

PEI Pharmacare Bulletin

Issue (2022 - 7)

June 13, 2022

NEW PRODUCT(S) ADDED TO THE PEI PHARMACARE FORMULARY
(EFFECTIVE DATE: (JUNE 27, 2022))

Product (Generic name)	Product (Brand name)	Strength	Dosage Form	DIN	MFR
TRAVOPROST	IZBA	0.003%	OPHTHALMIC SOLUTION	02457997	NVR
Criteria	Open benefit				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				

Product (Generic name)	Product (Brand name)	Strength	Dosage Form	DIN	MFR
BUDESONIDE	ENTOCORT	0.02 MG/ML	RECTAL ENEMA	02052431	TIL
Criteria	Open benefit				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				

CRITERIA CHANGE

Product (Generic name)	Product (Brand name)	Strength	Dosage Form	DIN	MFR
NINTEDANIB	OFEV	100 MG 150 MG	CAPSULE CAPSULE	02443066 02443074	BOE
Criteria	<p>Effective July 1, 2022, current special authorization criteria for this medication will be expanded to include: For the treatment of adult patients with chronic fibrosing interstitial lung disease (ILD) with a progressive phenotype and a forced vital capacity (FVC) greater than or equal to 45% of predicted.</p> <p>Renewal Criteria:</p> <ul style="list-style-type: none"> Patients must not demonstrate progression of disease defined as an absolute decline in percent predicted FVC of greater than or equal to 10% over the preceding 12 months of treatment with nintedanib. <p>Claim Notes:</p> <ul style="list-style-type: none"> Must be prescribed by, or in consultation with a physician experienced in the treatment of ILD. Combination therapy of pirfenidone with nintedanib will not be reimbursed. 				

	<ul style="list-style-type: none">• Approval period: 1 year.
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program

NOTICE

Effective June 27, 2022, coverage may be available for Fabrazyme[®] for the treatment of Fabry Disease through the High Cost Drug Plan and Catastrophic Drug Plan, for eligible patients who meet the criteria set out in the Canadian Fabry Disease Treatment Guidelines. The treatment guidelines are supported by the Canadian Fabry Disease Initiative (CFDI), and may be amended by the CFDI from time to time.

Please contact the PEI Pharmacare Program office at [1-877-577-3737](tel:1-877-577-3737) for more information regarding coverage availability and the Special Authorization application process for this product.