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| To / Destinataire : All Retail Pharmacists and Staff | From / Expéditeur : Amanda Clair |
| Date : April 9, 2018 | Administrative Officer - PEI Pharmacare |
| Subject / Objet : Revised April 2018 Update to the Interchangeable/Maximum Reimbursable Price List | Tel / Tél : (902) 620-3288 Fax / Téléc : (902) 368-4905 |
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The April 2018 update to the PEI Pharmacare Interchangeable/Maximum Reimbursable Price (MRP) List has been published. Changes in interchangeability for products listed in this memo will come into effect on April 23, 2018. Changes in pricing related to the addition of new interchangeable/MRP categories will come into effect on the 1st May, 2018.

Adobe Acrobat (pdf) and Excel versions of the complete list can be downloaded from the Government website at: <http://healthpei.ca/pharmacare> under "Resources for Pharmacists".

All product availability and pricing has been confirmed with manufacturers prior to publication of this update.

Please contact the PEI Pharmacare Office at 368-4947 (Charlottetown) or 1-877-577-3737 (toll-free in PEI) if you are unable to access a copy of the list online.

Refer to the Formulary to determine coverage of products under specific drug programs.

In addition, some of the Interchangeable / MRP Categories are only available through the Palliative Home Care Drug Pilot Project.

NEW INTERCHANGEABLE / MRP CATEGORIES

| | | | | MRP | MRP+6% |
|---------------------|----------|-----------------------------|-----|--------|--------|
| ACITRETIN | 02070847 | SORIATANE | HLR | 1.2965 | 1.3743 |
| 10MG CAPSULE | 02466074 | TARO-ACITRETIN | TAR | 1.2965 | 1.3743 |
| | 02468840 | MINT-ACITRETIN | MNT | 1.2965 | 1.3743 |
| ACITRETIN | 02070863 | SORIATANE | HLR | 2.2770 | 2.4136 |
| 25MG CAPSULE | 02468859 | MINT-ACITRETIN | MNT | 2.2770 | 2.4136 |
| BUDESONIDE | 02229099 | PULMICORT NEBUAMP | AZE | 0.1714 | 0.1817 |
| 0.125MG/ML | 02465949 | TEVA-BUDESONIDE | TEV | 0.1714 | 0.1817 |
| INHALATION SOLUTION | | | | | |
| PERINDOPRIL | 02123274 | COVERSYL | SEV | 0.1632 | 0.1730 |
| 2MG TABLET | 02289261 | APO-PERINDOPRIL | APX | 0.1632 | 0.1730 |
| | 02459817 | AURO-PERINDOPRIL | ARO | 0.1632 | 0.1730 |
| | 02464985 | TEVA-PERINDOPRIL | TEV | 0.1632 | 0.1730 |
| | 02470225 | SANDOZ-PERINDOPRIL ERBUMINE | SDZ | 0.1632 | 0.1730 |
| | 02470675 | PMS-PERINDOPRIL | PMS | 0.1632 | 0.1730 |
| PERINDOPRIL | 02123282 | COVERSYL | SEV | 0.2042 | 0.2165 |
| 4MG TABLET | 02289288 | APO-PERINDOPRIL | APX | 0.2042 | 0.2165 |
| | 02459825 | AURO-PERINDOPRIL | ARO | 0.2042 | 0.2165 |
| | 02464993 | TEVA-PERINDOPRIL | TEV | 0.2042 | 0.2165 |
| | 02470233 | SANDOZ-PERINDOPRIL ERBUMINE | SDZ | 0.2042 | 0.2165 |
| | 02470683 | PMS-PERINDOPRIL | PMS | 0.2042 | 0.2165 |
| PERINDOPRIL | 02246624 | COVERSYL | SEV | 0.2831 | 0.3001 |
| 8MG TABLET | 02289296 | APO-PERINDOPRIL | APX | 0.2831 | 0.3001 |
| | 02459833 | AURO-PERINDOPRIL | ARO | 0.2831 | 0.3001 |
| | 02465000 | TEVA-PERINDOPRIL | TEV | 0.2831 | 0.3001 |

