

Notice from the Executive Officer: Policy for Methadone Maintenance Treatment Reimbursement under the Ontario Drug Benefit Program

Effective May 1, 2020

The *Methadone Maintenance Treatment Reimbursement Policy, 2020* is an update of the 2014 policy to reflect additional methadone 10mg/mL oral liquid product options that are available and listed on the Ontario Drug Benefit Formulary (Formulary). The *Methadone Maintenance Treatment Reimbursement Policy, 2020* will take effect on May 1, 2020 and replace the 2014 policy as of that date.

Methadone Maintenance Treatment Reimbursement Policy, 2020

As a precondition to obtaining billing privileges under the *Ontario Drug Benefit Act*, all pharmacy operators are required to enter into a Health Network System (HNS) Subscription Agreement with the Executive Officer. Under section 3.2 of this Agreement, pharmacy operators are required to comply with all Applicable Law, Ontario College of Pharmacists Rules, and Ministry Policies.

The Executive Officer of the Ontario Public Drug Programs of the Ministry of Health (the “Ministry”) hereby establishes a policy for the reimbursement of methadone for all pharmacy operators in Ontario that supply methadone to Ontario Drug Benefit (ODB) eligible persons requiring methadone maintenance treatment for opioid use disorder (MMT) (hereinafter, referred to as the “**Policy**”).

Under this Policy the Ministry will reimburse all pharmacy claims for the ODB Formulary listed, methadone 10mg/mL oral liquid products that are dispensed to ODB eligible persons receiving MMT in the manner outlined below.

Dispensing

The Ministry will pay pharmacies one ODB dispensing fee per daily dose (i.e., the pharmacy’s applicable ODB dispensing fee) for dispensing methadone 10mg/mL oral

liquid as listed on the Formulary for an ODB eligible person for MMT. One fee is paid for each daily supply that is provided to an ODB eligible person by the pharmacy via the Health Network System (HNS).

For example, for a prescription written to witness one dose on Monday and dispense 6 carry doses for Tuesday to Sunday, the ministry pays one dispensing fee for one witnessed dose on Monday and one dispensing fee for each daily supply carry dose labelled for Tuesday through Sunday; all 7 prescription claims would be submitted on the Monday, the day of the witnessed dose, and all 7 claims are eligible for a dispensing fee.

Please note:

- persons whose household has not yet reached its quarterly Trillium Drug Program deductible are not eligible for ODB benefits, and as such, their MMT claims do not fall under this Policy.
- the Policy does not apply to the Primary Pharmacy Service Providers (PSP) that dispense MMT to residents of Long-Term Care (LTC) homes as dispensing fees submitted for LTC home residents are included as part of the capitation payment to Primary PSPs effective January 1, 2020. However, the Policy does apply to the dispensing of methadone to a LTC home resident for MMT by a Secondary PSP. Secondary PSPs that dispense to residents of LTC homes on an emergency basis, will follow the protocol outlined under the Policy for Pharmacy Payments under the LTC Home Capitation Funding Model, 2020 that was posted on the ministry's website on December 16, 2019 and can be accessed at this link:
http://www.health.gov.on.ca/en/pro/programs/drugs/opdp_eo/eo_communiq.aspx

Drug costs plus mark-up

The Ministry will reimburse the pharmacy for the Drug Benefit Price as listed on the ODB Formulary in respect of each claim for methadone 10mg/mL oral liquid plus the applicable % mark-up on that amount.

No co-payment

No co-payment may be charged to the ODB eligible person with respect to the supply of methadone for maintenance treatment. However, the amount of the co-payment that would apply to the ODB recipient for other drug claims (i.e. \$0, \$2 or \$6.11 depending

on their class of eligibility) will still be deducted from the dispensing fee paid for the methadone claim.

Amendments and Updates

The Ministry may make changes to this Policy at any time upon giving at least 30 days notice to Ontario pharmacy operators via the One-Mail system.

