

Reminder regarding Delisting of High-Strength Long-Acting Opioids under the Ontario Drug Benefit (ODB) Program

January 27, 2017

This is a reminder that effective with the **January 2017 Ontario Drug Benefit (ODB) Formulary update**, the following products will be delisted from the ODB Formulary:

- Higher strengths of long-acting opioids, including:
 - Morphine SR 200 mg tablets;
 - Hydromorphone CR 24 mg and 30 mg capsules;
 - Fentanyl 75 mcg/hr and 100 mcg/hr patches; and
- Meperidine 50 mg tablets.

The January 2017 ODB Formulary update will take effect Tuesday, January 31, 2017.

Pharmacists are reminded that lower-strength, long-acting opioids will continue to be funded under the ODB program. Therefore, patients who may need higher doses of long-acting opioids for adequate pain management may continue to be prescribed lower-strength formulations. There are no daily dose limits being enforced at this time.

For the list of affected Drug Identification Numbers (DINs) and rationale for these changes, please consult the July 20, 2016 Executive Officer Notice available at: http://www.health.gov.on.ca/en/pro/programs/drugs/opdp_eo/notices/exec_office_20160720.pdf

Palliative Care

Pharmacists are reminded that access to the higher-strength long-acting opioids will be maintained for patients requiring palliative care through the ODB program's:

1. **Palliative Care Facilitated Access (PCFA) mechanism**, for physicians who are registered PCFA prescribers through the Ontario Medical Association; and
2. **Exceptional Access Program (EAP) Telephone Request Service (TRS)** for physicians who are not PCFA prescribers, according to specific criteria.

For the high-strength long-acting opioid medications that are on the Facilitated Access to Palliative Care list, product identification numbers (PINs) have been created. For a claim related to a prescription written by a registered PCFA prescriber, pharmacists must enter the ministry-assigned PIN.

For a claim related to an authorization granted through the EAP TRS, the actual Drug Identification Number (DIN) of the product should be used when submitting the claim, as per current practice.

For more details, including a full list of PCFA considered high-strength long-acting opioids and their associated PINs, please consult the November 30, 2016 Executive Officer Notice available at:

http://www.health.gov.on.ca/en/pro/programs/drugs/opdp_eo/notices/exec_office_20161130.pdf

To facilitate the reimbursement process at the pharmacy for a PCFA request, the prescriber is asked to indicate either "Palliative" or "P.C.F.A." on the prescription. The physician's CPSO registration number must be included on the prescription for purposes of verification. The new ministry-assigned PINs should be submitted for these claims.

To facilitate the reimbursement process at the pharmacy for a request approved through the EAP TRS, the prescriber is asked to indicate "TRS" on the prescription. This should indicate that the prescriber has obtained approval through the TRS. The DIN should continue to be submitted for these claims.

Pharmacists should ensure each prescription is accompanied by the required information for approval and dispensing. Pharmacists are also reminded that supporting documentation must be kept on file at the pharmacy.

Who can I contact with questions?

If you require further clarification or have questions regarding this matter, please send your question(s) to PublicDrugPrgms.moh@ontario.ca or call:

Pharmacists - call the ODB Pharmacy Help Desk at: 1-800-668-6641

Other health care providers - call ServiceOntario, Infoline at 1-866-532-3161 TTY 1-800-387-5559. In Toronto, TTY at 416-327-4282.