

# **Updates to the Alberta Human Services Drug Benefit Supplement**

**Effective February 1, 2021**

*Alberta*  Human Services

Inquiries should be directed to:

**Pharmacy Services**

Alberta Blue Cross  
10009 108 Street NW  
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(403) 294-4041 (Calgary)  
1-800-361-9632 (Toll Free)

FAX Number: (780) 498-8406  
1-877-305-9911 (Toll Free)

**Website:** <https://www.alberta.ca/alberta-supports.aspx>

Administered by Alberta Blue Cross  
on behalf of Alberta Health.

The Drug Benefit List (DBL) is a list of drugs for which coverage may be provided to program participants. The DBL is not intended to be, and must not be used as a diagnostic or prescribing tool. Inclusion of a drug on the DBL does not mean or imply that the drug is fit or effective for any specific purpose. Prescribing professionals must always use their professional judgment and should refer to product monographs and any applicable practice guidelines when prescribing drugs. The product monograph contains information that may be required for the safe and effective use of the product.

Copies of the *Alberta Drug Benefit List* are available from Pharmacy Services, Alberta Blue Cross at the address shown above.

Binder and contents: **\$42.00** (\$40.00 + \$2.00 G.S.T.)  
Contents only: **\$36.75** (\$35.00 + \$1.75 G.S.T.)

A cheque or money order must accompany the request for copies.

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## **Drug Product(s) with Changes to Criteria for Coverage**

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<u>Trade Name / Strength / Form</u>	<u>Generic Description</u>	<u>DIN</u>	<u>MFR</u>
BOOST DIABETIC ORAL LIQUID	NUTRITIONAL PRODUCT (DIABETIC)	00000999483	NHN

## **Discontinued Listing(s)**

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*Notification of discontinuation has been received from the manufacturer(s). The Alberta government-sponsored drug programs previously covered the following drug product(s). Effective February 1, 2021, the listed product(s) will no longer be a benefit and where applicable, will not be considered for coverage by Special Authorization. A transition period will be applied and as of March 1, 2021 claims will no longer pay for these product(s).*

<u>Trade Name / Strength / Form</u>	<u>Generic Description</u>	<u>DIN</u>	<u>MFR</u>
TEVA-ARIPIPRAZOLE 10 MG TABLET	ARIPIPRAZOLE	00002464160	TEV
TEVA-ARIPIPRAZOLE 15 MG TABLET	ARIPIPRAZOLE	00002464179	TEV
TEVA-ARIPIPRAZOLE 20 MG TABLET	ARIPIPRAZOLE	00002464187	TEV
TEVA-ARIPIPRAZOLE 30 MG TABLET	ARIPIPRAZOLE	00002464195	TEV

## **PART 2**

# Drug Additions

**NUTRITIONAL PRODUCT (DIABETIC)**

ORAL LIQUID

00000999483 BOOST DIABETIC

NHN

\$ 0.0072

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