

Pharmacy Services Compensation Update

Effective April 1, 2013, additional Compensation for Pharmacy Services will now include **refusal to fill a prescription** and **trial prescription** services. All Albertans who are enrolled in the Alberta Health Care Insurance Plan are eligible under Pharmacy Services. Netcare should be accessed to validate the PHN and demographic information, as outlined in Pharmacy Benefact 328 (published January 2012).

Refusal to fill a prescription is when a clinical pharmacist chooses not to dispense a prescription and must be based on either potential overuse/abuse or a falsified or altered prescription. When a forged prescription is presented and you do not have a valid PHN, the pseudo PHN of **RF0000000** has been created for this instance. Along with the pseudo PHN, the name, date of birth, gender and cardholder relationship must be submitted with the claim.

The following demonstrates the information which is required when billing:

PIN(s)	PIN description	Allowable Special Services Code (SSC)	Dollar amount
00000071111	Patient assessment without APA	1 – Refusal to fill a prescription	\$20
00000081111	Patient assessment with APA		\$20

Trial prescriptions

For billing under Pharmacy Services (carrier 16), utilize existing PINs, Intervention Codes and the Special Service Codes as demonstrated below.

The following demonstrates the information which could be transmitted for the pharmacy services assessment portion for trial prescriptions:

PIN(s) (service event)	PIN description	Allowable Special Services Code (SSC)	Existing CPhA Intervention Codes (new to the pharmacy services program) two codes could be transmitted on transaction	Eligible amount
00000071111 00000081111	Patient assessment without APA Patient assessment with APA	H – Adapt Rx to current need or M – Follow-up assessment of patient's needs	MT = Trial Rx Program VN = Trial not tolerated, patient advised MD VQ = Trial ok, no side effects/concerns	\$20 \$20

continued on reverse ...

Trial prescription pharmacy service is when a clinical pharmacist dispenses a reduced quantity of a newly prescribed drug in order to assess the patient's response and tolerance to the drug before providing the balance of the prescription. An assessment fee is payable for an assessment of the patient's response and tolerance to the trial prescription before providing the balance of the prescription. At this time, the trial quantity dispensed and products eligible for the trial prescription pharmacy service remain at the discretion of the clinical pharmacist.

The prescription drug claim submitted to Alberta Blue Cross for group, government and individual products benefit plans (direct bill prescription claims) must also include the intervention code **MT – Trial Rx Program**.

For all Albertans who are eligible under the Pharmacy Services Compensation Plan (carrier 16 transactions), where a pharmacy assessment fee has been claimed, a second dispensing fee must not be submitted.

The following is an example of this process for all Alberta Blue Cross Plans

1. A patient presents a new prescription for a newly prescribed drug.
 - The pharmacist deems that it is appropriate to dispense a smaller quantity, such as a 7 to 10 day supply, to assess the patient's response and tolerance to the prescribed drug.
 - Submit this initial claim to the patient's coverage plan with the intervention code of **MT – Trial Rx Program**.
2. Upon completion of the trial period, complete a patient assessment to determine the patient's response and tolerance to the prescribed drug.
 - Submit an assessment transaction under the Pharmacy Services Framework, with the appropriate PIN, Special Services Code and Intervention Code, as the assessment is eligible for the payment for determination of the patient's response and tolerance to the trial prescription.

Example:

submit PIN 00000071111 **or** 00000081111 with **SSC H or M and Intervention Code VN or VQ**.

3. If the patient was able to tolerate the medication, the balance of the prescription may then be dispensed.

Post claim verification: on behalf of Alberta Health, Alberta Blue Cross may be conducting post claim verifications on a sample of pharmacy claim transactions under the Compensation Plan for Pharmacy Services and the associated direct bill drug claim.



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

780-498-8370 (Edmonton and area)
403-294-4041 (Calgary and area)
1-800-361-9632 (toll free)

FAX 780-498-8406
(Edmonton and area)
FAX 1-877-305-9911 (toll free)