



# Reference guide for British Columbia and Saskatchewan pharmacies

*A resource manual for pharmacies  
using direct bill claims adjudication*

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# Contact information

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## Address

**Alberta Blue Cross**  
**10009 108 Street NW**  
**Edmonton, AB**  
**T5J 3C5**

## Web sites

Alberta Blue Cross provider information [www.ab.bluecross.ca/providers/pharmacy-home.html](http://www.ab.bluecross.ca/providers/pharmacy-home.html)  
Alberta's *Interactive Drug Benefit List (iDBL)* [www.ab.bluecross.ca/dbl/idbl\\_main1.html](http://www.ab.bluecross.ca/dbl/idbl_main1.html)  
Alberta Blue Cross Drug Price List [www.ab.bluecross.ca/providers/pharmacy-price-files.php](http://www.ab.bluecross.ca/providers/pharmacy-price-files.php)

## Provider Relations Contact Centre—provider inquiries

Alberta Blue Cross has a contact centre with Provider Relations representatives dedicated to serving you. Call one of the numbers listed below to reach a Provider Relations representative.

<b>Edmonton and area</b>	<b>780-498-8370</b>
<b>Calgary and area</b>	<b>403-294-4041</b>
<b>Toll free</b>	<b>1-800-361-9632</b>

### Hours of operation

Monday to Friday	8 a.m. to 8 p.m. MT
Saturday and Sunday	9 a.m. to 5 p.m. MT
Statutory holidays	9 a.m. to 5 p.m. MT

Our offices are closed on the following dates: Jan. 1, Dec. 25 and Dec. 26.

## Customer Services department

You can provide Alberta Blue Cross plan members who have questions about their Alberta Blue Cross coverage with the following phone numbers to contact Alberta Blue Cross directly.

<b>Edmonton and area</b>	<b>780-498-8000</b>
<b>Calgary and area</b>	<b>403-234-9666</b>
<b>Toll free</b>	<b>1-800-661-6995</b>

### Hours of operation

Monday to Friday	8:30 a.m. to 5 p.m. MT
Saturday and Sunday	Closed
Statutory holidays	Closed

## Government Services department

You can provide Alberta Blue Cross plan members who have questions about their Non-Group (Group 1) premiums with the following phone numbers to contact Alberta Blue Cross directly.

<b>Edmonton and area</b>	<b>780-498-5970</b>
<b>Calgary and area</b>	<b>403-234-9666</b>
<b>Toll free</b>	<b>1-888-498-5970</b>

### Hours of operation

Monday to Friday	8:30 a.m. to 5 p.m. MT
Saturday and Sunday	Closed
Statutory holidays	Closed

## Payment to pharmacies

Payments and issuance of payment summaries to pharmacies are completed every two weeks for direct bill claims submitted to Alberta Blue Cross.

# Basic plan information

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Alberta Blue Cross administers benefits on behalf of many different plan sponsors. These plan sponsors are classified in three broad categories.

1. **Alberta government-sponsored plans:** these plans are sponsored by a government program.
2. **Employer-sponsored plans:** these plans are sponsored by employers providing benefit coverage to their employees.
3. **Individual health plans:** these are plans purchased by individuals who may be self-employed, without employer benefits or early retirees.

## Alberta government-sponsored plans

Alberta Blue Cross administers plans on behalf of the Government of Alberta. These plans, which are sponsored by Alberta Health and Alberta Human Services, provide drug coverage for Albertans and their families.

These government-sponsored programs include

- Non-Group Coverage (Group 1),
- Coverage for Seniors (Group 66),
- Alberta Widows' Pension Plan (Group 66A) and
- Palliative Coverage (Group 20514)

Government-sponsored plans may use plan management features including

- Plan maximums,
- Least Cost Alternative (LCA) pricing,
- Maximum Allowable Cost (MAC) pricing,
- Co-pay,
- Special Authorization and
- Step Therapy.

Eligible drug benefits included in these government-sponsored plans are outlined in detail in the *Alberta Drug Benefit List*, the *Alberta Human Services Drug Benefit Supplement* and the *Palliative Drug Benefit Supplement*. Updated copies of these documents may be found online at:

[www.ab.bluecross.ca/dbl/publications.html](http://www.ab.bluecross.ca/dbl/publications.html)



- ▶ Introduction to DBL
- ▶ Interactive DBL (iDBL)
- ▼ Printable DBL and Related Publications
  - ▶ Search tips
  - Drug Manufacturer Information & Forms
  - ▶ DBL FAQ
  - ▶ Forms
  - ▶ DBL Contact and Feedback

## Interactive Drug Benefit List (iDBL)

There are a number of exciting features that make the iDBL a great new tool for searching the Drug Benefit List publications

- Quickly and easily re-sort your search results.
- Obtain quick information about the date certain products became benefits.
- Find complete pricing and interchangeability information.
- Find product specific special authorization coverage criteria.

The iDBL is a real time document that is updated daily.

- [Search the Interactive DBL \(iDBL\)](#)
- [iDBL searchtips](#)

## Printable Drug Benefit List and Related Publications

### DBL Table of Contents

(Note: This contains the amended Price Policy as of February 13, 2017)

- [Alberta Drug Benefit List \(ADBL\)](#)
- [Alberta Human Services Drug Benefit Supplement \(HSDBS\)](#)
- [Palliative Coverage Drug Benefit Supplement](#)
- [DBL Reports](#)
- [For the Amended February 13, 2017 Price Policy, please click here](#)

## Alberta Drug Benefit List (ADBL)

[Updates to the ADBL April 1, 2017 ffl](#)

[ADBL - April 1, 2017 !:il](#)

[April 1, 2017 ADBL ffl](#)

[Summary of Changes to the April 1, 2017 ADBL ffl](#)

[For the Amended February 13, 2017 Price Policy, please click here ffl](#)

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## Alberta Human Services Drug Benefit Supplement (HSDBS)

[HSDBS -April 1, 2017 !:il](#)

[April 1, 2017 HSDBS ffl](#)

[Summary of Changes to the April 1, 2017 HSDBS ffl](#)

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## Palliative Coverage Drug Benefit Supplement (PCDBS)

[PCDBS -April 1, 2017 !:il](#)

[April 1, 2017 PCDBS ffl](#)

[Summary of Changes to the April 1, 2017 PCDBS ffl](#)

## DBL Reports

[Current DBL Reports](#)

## ADBL, HSDBS and PCDBS Price Files

[Alberta Drug Benefit List, Alberta Human Services and the Palliative Coverage Drug Benefit Supplements Price File - April 1, 2017 !:il](#)

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### NOTICE:

The DBL, DBS and related publications require knowledgeable interpretation and are intended primarily for professional healthcare practitioners, pharmacies, hospitals and organizations associated with the manufacture, distribution and use of pharmaceutical preparations.

Electronic versions of all DBL and DBS related publications are unofficial versions and are provided for convenience and private use only. Official paper versions can be obtained from [Alberta Blue Cross](#) who publishes them on behalf of Alberta Health and Alberta Human Services.

Alberta Health reserves the right to make changes, without notice, to the List through the [Interactive DBL \(iDBL\)](#), and any such changes to the [Interactive DBL \(iDBL\)](#) are effective the date of the change (unless otherwise stated) and regardless of the date of publication in the paper version or updates.