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|--------------------------------------------------|----------|----------------------------------|-----|--------|--------|
| | 02470241 | SANDOZ-PERINDOPRIL ERBUMINE | SDZ | 0.2831 | 0.3001 |
| | 02470691 | PMS-PERINDOPRIL | PMS | 0.2831 | 0.3001 |
| PERINDOPRIL & INDAPAMIDE 4MG/1.25MG TABLET | 02246569 | COVERSYL PLUS | SEV | 0.5113 | 0.5420 |
| | 02464020 | TEVA-PERINDOPRIL/INDAPAMIDE | TEV | 0.5113 | 0.5420 |
| | 02470438 | SANDOZ-PERINDOPRIL/INDAPAMIDE | SDZ | 0.5113 | 0.5420 |
| PERINDOPRIL & INDAPAMIDE 8MG/2.5MG TABLET | 02321653 | COVERSYL PLUS HD | SEV | 0.5718 | 0.6061 |
| | 02464039 | TEVA-PERINDOPRIL/INDAPAMIDE | TEV | 0.5718 | 0.6061 |
| | 02470446 | SANDOZ-PERINDOPRIL/INDAPAMIDE HD | SDZ | 0.5718 | 0.6061 |
| TYPTOPHAN 500MG CAPSULE | 00718149 | TRYPTAN | VAL | 0.3563 | 0.3777 |
| | 02248540 | APO-TRYPTOPHAN | APX | 0.3563 | 0.3777 |

PRODUCTS ADDED TO THE INTERCHANGEABLE / MRP LIST

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| APO-RIZATRIPTAN RPD 5MG TABLET | 02393484 |
| APO-RIZATRIPTAN RPD 10MG TABLET | 02393492 |
| BETAHISTINE 16MG TABLET | 02466449 |
| BETAHISTINE 24MG TABLET | 02466457 |
| MINT-HYDRALAZINE 25MG TABLET | 02468786 |
| MINT-HYDRALAZINE 50MG TABLET | 02468794 |

CHANGES TO MRP PRICES

| | | | | <u>MRP</u> | <u>MRP+6%</u> |
|----------------------------|----------|------------------|-----|------------|---------------|
| HYDRALAZINE 25MG TABLET | 00441627 | APO-HYDRALAZINE | APX | 0.0609 | 0.0646 |
| | 02457873 | JAMP-HYDRALAZINE | JPC | 0.0609 | 0.0646 |
| | 02468786 | MINT-HYDRALAZINE | MNT | 0.0609 | 0.0646 |
| HYDRALAZINE 50MG TABLET | 00441635 | APO-HYDRALAZINE | APX | 0.0956 | 0.1013 |
| | 02457881 | JAMP-HYDRALAZINE | JPC | 0.0956 | 0.1013 |
| | 02468794 | MINT-HYDRALAZINE | MNT | 0.0956 | 0.1013 |

DELETED INTERCHANGEABLE / MRP CATEGORIES

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|----------------------------|----------|--------------------------|-----|
| NABUMETONE 500MG TABLET | 02238639 | APO-NABUMETONE | APX |
| | 02343282 | NABUMETONE (DISC APR/17) | SNS |

DISCONTINUED PRODUCTS

These products will not appear in the next publication of the Drug Programs Formulary, but will remain as benefits for the next twelve months.

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| APO-TELMISARTAN/HCTZ 80MG/12.5MG TABLET | 02420023 |
| MYLAN-AZITHROMYCIN 250MG TABLET | 02278359 |
| MYLAN-CLONAZEPAM 2MG TABLET | 02230951 |
| MYLAN-CLOPIDOGREL 75MG TABLET | 02351536 |
| MYLAN-DONEPEZIL 10MG TABLET | 02359480 |
| MYLAN-LISINOPRIL 20MG TABLET | 02274868 |
| MYLAN-ROSUVASTATIN 10MG TABLET | 02381273 |
| MYLAN-SERTRALINE 50MG CAPSULE | 02242520 |

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| PMS-DESMOPRESSIN 0.1MG TABLET | 02304368 |
| PMS-DESMOPRESSIN 0.2MG TABLET | 02304376 |
| RAN-ALENDRONATE 70MG TABLET | 02384728 |
| RATIO-AMCINONIDE 0.1% TOPICAL CREAM | 02247098 |
| TEGRETOL 200MG CHEWABLE TABLET | 00369810 |

CHANGE IN MANUFACTURER

There are no changes to report.

IMPORTANT NOTICES

Please note that Sandoz-K 8mEq (600mg) tablets - DIN 02246734, have been added to the Formulary effective March 15, 2018.