

Ontario Drug Benefit Formulary and Limited Use (LU) Process Changes Effective September 27, 2005

Frequently Asked Questions (FAQs)

These FAQs are being released as a follow-up to the questions and answers originally posted in BBS No. 571 on September 9, 2005. Effective September 27, 2005, two new policies were introduced related to Limited Use (LU) prescriptions. For some LU drugs, the usual one-year LU expiry date has been extended to an indefinite authorization period. In addition, the requirement to use the ministry-issued LU form was discontinued.

Information regarding the ministry's LU Modernization Strategy, including all changes made to date, is available from the Ontario Drug Benefit Program's website:
http://www.health.gov.on.ca/english/providers/program/drugs/odbf_mn.html

Since these policy changes were announced, the Drug Programs Branch has received a number of questions from pharmacists and other stakeholders. These FAQs are intended to address some common questions arising from the LU process changes, as well as other ODB Formulary changes which took effect with the publication of Edition 39 of the ODB Formulary/Comparative Drug Index, effective September 27, 2005.

LU Process Changes

Q1: With the elimination of the LU form, are verbal/telephone prescriptions now allowed for LU drugs?

A1: No. Other than the elimination of the requirement to use the ministry-issued LU form, all other LU policies are essentially the same. The Reason for Use (RFU) code (also referred to as the LU code) must be handwritten on the prescription by the physician. In addition, the physician must sign the prescription.

Q2: Are computer generated LU prescriptions allowed?

A2: A computer generated LU prescription can be used but the RFU code and physician signature must be handwritten.

Both of the above policies (Q1 and Q2) will be reviewed as part of the ongoing LU modernization process.

Q3: How long is the Limited Use prescription valid?

A3: The Limited Use prescription is valid for the period specified in the clinical criteria, starting from the date that the LU prescription is used to first fill a prescription. Entry of the 'LU' intervention code starts the LU authorization period.

Q4: How does this relate to drugs where the clinical criteria limit the quantity or duration, but the LU authorization period is one year?

A4: For LU drugs whose supply is restricted, such as Famvir 500mg tablets (7 days and 21 tablet limit), the supply restriction applies to the reimbursement of the product, not the one year validity of the LU authorization.

If the criterion limits therapy (e.g., to 7 days), the authorization is still valid for one year from the effective date. However, a recurrence of a 'time limited' therapy should have some documentation that references the original LU prescription, and indicates that the same RFU code applies.

Please note the new policy is that the LU prescription is valid for one year from the date of first fill with the LU intervention code, regardless of what date is on the prescription. Professional discretion arises if an LU prescription is presented for first fill a year after it was written, but no recovery would be made based on the date written on the prescription.

Q5: The Q&As for the September 27, 2005 changes stated that RFU 279 (the 'grandparenting' code) may be used for claim submission for up to three months after a change in LU criteria. The previous policy allowed RFU 279 to be used for the remaining duration of the LU authorization. Why was this policy changed?

A5: It would not be appropriate to allow LU authorizations to continue indefinitely if the LU criteria changes for drugs with indefinite authorization periods. Therefore, a defined grandparenting period is required. However, please note the following revision to the new policy:

For RFU codes which have been discontinued, RFU 279 may be used for claim submission for the remaining duration of the original LU authorization period, or up to twelve months, whichever comes first.

Please refer to Q12 regarding this policy and the effect on the changes to the LU criteria for the proton-pump inhibitors (PPIs).

Also, the Drug Programs Branch (DPB) has noted that numerous claims are being submitted using RFU 279 for drugs where the LU criteria were revised more than one year ago. Please note that DPB will be removing the ability to use RFU 279 for these drugs. It is expected that this will occur before the end of 2005.

Q6: For drugs with a one-year LU authorization period, what are the audit implications to a pharmacy where a second pharmacy receives a new LU prescription and resets the HNS LU authorization date? Would the first pharmacy be penalized for submitting LU claims beyond the original one-year expiry date, or can they continue to submit claims up to one year beyond the new authorization date?

A6: The first pharmacy should not submit a claim beyond the original one-year expiry date.

The HNS displays the start date of a LU authorization at the system level and not at the pharmacy level. Similar to current practice, it is recommended that pharmacies keep an internal record (e.g. in the computer patient profile) of RFU codes and the LU authorization expiry date to support their claim submissions. It was previously communicated that pharmacies should continue to track the expiry date of the LU authorization manually.