## Employer-sponsored plans

Alberta Blue Cross works with employers to identify and build the best coverage for their employees. In order to offer comprehensive and cost-effective coverage, employer-sponsored plans may incorporate a variety of plan components. You may encounter employer-sponsored plans with plan management features including:

- Deductibles,
- Plan maximums,
- Least Cost Alternative (LCA) pricing,
- Maximum Allowable Cost (MAC) pricing,
- Therapeutic Alternative Reference Pricing (TARP),
- Dispensing fee caps,
- Co-pay,
- Special Authorization, and
- Step Therapy.

Each employer-sponsored plan selects a benefit package containing eligible drug benefits best suited to the demographic mix of their employees. These plans cover most drugs on the *iDBL* as well as on the *Alberta Blue Cross Drug Price List*.

## Individual health plans

Alberta Blue Cross offers a number of individual health plans designed to provide health coverage to individuals who are self-employed, not supported by an employer plan or early retirees.

These plans are designed to provide benefits at an affordable cost to plan members. As a pharmacist, you should be aware of the following:

- Albertans applying for an individual health plan are required to undergo a medical review. As a result of this process, medications for pre-existing conditions may be excluded as an eligible drug benefit for a period of time.
- All individuals applying for an individual health plan are notified, in writing, of any drugs excluded from eligibility prior to the start of their coverage.

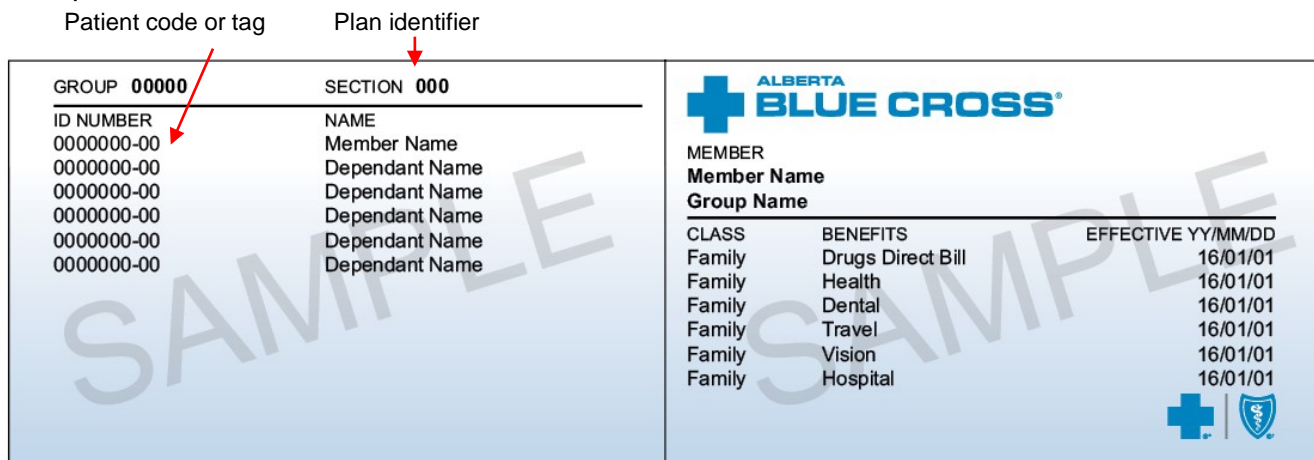
Individual health plans can include one or more of the following elements:

- Least Cost Alternative (LCA) pricing,
- Maximum Allowable Cost (MAC) pricing,
- Maintenance Medication Program (MMP),
- Special Authorization (for select drugs),
- Co-pay,
- Plan maximums, and
- Step Therapy.



# Alberta Blue Cross ID cards

A sample of a standard Alberta Blue Cross ID card is shown below.



Alberta Blue Cross issues an ID card to every adult covered by an Alberta Blue Cross plan. Plan members must present this card each time a prescription is dispensed. This card contains important information that is required to submit claims to Alberta Blue Cross.

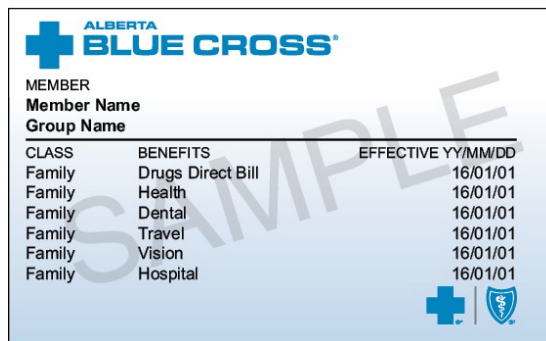
## Standard card layout—front

You will be able to identify an Alberta Blue Cross card by our logo printed in the top left-hand corner.

Under the logo, you will find the member's name for the Alberta Blue Cross plan. The "**MEMBER**" is the cardholder—the individual that holds the Alberta Blue Cross policy on behalf of themselves and their family members. *The cardholder's last name must be indicated when submitting claims to Alberta Blue Cross.*

The benefits for which the plan member has coverage and the date for which each line of benefit is effective are listed on the card. The first line indicates drug coverage and includes

- **Method:** the method of claim submission that must be used by the plan member. You will see either "**DIRECT BILL**" or "**REIMBURSEMENT**". Direct bill plans require claims to be submitted electronically; reimbursement plans require the plan member to pay and submit a paper claim.
- Benefits listed on an ID card will be displayed in the order they were added to a particular plan member's coverage instead of a set order. For example, if an individual had dental coverage effective January 1 with drug coverage added March 1, dental would be listed first on the card, with drugs listed below it.



## Standard card layout—back

Across the top, you will find the **GROUP** and **SECTION of the group** providing coverage for the plan member.

Beside the section, you will see the **CLASS** of coverage, such as “FAMILY”, “COUPLE” or “SINGLE.”

Listed on the back of the card are all of the family members covered by the plan. Beside each family member's name you will see their **ID NUMBER**. The cardholder is always listed first followed by any dependants.

GROUP 00000	SECTION 000
ID NUMBER	NAME
0000000-00	Member Name
0000000-00	Dependant Name
0000000-00	Dependant Name
0000000-00	Dependant Name
0000000-00	Dependant Name
0000000-00	Dependant Name

## Tips for successful online claim entry

Through Alberta Blue Cross's real-time claim adjudication network, you will immediately know of any portion your Alberta Blue Cross customer is required to pay or any prescription that may be ineligible under their drug benefit plan. Their card contains coverage and eligibility information required to submit pay-direct prescription claims.

- **GROUP:** enter as a seven digit number (fill with leading zeros if necessary) followed by **section** (up to three digits, no zero filling). If your software does not use a separate field for the section, the group and section are to be entered as one string.
- **ID NUMBER:** because of the different types of software programs, you may be required to enter your patient's ID number in different formats. Alberta Blue Cross ID numbers are typically seven digits with a two digit patient code or tag. Alberta Blue Cross requires 10 characters in the patient ID field. If your patient's Alberta Blue Cross ID number is 1234567-45, you would enter 0001234657 in the ID field (the first seven digits with leading zeros) and then you would enter 45 in the patient code or tag field. If your software does not have a patient code or tag field, you would enter the first seven digits of the ID number followed by a backslash (/) or a hyphen (-) and the last two digits of the ID number (1234567-45 or 1234567/45).
- **CARDHOLDER (member or subscriber) LAST NAME:** must be indicated on all claims.

