

British Columbia edition

NOVEMBER 202I

REMINDER ON PROCESS FOR BC SPECIAL AUTHORITY DRUGS

A streamlined approach

At Green Shield Canada (GSC), we are always looking out for ways to make claims submission simpler for pharmacies. Back in September 2020, you may recall that GSC made changes to our system to accept the transmission of BC Special Authority (BCSA) codes via the adjudication software, reducing the need for pharmacies to input intervention codes or retain additional documentation to support coordination of benefits for these claims.

Since last year, we have seen significant adoption of BCSA code transmission, and we encourage all pharmacies to transmit BCSA codes, as this is the preferred and patient-friendly method to receive SA information.

Remember, GSC requires proof of a patient's PharmaCare Special Authority (SA) coverage, and residents of British Columbia must ensure they are registered with BC PharmaCare.

Pharmacies who cannot submit BCSA codes

The process below should **ONLY** be followed in situations where your pharmacy software system is unable to send the BCSA code electronically to GSC.

Pharmacies unable to transmit the SA status information electronically to GSC may use the intervention codes noted in the table below and, when available, are

required to retain the PharmaCare SA decision letters for audit purposes. Alternative forms of documentation are also acceptable, including:

- Pharmacy documenting on the prescription confirmation of SA status with the prescriber's office
- Pharmacy documenting on the prescription confirmation of SA status with PharmaCare

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providerConnect is GSC's web portal for health service providers in Canada. It gives you convenient access to forms, pharmacy manuals and guides, health coaching program information, and many other tools and resources all in one place.

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- Pharmacy documenting on the prescription confirmation of SA status using the PharmaNet adjudication response (where SA has been approved)
- A copy of the prescription receipt where the SA status is printed (where SA has been approved)

It is recommended that pharmacies inquire with their software vendor if they are not able to submit this information automatically to GSC during claims adjudication.

A handy claims submission guide for BCSA drugs

You can print the chart below as a helpful guide to handling the different scenarios involved when submitting claims for BCSA drugs.

Scenario	Here's what you do
The drug has been approved by PharmaCare SA, or the patient is currently satisfying their deductible with BC PharmaCare.	Submit claim through BC PharmaCare and coordinate benefits with GSC using intervention code: DV = Applied to provincial plan and approved.
	Note: If the claim is still denied by GSC with DX = Drug must be authorized even if the intervention code was used, please direct patient to submit a completed GSC's Special Authorization form for the requested drug plus a copy of their PharmaCare SA decision letter to GSC for review.
The prescriber has applied to PharmaCare SA on behalf of the patient and coverage has been denied.	Submit the claim to GSC using intervention code: DW = Applied to provincial plan and rejected .
The prescriber has not applied to PharmaCare SA on behalf of the patient.	Submit the claim to GSC. A letter will be sent to the patient advising them to ask their prescriber to submit a request for coverage under the PharmaCare SA program.
	A 60-day grace period will be initiated when a claim is submitted to allow the patient to receive treatment while awaiting a coverage decision. Once 60 days have passed, GSC will not allow any further claims.
	If the drug also requires approval from GSC and prompt initiation of treatment is required, advise the patient and prescriber to apply to both PharmaCare SA and GSC simultaneously.
The patient is not eligible for coverage under the BC PharmaCare program.	Submit the claim to GSC using intervention code: DY = Not eligible for provincial plan coverage .
The prescriber has determined that the patient will not qualify for coverage, as they will not meet the criteria set by the PharmaCare SA program.	Submit the claim to GSC using intervention code: DY = Not eligible for provincial plan coverage .
	Note: For audit purposes GSC will accept documentation within the patient's file either on script

Scenario	Here's what you do
	or a fax specific to the patient from prescriber that indicates that patient will not qualify for SA coverage through BC PharmaCare.
The prescriber has applied to PharmaCare SA on behalf of the patient and coverage has been approved , plus another GSC program needs to be overridden (e.g., trial prescription program, vacation supply, maintenance policy, high-cost drug).	Submit the claim to GSC using the intervention code: SV = Applied to provincial plan and approved. Bypass other programs.
The prescriber has applied to PharmaCare SA on behalf of the patient and coverage has been denied , plus another GSC program needs to be overridden (e.g., trial prescription program, vacation supply, maintenance policy, high-cost drug).	Submit the claim to GSC using the intervention code: SW = Rejected by provincial plan. Bypass other programs.
Three or more intervention codes required.	Submit the claim to GSC manually for processing by uploading it through providerConnect. Ensure the claim includes a completed claim form, the intervention codes being used, and copy of the PharmaCare SA decision letter.

CLAIMS FOR FLASH AND CONTINUOUS GLUCOSE MONITORS

Effective November 11, 2021, pharmacists will be able to submit claims for flash and continuous glucose monitoring systems (transmitters and sensors) through their pharmacy software by a) following the claim submission guidelines from their provincial drug plan, or b) submitting the applicable PIN(s) found in the table below. (Please keep this table available for future reference.)

Reimbursement of flash and glucose monitoring systems require a valid prescription and is limited to patients with insulin-dependent diabetes. To confirm eligibility^{*}, the adjudication system will look in the patient's most recent 90-day claim history for evidence of use of short-acting insulin, insulin pump, or insulin pump supplies, otherwise the claim will deny. Where the claim denies, please direct the patient to their doctor to obtain a prescription indicating the use of short-acting insulin. The patient can then submit that prescription to GSC via the *GSC everywhere* desktop or mobile application. GSC will then load an approval into the patient's file which will enable payment of the claim.

Dexcom G6 Receiver

Dexcom Canada will provide one free G6 Receiver to patients approved for coverage of Dexcom G6 CGM System who don't have a compatible smart device. Patients should contact Dexcom Canada at 1.844.832.1810 and provide proof of a paid pharmacy claim for Dexcom G6 Sensors or Transmitters.

Product identification numbers (PINs)

When transmitting claims for GMS devices listed in the table below, please use the assigned provincial PIN where provincial adjudication guidelines exist; otherwise use the PINs shown on the following page.

*Note that in some cases additional plan-specific eligibility requirements may apply.

PIN	PRODUCT DESCRIPTION
97799074	FREESTYLE LIBRE 2 READER
97799075	FREESTYLE LIBRE 2 SENSOR
97799170	FREESTYLE LIBRE READER
97799171	FREESTYLE LIBRE SENSOR
97799136	DEXCOM – G6 CGM SENSOR 3-PACK (30 DAYS)
97799135	DEXCOM – G6 CGM TRANSMITTER (90 DAYS)
97799159	MEDTRONIC – GUARDIAN SENSOR (3) – 1/PK
97799158	MEDTRONIC – GUARDIAN SENSOR (3) – 5/PK
97799070	MEDTRONIC – GUARDIAN LINK (3) TRANSMITTER KIT

GSC CONTACT CENTRE 2021 HOLIDAY HOURS

Friday, December 24	CLOSED
Monday, December 27	CLOSED
Tuesday, December 28	CLOSED
Wednesday, December 29	8:30 a.m. to 8:30 p.m. EST
Thursday, December 30	8:30 a.m. to 8:30 p.m. EST
Friday, December 31	8:30 a.m. to 7 p.m. EST
Monday, January 3	CLOSED

Our regular business hours (8:30 a.m. to 8:30 p.m. ET, Monday to Friday) resume on Tuesday, January 4, 2022.