

ASEBP introduces TARP, maintenance medication dispensing fee maximums and changes to Special Authorization renewals

Effective September 1, 2016, Alberta School Employee Benefit Plan (ASEBP) Group 19930 will be implementing the following changes:

- Therapeutic Alternative Reference Pricing (TARP);
- maintenance medications and dispensing fee maximums; and
- enhanced Special Authorization renewals.

Therapeutic Alternative Reference Pricing (TARP)

TARP groups drugs together that treat the same illness or medical condition with equal safety and effectiveness and encourages cost-effective prescribing for common medical conditions. As such, reference drugs or less costly drugs are eligible for full coverage and the non-reference drugs, or the more costly drugs, are eligible for partial coverage up to the maximum drug cost based on the cost of the reference drug within the TARP categories.

TARP will be applied to four therapeutic categories:

Proton pump inhibitors	Anti-hypertensives (single and combinations)
Non-steroidal anti-inflammatories	Triptans

Claims reduced to the referenced drug amount or the eligible amount under the TARP category will receive the response code of **E9 - Reduced to reference-based price.**

Pricing Authorizations may be eligible for patients with exceptional circumstances such as allergy, previously failed treatment/tolerant to referenced products, etc. Plan members may choose to have their prescriber complete a Special Authorization form requesting a pricing authorization to Alberta Blue Cross.

Prescribers may continue to prescribe and/or plan members may continue to choose any brand name or generic variety of the TARP; however, effective September 1, 2016, ASEBP will only pay up to the TARP price and the plan member will be responsible for paying the difference.

To assist with claim submissions, specific details regarding the TARP reference products are located on the Alberta Blue Cross pharmacy provider web site at www.ab.bluecross.ca/providers/pharmacy-resources.php

Maintenance medications and dispensing fee maximums

ASEBP's maintenance medication program will limit the number of dispensing fees eligible for maintenance medications to five dispensing fees per calendar year (January 1 – December 31), per maintenance medication, per plan member. This change is designed to encourage more efficient dispensing for ASEBP plan members receiving medications for chronic health conditions.

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

Anti-hypertensive agents	Anti-diabetic agents	Anti-asthmatics/COPD
Anti-depressants	Contraceptives	Hormone replacement therapy
Anti-lipidemic agents	Thyroid agents	Medications for overactive bladder

When submitting a real-time claim submission for a medication that is part of the maintenance list and is eligible for maintenance, a response code of **KX- "patient eligible for maintenance supply"** will be returned. Once the plan member's claim history identifies the fifth dispensed claim for the maintenance product, you will receive the response code of **87- "exceeds max # of professional fees for this drug."**

After the fifth dispense, the eligible dispensing fee will no longer be covered by the plan and the plan member will be responsible for paying the difference. ASEBP is requesting that pharmacists communicate the dispensing maximums to plan members once the KX response code is received and advise the member of their options to limit confusion.

For the following specific scenarios, use of intervention codes, defined below, are eligible:

Scenario	CPhA Intervention Code Allowed
Temporarily required in select cases where there are less than 90 days remaining on the balance of a prescription and <ul style="list-style-type: none">the prescription was previously filled for 90 to 100 days' supply;a new prescription cannot be obtained; andthe prescription is not appropriate for pharmacist adaptation to a 90-day supply.	NF – Override - quantity appropriate
Long Term Care compliance packaging required	MY – long term care Rx split for compliance

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.

Enhanced Special Authorization renewals

ASEBP will be managing renewals for plan members with Special Authorization for the following health conditions:

- rheumatoid arthritis
- multiple sclerosis
- psoriasis
- Crohn's disease/colitis

For full details on ASEBP's enhanced Special Authorization process, please visit the ASEBP web site and the Rx Benefits page at www.asebp.ab.ca/prescription_benefits/SA_processes.html.

When you have questions:

For assistance with benefit or claim inquiries, please contact an Alberta Blue Cross Pharmacy Services Provider Relations contact centre representative 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)

Alberta Blue Cross offers online access to current Pharmacy Benefits and supplemental claiming information to assist with the submission of your direct bill drug claims. Visit <https://www.ab.bluecross.ca/providers/pharmacy-home.php>



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