You must indicate one of the following carrier codes for each claim

- **CARRIER CODE 12** is to be used for all Government of Alberta Human Services claims.
- **CARRIER CODE 16** is to be used for Compensation Plan for Pharmacy Services and Alberta Public Health Activities Programs claims.
- **CARRIER CODE 11** is to be used when submitting for all other claims.

In addition, you must submit


- The correct **BIRTH DATE** of the member submitting the claim, and
- The **RELATIONSHIP CODE** for the members submitting the claim. For example, the cardholder, spouse or dependant.

## Card variations

Some plans administered by Alberta Blue Cross have a unique card design. These cards may look different but they still contain all the elements you require to submit claims.

### Alberta Blue Cross groups

GROUP	123	SECTION	CLASS	Family
ID NUMBER	NAME			
123456-78	John Doe			
123456-79	Jane Doe			




MEMBER (SUBSCRIBER)  
**John Doe**  
**Non-Group Coverage**

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BENEFITS

Drugs Direct Bill	EFFECTIVE YY/ MM/ DD
Health	08/06/01
	08/06/01



### Alberta Blue Cross groups

GROUP	123	SECTION	123	CLASS	Family
ID NUMBER	NAME				
123456-78	John Doe				
123456-79	Jane Doe				



MEMBER  
**John Doe**  
**Company XYZ**

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BENEFITS

Drugs Direct Bill	EFFECTIVE YY/ MM/ DD
Health	16/06/01
Hospital	16/06/01
Travel 670	16/06/01
Vision	16/06/01
Dental	16/06/01



By presenting this card or Alberta Blue Cross identification number, I acknowledge that I consent to the use of my personal information for the administration of my benefit plan as described in the Alberta Blue Cross Privacy Policy posted at [www.ab.bluecross.ca](http://www.ab.bluecross.ca) or call 1-800-661-6995.

### National Blue Cross groups

**BLUE ADVANTAGE** [www.blueadvantage.ca](http://www.blueadvantage.ca)

**Identification Number**

12345678901 John Smith  
12345678902 Lisa Smith  
12345678903 Monica Smith  
12345678904 Mark Smith  
12345678905 Simon Smith  
12345678906 Nicole Smith  
12345678907 Jack Smith

Claiming benefits implies consent to Blue Cross Privacy Protection Practices.

**Customer Service**  
**1-888-873-9200**

**Worldwide Travel Assistance**  
Canada and U.S.A.  
**1-888-772-2583**

Elsewhere in the world  
**1-403-225-4289**  
(Call collect)

**[www.bluecross.ca/MemberWeb](http://www.bluecross.ca/MemberWeb)**



**Serving Canadians coast to coast**

**Identification Number**  
12345678900  
**Mary Smith**

**Policy Number**  
0012345678

Omit the leading two zeros when submitting electronic dental claims.

# Prescriber ID

To ensure the integrity of claim data, appropriate “Prescriber Reference Codes” and “Prescriber IDs” must be used. The integrity of data submitted by pharmacies not only affects the adjudication of claims but also assists with determining benefit status where restricted benefits are limited by designated prescribers.

For the Alberta prescribers listed below, the actual “Prescriber ID” must be used.

Prescriber Type	Reference Description	Reference Code	Prescriber ID
Physicians	College of Physicians and Surgeons of Alberta	81	Actual ID
Dietitians	College of Dietitians of Alberta	83	Actual ID
Optometrists	Alberta College of Optometrists	87	Actual ID
Pharmacists	Alberta College of Pharmacists (ACP)	86	Actual ID
Registered Nurse Practitioners	College & Association of Registered Nurses of Alberta	82	Actual ID

For the Alberta prescribers listed below, the following “Pseudo IDs” must be used.

Prescriber Type	Reference Description	Reference Code	Pseudo ID*
Dental Hygienists	College of Registered Dental Hygienists of Alberta	84	88112DH
Dentists	Alberta Dental Association & College	85	88111DT
Midwives	Alberta Association of Midwives	88	55111MW
Podiatrists	Alberta Podiatry Association	89	33111PD

\*The “Pseudo ID” must include the alpha characters AFTER the Prescriber ID # as listed above.

Only in circumstances when the “Prescriber ID” is unknown, the following “Pseudo IDs” may be used in conjunction with the appropriate “Prescriber Reference Code”.

Prescriber Type	Reference Description	Reference Code	Pseudo ID*
Physicians	College of Physicians and Surgeons of Alberta	81	99111PH
Dietitians	College of Dietitians of Alberta	83	77111DI
Optometrists	Alberta College of Optometrists	87	44111OP

\* The “Pseudo ID” must include the alpha characters AFTER the Prescriber ID # as listed above.

For prescribers outside of the province of Alberta, the appropriate “Prescriber ID Reference Code” should be used along with the prescriber’s unique assigned prescriber number. The Prescriber ID is the prescriber’s unique regulatory assigned prescriber number.

## Prescriber ID Reference Code for All Provinces

Prescriber ID Reference Code is the identity of the prescriber of medication, supplies or professional services

<b>Newfoundland</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
11	Newfoundland Medical Board
15	Newfoundland Dental Association
16	Newfoundland and Labrador Pharmacy Board
17	Newfoundland College of Nurses
18	Newfoundland Board of Optometrists
<b>Prince Edward Island</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
21	College of Physicians and Surgeons of Prince Edward Island
25	Dental Association of Prince Edward Island
26	Prince Edward Island Pharmacy Board
27	Prince Edward Island College of Nurses
<b>Nova Scotia</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
31	Provincial Medical Board of Nova Scotia
35	Provincial Dental Board of Nova Scotia
36	Nova Scotia College of Pharmacists
37	College of Registered Nurses of Nova Scotia
38	Nova Scotia Optometrists Association
39	Midwifery Regulatory council of Nova Scotia
<b>New Brunswick</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
41	College of Physicians and Surgeons of New Brunswick
45	New Brunswick Dental Association
46	New Brunswick Pharmaceutical Society
47	New Brunswick Association of Optometrists
48	Nurses Association of New Brunswick
<b>Québec</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
51	College of Physicians and Surgeons of Québec
53	Podiatre du Québec
54	Ordre professionnel des sages-femmes du Québec
55	Ordre des Dentistes du Québec
56	Ordre des pharmaciens du Québec
57	Nurses Association of Québec
58	Optometrists Association of Québec



<b>Ontario</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
01	College of Physicians and Surgeons of Ontario
02	Royal College of Dental Surgeons of Ontario
03	Board of Regents, Chiroprody
04	OHIP billing number
05	carrier designated out of province ID
08	Ontario College of Midwives
09	Ontario College of Pharmacists
43	College of Optometrists of Ontario
44	College of Nurses of Ontario
N0	College of Naturopaths of Ontario
<b>Manitoba</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
06	College of Physicians and Surgeons of Manitoba
07	Manitoba Dental Association
66	Manitoba Pharmaceutical Association
67	Manitoba Nurses Association
68	College of Midwives of Manitoba
<b>Saskatchewan</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
71	College of Physicians and Surgeons of Saskatchewan
75	College of Dental Surgeons of Saskatchewan
76	Saskatchewan College of Pharmacists
77	Saskatchewan Registered Nurses Association
<b>Alberta</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
81	College of Physicians and Surgeons of Alberta
82	College & Association of Registered Nurses of Alberta
83	College of Dietitians of Alberta
84	College of Registered Dental Hygienists of Alberta
85	Alberta Dental Association
86	Alberta College of Pharmacists
87	Alberta College of Optometrists
88	Alberta Association of Midwives
89	Alberta Podiatry Association

