

SPECIAL AUTHORIZATION GUIDELINES

Special Authorization Policy

Drug Products Eligible for Consideration by Special Authorization

Drug Products 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 **not** eligible for consideration by special authorization. Please see the end of this section for information regarding Drug Products not eligible for consideration by special authorization.

1. The drug is covered by Alberta Health under specified criteria (listed in the following sections). Drug Products and indications other than those specified are not eligible for consideration by special authorization.
2. The Drug Product 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 is required because other Drug Products 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 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 level. Coverage may be considered only where a patient has experienced significant allergic reactions or documented untoward therapeutic effects with the Drug Product 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 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 are eligible for the following auto-renewal process (for eligibility, see the Special Authorization criteria for each Drug Product).

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 Special Authorization criteria.
2. As long as the patient has submitted a claim for the Drug Product within the preceding Approval Period (example: within the preceding 6 months), approval will be automatically

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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 during the Approval Period, the approval will lapse and a new special authorization request must be submitted.

Step Therapy Approval Process

Select Drug Products 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) within the preceding 12 months, the claim for the step therapy Drug Product 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) have been claimed within the preceding 12 months.
3. Subsequent claims for Drug Product(s) permitted by step therapy will continue to be approved as long as the Drug Product 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* drug claims cannot be adjudicated through the automated real-time claims adjudication system.

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

Drug Products *Not Eligible* for Consideration by Special Authorization

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

1. Drug Products **deleted** from the List.
2. Drug Products **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 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.
5. Drug Products when prescribed for cosmetic indications.
6. Nonprescription or over-the-counter Drug Products are generally not eligible.

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