Q7: For LU medications with indefinite authorization periods, what are the audit implications to the first pharmacy when another pharmacy resets the HNS clock? For example, if Pharmacy A initiates an LU authorization in January 2006, and Pharmacy B receives a LU prescription for the same drug and resets the HNS clock in January 2007, what is the responsibility of Pharmacy A?

A7: According to current policy, pharmacies are required to retain LU documentation on file in the pharmacy for 24 months. Therefore, the DPB will only audit pharmacies for LU documentation during the first two years of the LU authorization period. Pharmacy A would be required to retain the LU documentation until January 2008.

Q8: The Q&As for the September 27, 2005 changes stated that for drugs with an indefinite LU authorization period, new LU forms dating back to May 31, 2005 were eligible for the indefinite expiry date, as long as the 'LU' intervention code was entered with the initial claim. What is the expiry date if the 'LU' intervention code was not entered?

A8: If the 'LU' intervention code was not entered, the LU prescription should be given a one-year authorization date. When a new LU prescription is received, the 'LU' intervention code must be submitted with the initial claim to allow for an indefinite authorization period.

Please note that future enhancements to the Health Network System (HNS) are planned, with the intention that the HNS will be able to calculate and display the LU expiry date (if any). The 'LU' intervention code has been created to allow tracking of LU authorizations. Eventually, all LU authorizations in the system should contain the 'LU' intervention code, as it is entered with the initial claim. If it is not present, future LU claims will be rejected. The next phase of the HNS enhancements related to the LU process are not expected to be implemented before September 2006.

Q9: For prescription transfers, what type of LU documentation is required for drugs with an indefinite LU authorization period?

A9: The Q&As for the September 27, 2005 changes stated that for drugs with an indefinite LU authorization period, a copy of the LU prescription/form must be obtained only if the transfer occurs within the first two years of the authorization period. After this period, the receiving pharmacy need only document the RFU code from the original pharmacy, along with the usual prescription transfer requirements.

As a reminder, the receiving pharmacy must not enter the 'LU' intervention code. When the claim is submitted, the network will display the LU authorization effective date based on the original claim made by the originating pharmacy.

Other ODB Formulary changes effective September 27, 2005

Q10: When I process a refill for Losec (omeprazole), the claim is rejected with 'OF-Initial Prescription Days Supply Exceeded' even though the patient has had previous claims for this medication. How do I proceed?

A10: This rejection message occurs because of a change in the generic name that was requested by the manufacturer of Losec (DIN 02190915), from 'omeprazole' to 'omeprazole magnesium'. The HNS interprets this name change as a new therapy for the patient and applies the 30 day trial prescription policy. To process the claim, pharmacists may use the 'NH-Initial Prescription Program Declined' intervention code to override the 'OF' rejection code. Pharmacists are reminded that the appropriate RFU code must be entered and documentation is required to support the use of intervention codes.

Q11: A new note has been added to the LU criteria for the proton pump inhibitors (PPIs), stating 'Note: There is a lack of published evidence to support double-dose PPI therapy in this setting'. Will prescriptions for double-dose therapy still be covered?

A11: Yes. The statement is intended as a prescribing note to practitioners and is not enforced by the HNS.

Q12: When do I use RFU 279 for the PPIs where the LU criteria have changed?

A12: The number of distinct RFU codes for the PPIs has been reduced to 5 from 15. Some of the old RFU codes have been maintained if the new clinical criteria are similar to the original wording. Therefore, existing LU authorizations using RFU codes 293, 295 and 297 may continue to be submitted using the same RFU codes.

For all other RFU codes which have been discontinued, RFU code 279 (the 'grandparenting' code) may be used for claim submission for the remaining duration of the original LU authorization period (maximum of one year). After that time, a new LU prescription must be obtained with a valid RFU code.

Q13: How do I get more information?

A13: Please refer to the ODB website at:
http://www.health.gov.on.ca/english/providers/program/drugs/odbf_mn.html

Contact information:

ODB Help Desk: 1-800-668-6641

Ontario Drug Benefit Program
5700 Yonge Street, 3rd Floor
Toronto, ON M2M 4K5
e-mail: drugprograms@moh.gov.on.ca
Tel: 416-327-8109, or toll-free 1-866-811-9893
Fax: 416-327-8123