<b>British Columbia</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
P1	College of Pharmacists of British Columbia
91	College of Physicians and Surgeons of British Columbia
93	British Columbia Association of Podiatrists
94	College of Optometrists of British Columbia
95	College of Dental Surgeons of British Columbia
96	The College of Registered Nurses of British Columbia (CRNBC)
98	College of Midwives of British Columbia
99	Other
<b>Northwest Territories</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
A1	Northwest Territories Medical Association
A2	Northwest Territories Nurses Association
<b>Yukon</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
B1	Yukon Medical Council
B5	Yukon Registered Nurses Association
B6	Yukon Consumer Services - Pharmacists
B7	Yukon Consumer Services - Optometrists
B8	Yukon Consumer Services – Dentists
<b>Nunavut</b>	
<i>Prescriber Reference ID Code</i>	<i>Prescriber Affiliation</i>
C1	Nunavut medical practitioner
C2	Nunavut Nurses Association

# Product Identification Numbers (PINs)

Using the proper PIN is important when submitting a claim. Some products may not be eligible for coverage for all benefit plans. For your reference, an up-to-date list of pseudo Product Identification Numbers (PINs) can be found using the information below.

Please contact the Alberta Blue Cross Provider Relations Contact Centre if you are uncertain whether a customer is eligible for coverage of such products

## Aerosol Holding Chamber / Mask Device PIN Codes:

1. Go to

<https://idbl.ab.bluecross.ca/idbl/lookupPTCDetail.do?ptclD=940000>

## Nutritional Product PIN Codes:

1. Go to:

<https://idbl.ab.bluecross.ca/idbl/lookupPTCDetail.do?ptclD=402000>

## Parenteral Solution PIN Codes:

PARENTERAL SOLUTIONS			
PRODUCT DESCRIPTION	PIN	PRODUCT DESCRIPTION	PIN
0.9% SODIUM CHLORIDE INJECTION	00990040	5% DEXTROSE (D5W) INJECTION	00990033
3.3% DEXT/ 0.3% NAACL (2/3-1/3) INJECTION	00990034	5% DEXTROSE/ 0.15% KCL 20 MEQ INJECTION	00990035
3.3% DEXT/ 0.3% NAACL/ 20 MEQ KCL INJECTION	00990037	5% DEXTROSE/ 0.3% KCL 40 MEQ INJECTION	00990036
3.3% DEXT/ 0.3% NAACL/ 40 MEQ KCL INJECTION	00990038	LACTATED RINGER'S INJECTION	00990039

## Diabetic Supply PIN Codes:

DIABETES SUPPLIES			
PRODUCT DESCRIPTION	PIN	PRODUCT DESCRIPTION	PIN
ALCOHOL SWABS-DIABETES	00999984	INSULIN INJECTORS	00990030
BLOOD GLUCOSE METER	00990024	INSULIN PEN NEEDLES	00999985
BLOOD GLUCOSE TEST STRIPS	00999955	INSULIN PUMPS	00999988
BLOOD KETONE TEST METER	00999601	INSULIN SYRINGES	00999952
BLOOD KETONE TEST STRIPS	00990072	LANCING DEVICE	00999942
BLOOD LETTING LANCET	00999941	NEEDLELESS SYRINGE FOR INSULIN INJECTOR	00999017
COTTON SWABS-DIABETES	00990064	RUBBING ALCOHOL-DIABETES	00990065
GLUCOSE CALIBRATION SOLUTION	00990058	SERTER	00999603
GLUCOSE MONITORING TRANSMITTER	00999471	SKIN PREPARATION	00999602
GLUCOSE MONITORING SYSTEM RECEIVER	00999461	SYRINGE/VIAL ADAPTER KIT FOR INSULIN INJECTOR	00999018



<b>DIABETES SUPPLIES</b>			
<b>PRODUCT DESCRIPTION</b>	<b>PIN</b>	<b>PRODUCT DESCRIPTION</b>	<b>PIN</b>
GLUCOSE MONITORING TRANSMITTER SENSORS	00999472	URINE TEST STRIPS	00999957
INFUSION SETS (TUBING & NEEDLE)	00990045	VIAL ADAPTER/ADAPTER CAP FOR INSULIN INJECTOR	00999016
INSULIN CARTRIDGES / RESERVOIRS	00990057		

Please refer to the **Diabetic Supplies** section for more details.

### IV Supply PIN Codes:

<b>IV SUPPLIES</b>			
<b>PRODUCT DESCRIPTION</b>	<b>PIN</b>	<b>PRODUCT DESCRIPTION</b>	<b>PIN</b>
ALCOHOL SWABS	00990025	0.9% SODIUM CHLORIDE INJECTION	00990040
CARTRIDGES	00990026	3.3% DEXT/ 0.3% NAACL (2/3-1/3) INJECTION	00990034
HEP-LOCKS	00990023	3.3% DEXT/ 0.3% NAACL/ 20 MEQ KCL INJECTION	00990037
IV SOLUTIONS	00990022	3.3% DEXT/ 0.3% NAACL/ 40 MEQ KCL INJECTION	00990038
IV TUBING	00990021	5% DEXTROSE (D5W) INJECTION	00990033
LACTATED RINGER'S INJECTION	00990039	5% DEXTROSE/ 0.15% KCL 20 MEQ INJECTION	00990035
NEEDLES	00990019	5% DEXTROSE/ 0.3% KCL 40 MEQ INJECTION	00990036
SYRINGES	00990020		

### Allergy Serum PIN Codes:

<b>MISCELLANEOUS</b>			
<b>PRODUCT DESCRIPTION</b>	<b>PIN</b>	<b>PRODUCT DESCRIPTION</b>	<b>PIN</b>
ALLERGY SERUM INJECTION	00999981		

# Units of issue for pricing

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Products should be billed with the correct unit of issue when submitting a claim to Alberta Blue Cross. The following units of issue are applicable to private/employer-sponsored plans as well as government-sponsored plans maintained by Alberta Blue Cross.

Nutritional supplements, birth control products and inhalation products are subject to a minimum unit of issue. The minimum quantity required at the time of claim is based on the unit of issue defined for these products in the list below.

Examples of some of the minimum quantity limits applied are:

Product	Unit of Issue	Minimum Quantity	Incorrect Quantity
Ensure/Boost	ml	235 ml	1 can
Advair 100 Diskus Powder for Inhalation	Dose	60 doses	1 diskus
Alesse (21 Day) Tablet	Tablet	21 tablets	1 packet

The quantity field allows for a maximum of four characters to be entered, resulting in a direct bill claim quantity maximum of 9999 units when entering product quantity for claim submission. Providers are required to submit any claims with a quantity in excess of 9999 units through the use of a manual claim form to be processed at Alberta Blue Cross. The most updated lists can be found at:

[https://www.ab.bluecross.ca/dbl/pdfs/dbl\\_units\\_of\\_issue\\_for\\_pricing.pdf](https://www.ab.bluecross.ca/dbl/pdfs/dbl_units_of_issue_for_pricing.pdf)

# Diabetic Supplies

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Although diabetic supplies do not require a prescription to be claimed to Alberta Blue Cross, the pharmacy must have documentation to support the claim. This documentation must include the following elements:

- The patient name and address
- A description of the service including the name of the diabetic supply
- The service date
- The quantity dispensed
- The directions for use
- The name and/or initials of the dispensing pharmacist
- An original prescription number and transaction number

Please refer to the ***Diabetic Supply PIN Code*** section for more details.