Ministry requirements for reimbursement of methadone claims under the Policy Requirements for Pharmacy Operators:

- A separate claim must be submitted on-line for each day's supply of methadone for ODB eligible persons receiving MMT (i.e., one claim for each day's supply) using the appropriate Drug Identification Number (DIN) and the quantity of methadone 10mg/mL oral liquid dispensed.
- The quantity must reflect only the amount of methadone 10mg/mL oral liquid dispensed, and must not include any amount of drink mix (e.g. Tang®) also included in the bottle dispensed.
 - one claim is submitted for each witness dose and one claim is submitted for **each** daily supply carry dose that is provided to the ODB recipient.
 - claims for individual carry doses must be submitted on the date the carry doses are dispensed.
 - a maximum of one dispensing fee may be claimed per ODB recipient per daily dose.
- For example, if you have a prescription for one witnessed dose on Monday and 6 carry doses for Tuesday through Sunday, on Monday the claims appear as follows:
 - one claim is submitted for the Monday witnessed dose;
 - one claim is submitted for the Tuesday carry dose;
 - one claim is submitted for the Wednesday carry dose; and so on for Thursday, Friday, Saturday and Sunday
 - each claim for the carry doses is submitted on the day that the carry doses were dispensed (i.e., Monday in this example)

- In other words, on Monday when all of the doses were dispensed, a total of 7 claims with 7 dispensing fees would have been submitted to the Ministry for payment through the HNS.
 - When more than one claim is submitted for the same DIN on the same day for the same patient, the HNS will reject the second (and subsequent) claim(s) with response code “A3” – identical claim processed which can be overridden with an appropriate intervention code. Please refer to the Ontario Drug Programs Reference Manual for intervention codes.
 - If replacement claims are required because of dose changes after carry doses have already been dispensed, the replacement claims are not eligible for additional dispensing fees as this would exceed the maximum number of dispensing fees allowed.
 - All labels must adhere to all Ontario College of Pharmacists policies and guidelines including the dose and date of ingestion on each labelled bottle.
 - No co-payment amount or additional charge may be collected from ODB eligible persons receiving methadone for MMT.
 - No compounding time is permitted for the dispensing of methadone 10mg/mL oral liquid. For example, when methadone 10mg/mL oral liquid is diluted prior to dispensing, this practice is not considered compounding.
 - No other ingredient costs may be added to the amount billed to the ministry (i.e. cost of distilled water or drink mix (e.g. Tang®) may not be billed to the ministry in addition to the cost of methadone amount already being reimbursed)
 - If an ODB recipient's dose is changed by their prescriber after the ODB recipient's carry doses have already been dispensed (i.e., the dispensing fee from that day's dose has already been billed with the original carries), the replacement claim must not include a dispensing fee.
 - The quantity of methadone 10mg/mL oral liquid used in dispensing the final prescribed methadone dose must be entered as milliliters (mLs) of drug dispensed. The milligrams of methadone prescribed must be converted to mLs of methadone 10mg/mL oral liquid dispensed and entered as a single dose for the submission to the Health Network System (HNS) and the Narcotics Monitoring System (NMS). For example, if the physician prescribed methadone 100 mg each day, the claim submission to the HNS and the NMS record must indicate a quantity of 10 mLs of methadone 10mg/mL oral liquid.
 - The pharmacy-generated prescription label must comply with the appropriate Ontario College of Pharmacists policies and guidelines.
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- The drug cost, plus the applicable % mark-up and the applicable dispensing fee are to be submitted on-line via the HNS. The prescription receipt must indicate a zero co-payment amount.
- Methadone used for the treatment of chronic pain is not eligible for reimbursement under this Policy. An application for funding consideration must be submitted by an authorized prescriber to the Exceptional Access Program for any ODB eligible patient who is prescribed methadone for chronic pain.

Use of extemporaneous compounded methadone liquid:

- Effective September 1, 2014, the extemporaneously compounded methadone liquid prepared using methadone powder is no longer funded under the ODB program for MMT.
- However, for certain exceptional circumstances the patient's authorized prescriber may submit a request for consideration of funding on a case-by-case basis for compounded methadone under the Exceptional Access Program; restrictions apply.