic effects with alternate brands in an interchangeable grouping. Coverage of a brand name product will **not** be considered in situations where the interchangeable grouping includes a pseudo-generic to the brand name Drug Product.
5. A particular Device, Drug Product or dosage form of a Drug Product is essential in the care of a patient where the MAC price policy would otherwise apply. Exceptions may occur at the Drug Product or Device level. Coverage may be considered only where a patient has experienced significant allergic reactions or documented untoward therapeutic effects with the Drug Product or Device which establishes the MAC pricing.

Prior approval must be granted by Alberta Blue Cross to ensure coverage by special authorization. For those special authorization requests that are approved, the effective date for authorization is the beginning of the month in which the physician's request is received by Alberta Blue Cross.

Special authorization is granted for a defined period as indicated in each applicable special authorization Drug Product or Device criteria (the "Approval Period"). If continued treatment is necessary beyond the Approval Period, it is the responsibility of the patient and physician to **re-apply for coverage prior to the expiration date of the Approved Period, unless the Auto-Renewal Process or Step Therapy Approval Process apply** (see below).

### Auto-Renewal Process

Selected Drug Products and Devices are eligible for the following auto-renewal process (for eligibility, see the Special Authorization criteria for each Drug Product and Device).

1. For initial approval, a special authorization request must be submitted. If approval is granted, it will be effective for the Approval Period outlined in the Drug Product's or Device's Special Authorization criteria.

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2. As long as the patient has submitted a claim for the Drug Product or Device within the preceding Approval Period (example: within the preceding 6 months), approval will be automatically renewed for a further Approval Period (example: a further 6 months). There is no need for the prescriber to submit a new request as the automated real-time claims adjudication system will read the patient's claims history to determine if a claim has been made within the preceding Approval Period.
3. If the patient does not make a claim for the Drug Product or Device during the Approval Period, the approval will lapse and a new special authorization request must be submitted.

## Step Therapy Approval Process

Select Drug Products and Devices are eligible for coverage via the step therapy process, outlined below.

1. If the patient has made a claim for the First-Line\* Drug Product(s) or Device(s) within the preceding 12 months, the claim for the step therapy Drug Product or Device will be approved.
2. The automated real-time claims adjudication system will read the patient's claims history to determine if the required First-Line\* Drug Product(s) or Device(s) have been claimed within the preceding 12 months.
3. Subsequent claims for Drug Product(s) or Device(s) permitted by step therapy will continue to be approved as long as the Drug Product or Device has been claimed within the preceding 12 months.
4. The regular special authorization approval process will continue to be available for step therapy approvals for those patients whose First-Line\* claims cannot be adjudicated through the automated real-time claims adjudication system.

\* A First-Line Drug Product or Device includes any Drug Product(s) or Device(s) that, under the Drug Product's or Device(s) Special Authorization criteria, are required to be utilized before reimbursement for the Drug Product or Device is permitted.

## Drug Products and Devices *Not Eligible* for Consideration by Special Authorization

The following categories of Drug Products and Devices are **not** eligible for special authorization:

1. Drug Products and Devices **deleted** from the List.
2. Drug Products and Devices **not yet reviewed** by the Alberta Health Expert Committee on Drug Evaluation and Therapeutics. This applies to:
  - \* products where a complete submission has been received from the Manufacturer and the product is under review,
  - \* products where an incomplete submission has been received from the Manufacturer, and
  - \* Drug Products where the Manufacturer has not made a submission for review.

Drug Products not yet reviewed may encompass new pharmaceutical Drug Products, new strengths of Drug Products already listed, reformulated products and new interchangeable (generic) products.
3. Drug Products and Devices that have **completed the review** process and are **not included** on the List.
4. Most Drug Products available through Health Canada's Special Access Program.

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## **ALBERTA DRUG BENEFIT LIST**

5. Drug Products when prescribed for cosmetic indications.
6. Nonprescription or over-the-counter Drug Products are generally not eligible.

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