# Quantitative limits

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Quantitative limits are applicable to all coverage for all Alberta Blue Cross Plans.

When submitting a claim for a pharmacy service, it is imperative that an accurate days supply be entered as part of the claims submission. Should it be determined through Claims Verification processes that the days supply was entered incorrectly, then the claim will be subject to reversal.

## A. Dispensing of 90 – 100 Days Supply

It is expected that a supply of 90 – 100 days will be dispensed for drugs that are used on a chronic or long term basis for a Plan Member.

Drugs that fall into the chronic or long-term use category will only be paid for one dispensing fee every 90 – 100 day supply once the Plan Member is stabilized on the therapy. In certain circumstances, these drugs may be dispensed in lesser quantities.

## B. Dispensing of 28 – 89 Days Supply

If the Plan Member requires dispensing of chronic or long term therapy with a quantity of 28 - 89 days supply, there must be documentation (electronic or written) to support the more frequent dispensing.

- More than one dispensing fee for the same drug will be paid in any 28 – 89 day period only when:
  - There is a request from the Plan Member that the drug be dispensed for a 28 – 89 day period, or
  - The healthcare provider determines the drug should be dispensed for a 28 – 89 day period for the following reasons:
    - Increased compliance,
    - Abuse control,
    - Determination of therapeutic effectiveness, and/or
    - Potential drug sensitivities
- The rationale to support dispensing for a 28-89 day period must also be documented (electronic or written).

## C. Dispensing of 1 – 27 Days Supply

The Frequent Dispensing Policy (FDP), as detailed in Appendix C of the Alberta Blue Cross Pharmaceutical Services Provider Agreement, applies to drug benefits that are being dispensed with a days' supply of less than 28 days.

The FDP is applied to all Alberta Blue Cross Plans, including public and private plans, when a prescriber or patient requests dispensing of a 1 – 27 days supply.

- For each drug being dispensed for chronic or long-term use on a continuous basis, Special Service codes must be included with each claim. The FDP covers a maximum number of dispensing fees for prescriptions filled daily or for a 2 – 27 day supply. The policy is effective May 17, 2018.

The policies for daily dispensing and 2 – 27 day dispensing are mutually exclusive.

- For daily dispensing – the maximum number of dispensing fees per Plan Member that are eligible is 3 per day regardless of the provider that is dispensing.
- For 2 – 27 day supply – the maximum number of dispensing fees per Plan Member that are eligible is 2 per drug grouping in a 28 day period.

A Drug Grouping is based on the Drug Product Database (DPD) Active Ingredient Group (AIG). An

AIG is a product that has the same active ingredient(s) and ingredient strength(s). Therefore, two different strengths of the same drug are considered as two separate drug groupings. However, two different brands of the same drug at the same strength are considered the same drug grouping.

Claims beyond the set limit, submitted with a fee greater than \$0 will be rejected with the following response codes:

- **RA (exceeds max # of Rx per day)** for daily dispensing or
- **87 (exceeds max # of prof fees for this drug)** for 2 – 27 days dispensing

A \$0.00 dispensing fee must be submitted for the claim to be accepted. The drug cost and the Allowable Upcharge #1 and Allowable Upcharge #2 will adjudicate in the usual manner and pharmacies will be reimbursed to the eligible drug cost and allowable upcharges. **The Pharmacy is not permitted to charge a dispensing fee to the Plan Member for FDP claims that are submitted with a \$0.00 dispensing fee.**

Eligibility Criteria:

1. Physical or Sensory Impairment: a medical condition that limits a person’s physical or sensory function to an extent where the patient requires frequent dispensing of medications;
2. Mental or Cognitive Impairment: a medical condition that may impair the mental or cognitive functioning of a patient, necessitating more frequent dispensing of medications;
3. Medication Safety: a broad category that includes complex medication regimens that require more frequent dispensing but also includes safety issues such as a patient history or risk of abuse, poor compliance, dependence, misuse or loss of belongings;
4. Facility Living: Patients who reside in a continuing care facility.

<b>Eligibility</b>	<b>Special Service Code</b>
Physical Impairment/Sensory Impairment	<b>W</b> – EC consultation level 1
Mental/Cognitive Impairment	<b>X</b> – EC consultation level 2
Medication Safety	<b>Y</b> – EC consultation level 3
Facility Living	<b>5</b> – Approved for home care service

- For daily dispensing claims use special service code **8**
- For 2 – 27 day claims use special service code of letter **O**

The pharmacist is required to enter two special services codes; one to discern between daily or 2 – 27 day dispense for the Plan Member (8 or O); and one to indicate which Eligibility Criteria qualifies the Plan Member (W, X, Y or 5) for the determined frequency of dispense. These are not considered override codes, and are not required to be submitted in any specific order. Alberta Blue Cross will rely on the pharmacist to ensure the appropriate codes are submitted to support the claim.

Exemptions under the FDP include only three categories:

1. Opioid dependence treatment drugs such as Methadone and Suboxone
2. Acute / Short Term Dispensing
3. Drugs covered under the all Albertans programs, including Mifegymiso under the Women’s Choice Program, Take-Home Naloxone Kits under the Naloxone program and oseltamivir for influenza outbreak prophylaxis under the Alberta Public Health Activities Program.

### **Acute / Short Term Dispensing**

Acute/Short Term dispensing is not based on the type of drug, but rather the need for dispensing a drug or drug product within a 28 day period that would not be considered chronic or long-term therapy. If the claim rejects because the dispensing fee limits have been reached for that period the pharmacist may enter the intervention code **UT (treatment of acute condition)**. This code is required **only if the claim rejects**. This code may only be used 4 times per drug grouping per Plan

Member per floating year, and all other claims submitted with this code thereafter will be rejected. The claim will need to be resubmitted with a dispensing fee of \$0.

## Other Exemptions

There are no exemptions for any other groups of Plan Members, drugs or activities. This includes but is not limited to blister or compliance packaging, liquid preparations, and physician or other prescriber requests.

## Documentation

The pharmacy must retain supplementary prescription documentation to support the dispensing frequency where Chronic or Long-Term medications are dispensed for less than a 90 – 100 day supply. The documentation (electronic or paper) must contain the following information:

- the patient and/or healthcare provider request for the drug to be dispensed for less than 28 days or other documentation reduced to writing
- the patient identification information including name, PHN, date of birth,
- the date of request for frequent dispensing,
- the name of each drug being frequently dispensed as written on the prescription or added to the patient documentation,
- the duration expected for frequent dispensing and the required frequency (i.e. weekly dispensing for six months), and
- the rationale for why less frequent dispensing is not appropriate. For example, daily dispensing rationale must indicate why weekly dispensing is not appropriate.

All documentation must be retained at the pharmacy and provided upon request to Alberta Blue Cross for the purposes of compliance verification and/or audit purposes.

In the event that documentation does not meet the requirements of a compliance verification review, claims will be subject to reversal.

More information on the FDP can be found at the Alberta Blue Cross pharmacy provider web site at [www.ab.bluecross.ca/providers/pharmacy-resources.php](http://www.ab.bluecross.ca/providers/pharmacy-resources.php).

## D. Dispensing for the Medication Maintenance Program

Some Alberta Blue Cross Plan Sponsors require their Members to abide by the Maintenance Medication Program (MMP). MMP applies to select employer-sponsored group and individual plans. For more information, you can find a list of maintenance categories and active ingredients available on the Alberta Blue Cross pharmacy provider web site at [www.ab.bluecross.ca/providers/pharmacy-resources.php](http://www.ab.bluecross.ca/providers/pharmacy-resources.php).

On Plans where the MMP exists, response code **KX (patient eligible for maintenance supply)** will be received as part of the claim response. In these cases, the Maintenance Medication Program takes precedence over the FDP.

Please note: the response code **87 (exceeds max # of prof fees for this drug)** is used for both the FDP and the MMP. When this code is received:

- Under the **Frequent Dispensing Policy**, the claim will reject. The pharmacy cannot charge the dispensing fee to the Plan Member for these claims.
- Under the **Maintenance Medication Program**, the claim will be accepted but will reduce the dispensing fee to \$0.00. In this case, the pharmacy must charge the dispensing fee to the Plan Member for these claims.

# Maintenance drug products

For Alberta Blue Cross employer-sponsored and individual product plans

Maintenance drug products are those drugs that are prescribed to patients with chronic conditions that, once stabilized, can be managed on an ongoing basis. These drugs have a low probability for dosage change and are usually administered continuously over the course of treatment. Alberta Blue Cross understands it may take time before patients are stabilized on their medication and acknowledges there may be clinical reasons where providing less than a 90-100 days' supply may be required as part of ongoing therapy.

Promoting dispensing of a longer days' supply of maintenance drug products is cost effective and promotes plan viability.

Drug products within the following drug classes may be considered maintenance drugs:

Alzheimer disease agents	Antidepressants	Chronic Obstructive Pulmonary Disease agents
Antiarthritics - DMARDs	Antiglaucoma agents	Contraceptives
Antiasthmatics	Antigout agents	Cardiotonic agents
Anticoagulants	Antihypertensive agents	Hormone replacement therapy
Anticonvulsants	Antiparkinsonian agents	Osteoporosis agents
Antidiabetic agents	Benign Prostatic Hypertrophy agents	Overactive bladder agents
	Cardiac drugs <ul style="list-style-type: none"> <li>• Antiangina agents</li> <li>• Antilipemic agents</li> </ul>	Thyroid agent drugs Vitamins/prescription vitamins

Some drug products may not be included – for example tricyclic antidepressants, salbutamol inhalers and emergency contraceptives. For maintenance and long-term therapy drugs, the quantity of drug dispensed must be the amount sufficient for a 90-100 day period.

Coverage for these drugs has not changed; therefore, more than one prescription charge in any 100 day period for the same maintenance or long-term therapy drug will be paid only in those cases where the prescriber orders a drug for less than a 90-100 day period for a specific reason including, but not limited to, increased compliance, abuse control, determination of therapeutic effectiveness, potential drug sensitivities or at the written request of the plan member.

Prior approval has to be received from Alberta Blue Cross to provide a quantity greater than the amount sufficient for a 100 day period. Please refer to the next section for details about how to obtain a prior approval.

# Maintenance Medication Program (MMP)

The Maintenance Medication Program (MMP) is an automated process that promotes the dispensing of a maintenance supply of 90 to 100 days for maintenance medications. MMP applies to select employer-sponsored group and individual plans. The MMP does not apply to government-sponsored programs. The MMP features are unique to the group plan as noted in the summary below.

## Summary of Maintenance Medication Programs for Alberta Blue Cross employer-sponsored group and individual plans and ASEBP

Maintenance Medication Program	Maximum # of claims where dispensing fee component will be paid by the plan*	Intervention codes to be used in specific scenarios	References available on the Alberta Blue Cross website**
<b>Alberta Blue Cross employer-sponsored group and individual plans</b>	<p>A maximum of three claims for the same drug product with a days' supply of less than 90 to 100 days.</p> <p>The dispensing fee is paid on subsequent claims when submitted with a days' supply of 90 to 100 days.</p>	<ul style="list-style-type: none"> <li>• NI = dosage change</li> <li>• NF = override quantity appropriate</li> <li>• CO = potential overuse/abuse</li> </ul>	<p>Benefact number 585 February 2016</p> <p>Benefact number 633 August 2016</p> <p>Maintenance Medication Program drug listing</p>
<b>ASEBP ARTA Group 19930</b>	<p>A maximum of five claims for the same drug product in a calendar year.</p>	<ul style="list-style-type: none"> <li>• NF = override quantity appropriate</li> <li>• MY = long term care Rx split for compliance</li> </ul>	<p>Benefact number 630 August 2016</p> <p>Benefact number 651 December 2016</p>

\*Claims will not be rejected; however, the dispensing fee component may or may not be paid by the plan

\*\*Alberta Blue Cross web site at [www.ab.bluecross.ca/providers/pharmacy-resources](http://www.ab.bluecross.ca/providers/pharmacy-resources)



# Compound claim submission tips

Alberta Blue Cross uses two sets of compound pseudo Product Identification Numbers (PIN) that accommodate the following at the time of direct bill claim submission

- categorization of compound products based on therapeutic drug classification,
- identification of compound products prepared and dispensed by a community pharmacy in accordance with the *Alberta Blue Cross Pharmaceutical Services Provider Agreement Section 2.4*, and
- identification of compound products procured from a compounding and repackaging pharmacy and dispensed by a community pharmacy.

Note: these compounds may not be eligible for coverage through all of your customers' benefit plans. Please contact the Alberta Blue Cross Provider Relations contact centre if you are uncertain whether a customer is eligible for coverage of such products.

Compound claims for Government of Northwest Territories (GNWT) members should be submitted using the PINs on the GNWT formulary. The GNWT follows the list of pseudo PINs used by the Non-Insured Health Benefits (NIHB) program and can be found on their web site:

[www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/provide-fournir/pharma-prod/med-list/index-eng.php](http://www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/provide-fournir/pharma-prod/med-list/index-eng.php)

## Compound PINs to be used when submitting claims for compounds prepared and dispensed by a licensed pharmacy

Pseudo PIN	Compound description	Compound example
00999102	Compound - Diclofenac (topical)	Diclofenac in PLO Gel
00999103	Compound - Anti-infective (topical)	Fusidic Acid and Terbinafine cream - equal parts
00999104	Compound- Salicylic Acid (topical)	Salicylic acid in petroleum jelly
00999105	Compound - Non-steroidal anti-inflammatories, and/or analgesics, and/or muscle relaxants (other than Diclofenac-Topical)	Ketoprofen in PLO Gel
00999107	Compound - Corticosteroids (topical)	Fluocinonide topical ointment in coal tar
00999108	Compound Narcotic mixtures (oral and injection)	Meperidine oral solution
00999109	Compound - Chlorhexidine mouth rinse (in any concentration other than 0.12%) (oral)	Chlorhexidene in glycerin and distilled water
00999110	Combination anti-infective/ corticosteroid (topical)	Hydrocortisone cream and Mupirocin cream - equal parts
00999111	Compound - Hormones (i.e. estrogen, progesterone, testosterone) (all routes)	Progesterone in Vanpen cream
00999112	Compound - Miscellaneous <b>topical</b>	Diltiazem in petroleum jelly
00999113	Compound - Miscellaneous <b>oral</b>	Propranolol HCL oral suspension
00999114	Compound - Miscellaneous <b>injectable</b>	Ergocalciferol injection
00999119	Compound - Retinoic Acid (tretinoin topical)	Retinoic Acid Hydrocortisone in Glaxal Base
00999999	Miscellaneous compound	Dimenhydrinate, Metoclopramide, Prochlorperizine suppositories

## Compound PINs to be used when submitting claims for compounds procured from a licensed compounding and repackaging pharmacy and dispensed by a community pharmacy

Pseudo PIN	Compound description	Compound example
00999202	Compound - Diclofenac (topical)	Diclofenac in PLO Gel
00999203	Compound - Anti-infective (topical)	Fusidic Acid and Terbinafine cream - equal parts
00999204	Compound - Salicylic Acid (topical)	Salicylic acid in petroleum jelly
00999205	Compound - Non-steroidal anti-inflammatories, and/or analgesics, and/or muscle relaxants (other than Diclofenac-Topical)	Ketoprofen in PLO Gel
00999207	Compound - Corticosteroids (topical)	Fluocinonide topical ointment in coal tar
00999208	Compound Narcotic mixtures (oral and injection)	Meperidine oral solution
00999209	Compound - Chlorhexidine mouth rinse (in any concentration other than 0.12%) (oral)	Chlorhexidene in glycerin and distilled water
00999211	Combination anti-infective / corticosteroid (topical)	Hydrocortisone cream and Mupirocin cream - equal parts
00999212	Compound - Hormones (i.e. estrogen, progesterone, testosterone) (all routes)	Progesterone in Vanpen cream
00999213	Compound - Miscellaneous <b>topical</b>	Diltiazem in petroleum jelly
00999214	Compound - Miscellaneous <b>oral</b>	Propranolol HCL oral suspension
00999215	Compound - Miscellaneous <b>injectable</b>	Ergocalciferol Injection
00999219	Compound - Retinoic Acid (tretinoin topical)	Retinoic Acid Hydrocortisone in Glaxal Base
00999216	Miscellaneous compound	Dimenhydrinate, Metoclopramide, Prochlorperizine suppositories

## Compound eligibility assessment

Alberta Blue Cross offers pharmacy providers direct-bill plan pre-adjudication compound eligibility assessment through our Provider Relations Contact Centre. In order to facilitate your call, have the following information ready:

- Member's name
- Coverage number
- Member's date of birth
- Final quantity and/or strength of the compound
- Final form (for example, cream, lotion, capsule, etc.)
- Name, strength and quantity of each ingredient
- DIN for ingredient(s) where applicable
- Prescription directions for use

## Eligibility guidelines for topical diclofenac compounds

Pharmacy providers do not need to contact Alberta Blue Cross prior to claims submission to verify the eligibility of a topical compound when the main active ingredient is diclofenac powder mixed either on its own or with another eligible active ingredient in an eligible base as listed below. These topical diclofenac compounds are deemed eligible benefits on all Alberta Blue Cross group, individual and government plans unless the following circumstances occur:

1. A client has exclusions for anti-inflammatory, analgesic or pain management medications. When members have these exclusions, claims submitted for diclofenac compounds will reject at time of adjudication (CD – Drug not a benefit) when billed with the correct pseudo PIN.
2. The compound duplicates a commercially available product.
3. A base or ingredient is used that is not an eligible benefit for the client.

**Please note:** If a base or ingredient is not listed below, please contact Alberta Blue Cross to determine whether the base or ingredient is eligible for coverage prior to claim submission.

Eligible bases for topical diclofenac compounds listed but not limited to	* Eligible active ingredients for topical diclofenac compounds listed but not limited to (*When added to compounds with diclofenac powder as the main active ingredient)
PLO GEL/CREAM	CAMPHOR CRYSTALS
TRANSDERMAL PAIN BASE / TRANSDERMAL CREAM	CAPSAICIN POWDER
MEDIFLO	MENTHOL CRYSTALS
DIFFUSIMAX	PHENOL
ULTRAMAX	PIROXICAM POWDER
VERSAPRO	IBUPROFEN POWDER
GLAXAL BASE	CYCLOBENZAPRINE POWDER
LIPODERM	Eligible compound example: diclofenac powder 5%, menthol 3% in PLO gel
VANPEN BASE	

## How to bill compounds

	Compound (Purchased)	Compound (Made in store)
<b>What do I use for the drug cost?</b>	Purchased compound price (invoice price)	Manufacturer List Price (MLP) or Base Price
<b>Allowable Up-charge #1</b>	NA	7.5% of MLP & or Base Price
<b>Calculated drug cost* (Aggregate of the drug cost and the Allowable Up-charge #1)</b>	Purchased compound price (invoice price)	Manufacturer List Price (MLP) or Base Price + 7.5% of MLP & or Base Price
<b>Software field</b>	Drug Cost field	
<b>Allowable Up-charge #2</b>	Year 3 = 6.5% of Drug Cost* (April 1, 2016) Year 4 = 7.0% of Drug Cost* (April 1, 2017) All to a maximum of \$100	
<b>Software field</b>	Up-charge field (previously the Additional Inventory Allowance Field)	
<b>Dispensing Fee</b>	\$12.30	\$18.45
<b>Software field</b>	Dispensing Fee field	
<b>Total Price</b>	Calculated Drug Cost* + Allowable Up-charge #2 + Dispensing Fee	

# Step Therapy

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The Step Therapy program encourages the safe and cost-effective use of medication. Under this program, a step approach is required to receive coverage for certain second-line or step 2 higher cost medications. In order to receive coverage, the member may first need to try a proven, cost-effective medication (first-line or step 1 drug) included in their plan benefits before the member “steps up” to a more costly product.

## Step therapy refresher

A claim for a Step Therapy drug will be approved if

1. The member has used the step therapy drug in the last 12 months, or
2. The member has used the first-line drug(s) in the last 12 month

If neither of the above applies, you will receive the following rejection codes: **QO**-*preference or step drug available* and **CP**-*eligible for special authorization*. There are two options:

1. If there is documented prescription history of the member receiving the first-line drug, up to two of the applicable intervention codes may be used:

Step Therapy intervention codes	Explanation
<b>UP</b> - First line therapy ineffective	The first-line therapy drug did not produce the desired therapeutic effect.
<b>UQ</b> - First line therapy not tolerated by patient	The first-line therapy drug caused an adverse reaction (for example, lactic acidosis with metformin).
<b>CA</b> - (gov't program only) – Prior adverse reaction	Insulin product(s) caused an adverse reaction such as injection site reactions.
<b>CB</b> - (gov't program only) – Previous treatment failure	Insulin product(s) did not produce the desired therapeutic effect.
<b>CJ</b> - (gov't program only) – Product is not effective	Contraindications to use of insulin product(s) or where insulin is not an option (for example, insulin cannot be used because of blindness or cognitive impairment).

The use of intervention codes may be an option if, in your professional opinion, they are appropriate for that member.

2. Advise the member to go back to their prescriber to discuss whether it is appropriate to pursue first-line therapy or Special Authorization for the Step Therapy drug.

Eligible Step Therapy and first-line drugs for select Alberta Blue Cross employer-sponsored group plans and individual health plans include, but are not limited to, the following:

Step Therapy drug(s)	First-line drug(s) required before member is eligible for Step Therapy drug
Pimecrolimus Tacrolimus	Topical corticosteroids
Alogliptin Alogliptin/Metformin Canagliflozin Canagliflozin/Metformin Dapagliflozin Dapagliflozin/Metformin Dulaglutide Empagliflozin Empagliflozin/Metformin Exenatide Linagliptin Linagliptin/Metformin Liraglutide Pioglitazone Rosiglitazone Rosiglitazone/Metformin Saxagliptin Saxagliptin/Metformin Sitagliptin Sitagliptin/Metformin	Metformin, or Meglitinides, or Sulfonylureas, or Insulins
Montelukast	Inhaled corticosteroids, or inhaled beta agonist, or antihistamines, or nasal steroids
Zafirlukast	Inhaled corticosteroids, or inhaled beta agonist
Risedronate Extended Release	Regular release Risedronate
Darifenacin Fesoterodine Mirabegron Oxybutynin Controlled Release Oxybutynin Extended Release Oxybutynin Topical Gel Oxybutynin Transdermal patch Solifenacin Tolterodine Trospium	Immediate release Oxybutynin
Fidaxomicin	Metronidazole, or Vancomycin
Colesevelam	HMG-COA Reductase Inhibitors
Diclofenac oral powder packet	NSAIDS And Ergotamines
Doxycycline modified release	Rosacea topical products
Betamethasone Valerate topical patch	Topical corticosteroids
Stiripentol	Valproic Acid/Divalproex and Clobazam

To verify if a specific drug product is a Government of Alberta Step Therapy drug product, please visit the *iDBL* at <https://idbl.ab.bluecross.ca/idbl/search.do>

# Alberta Blue Cross's zero-tolerance fraud policy

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Alberta Blue Cross actively investigates and pursues all suspected fraudulent activities and has extensive measures in place to detect and combat fraud. These measures include:

- Monitoring claim patterns, and
- Auditing to ensure compliance with plan contracts and agreements, then pursuing civil and criminal prosecution where evidence indicates fraudulent activity has occurred and restitution is warranted.

Alberta Blue Cross recognizes that health providers, including pharmacy staff, play an important role in the detection and prevention of health care fraud and plan abuse. Health care service providers, along with consumers and plan sponsors, are often the first line of defense in battling health care fraud and plan abuse.

## How you can help

If you suspect any suspicious activity from plan members or providers, please report it immediately by calling the Alberta Blue Cross Fraud hotline toll free at 1-866-441-8477 or emailing [fraudtips@ab.bluecross.ca](mailto:fraudtips@ab.bluecross.ca). All information will be kept strictly confidential. Suspicions of fraudulent activity may also be reported anonymously to

Fraud Tips, c/o Provider Audit and Investigative Services  
Alberta Blue Cross  
10009-108 Street  
Edmonton, AB  
T5J 3C5

# Helpful Links

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Topic	Hyperlink
<b>General Information</b>	
Provider Relations Operations Call Centre Hours of Service & Contact	<a href="https://www.ab.bluecross.ca/public_forms/provider-pharmacy-contact.php">https://www.ab.bluecross.ca/public_forms/provider-pharmacy-contact.php</a>
Pharmacy Provider Communications and Benefacts	<a href="https://www.ab.bluecross.ca/providers/pharmacy-home.php">https://www.ab.bluecross.ca/providers/pharmacy-home.php</a>
Pharmacy Reference Guides (by Jurisdiction)	<a href="https://www.ab.bluecross.ca/providers/pharmacy-resources.php">https://www.ab.bluecross.ca/providers/pharmacy-resources.php</a>
<b>Pharmacy Provider Information</b>	
Pharmaceutical Services Provider Agreement	<a href="https://www.ab.bluecross.ca/providers/pharmacy-resources.php">https://www.ab.bluecross.ca/providers/pharmacy-resources.php</a>
Pharmacy Provider Registration / Updates	<a href="https://www.ab.bluecross.ca/providers/pharmacy-registration-update.php">https://www.ab.bluecross.ca/providers/pharmacy-registration-update.php</a>
Alberta Blue Cross Provider Information	<a href="https://www.ab.bluecross.ca/providers/pharmacy-home.html">https://www.ab.bluecross.ca/providers/pharmacy-home.html</a>
Pharmacist Prescriber Special Authorization Registration Form	<a href="https://www.ab.bluecross.ca/providers/pharmacy-resources.php">https://www.ab.bluecross.ca/providers/pharmacy-resources.php</a>
<b>Drug Benefit List</b>	
Alberta Drug Benefit List	<a href="https://www.ab.bluecross.ca/dbl/publications.html">https://www.ab.bluecross.ca/dbl/publications.html</a> .
Interactive Drug Benefit List (iDBL)	<a href="http://www.ab.bluecross.ca/dbl/idbl_main1.html">http://www.ab.bluecross.ca/dbl/idbl_main1.html</a>
<b>Drug Benefit Programs</b>	
Government of Alberta Sponsored Plans	<a href="https://www.ab.bluecross.ca/dbl/publications.html">https://www.ab.bluecross.ca/dbl/publications.html</a>
Maintenance Medication Program (MMP) Drug List	<a href="https://www.ab.bluecross.ca/providers/pharmacy-resources.php">https://www.ab.bluecross.ca/providers/pharmacy-resources.php</a>

<b>Claiming Information</b>	
Access to Pride RT <sup>®</sup> Direct Bill Adjudication System Guidelines	<a href="https://www.ab.bluecross.ca/providers/pharmacy-resources.php">https://www.ab.bluecross.ca/providers/pharmacy-resources.php</a>
Direct Bill Claiming Tips	<a href="https://www.ab.bluecross.ca/providers/pharmacy-claiming-tips.php">https://www.ab.bluecross.ca/providers/pharmacy-claiming-tips.php</a>
<b>Product PIN Code Information</b>	
Aerosol Holding Chamber / Mask Device PIN Codes:	<a href="https://idbl.ab.bluecross.ca/idbl/lookupPTCDetail.do?ptclD=940000">https://idbl.ab.bluecross.ca/idbl/lookupPTCDetail.do?ptclD=940000</a>
Nutritional Product PIN Codes	<a href="https://idbl.ab.bluecross.ca/idbl/lookupPTCDetail.do?ptclD=402000">https://idbl.ab.bluecross.ca/idbl/lookupPTCDetail.do?ptclD=402000</a>
<b>Drug Pricing</b>	
Alberta Blue Cross Drug Price List	<a href="https://www.ab.bluecross.ca/providers/pharmacy-home.html">https://www.ab.bluecross.ca/providers/pharmacy-home.html</a>
ASEBP TARP Drug and Reference Price Listing	<a href="https://www.ab.bluecross.ca/providers/pharmacy-resources.php">https://www.ab.bluecross.ca/providers/pharmacy-resources.php</a>
Unit of Issue for Pricing	<a href="https://www.ab.bluecross.ca/dbl/pdfs/dbl_units_of_issue_for_pricing.pdf">https://www.ab.bluecross.ca/dbl/pdfs/dbl units of issue for pricing.pdf</a>
Price Files	<a href="https://www.ab.bluecross.ca/providers/pharmacy-price-files.php">https://www.ab.bluecross.ca/providers/pharmacy-price-files.php</a>
<b>Fraud Prevention</b>	
Confidence Line	<a href="http://www.albertabluecross.confidenceline.net">http://www.albertabluecross.confidenceline.net</a>
Fraud Tip / Information	<a href="mailto:fraudtips@ab.bluecross.ca">fraudtips@ab.bluecross.ca</a> or <a href="http://www.ab.bluecross.ca/aboutus/fraud-prevention.html">www.ab.bluecross.ca/aboutus/fraud-prevention.html</a>