

To / Destinataire : All Retail Pharmacists and Staff	From / Expéditeur : Amanda Clair
Date : February 11, 2019	Administrative Officer - PEI Pharmacare
Subject / Objet : Revised February 2019 Update to the Interchangeable/Maximum Reimbursable Price List	Tel / Tél : (902) 620-3288 Fax / Téléc : (902) 368-4905
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The February 2019 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 February 25, 2019. Changes in pricing related to the addition of new interchangeable/MRP categories will come into effect on the 1st March, 2019.

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

There are no new interchangeable/MRP categories to report.

PRODUCTS ADDED TO THE INTERCHANGEABLE / MRP LIST

JAMP-TENOFOVIR 300MG TABLET	02479087
SANDOZ-FLUOXETINE 10MG CAPSULE	02479486
SANDOZ-FLUOXETINE 20MG CAPSULE	02479494
SANDOZ-MORPHINE SR 100MG TABLET	02478889
SANDOZ-MORPHINE SR 200MG TABLET	02478897
TEVA-MOMETASONE 50MCG DOSE NASAL SPRAY	02475863

CHANGES TO MRP PRICES

				<u>MRP</u>	<u>MRP+6%</u>
IPRATROPIUM BROMIDE 0.0125% INHALATION SOL'N NEBULE (2ML)	02231135	PMS-IPRATROPIUM	PMS	1.1505	1.2195
MOCLOBEMIDE 300MG TABLET	02166747 02240456	MANERIX MOCLOBEMIDE	VAL AAA	1.0399	1.1023
MORPHINE SULFATE 100MG SUSTAINED RELEASE TABLET	02014319 02302799 02478889	MS CONTIN TEVA-MORPHINE SR SANDOZ-MORPHINE SR	PFR TEV SDZ	1.5395	1.6319

MORPHINE SULFATE	02014327	MS CONTIN	PFR	2.7718	2.9381
200MG SUSTAINED	02302802	TEVA-MORPHINE SR	TEV	2.7718	2.9381
RELEASE TABLET	02478897	SANDOZ-MORPHINE SR	SDZ	2.7718	2.9381

DELETED INTERCHANGEABLE / MRP CATEGORIES

AMCINONIDE	02192276	CYCLOCORT (DISC FEB/18)	STI
0.1% TOPICAL LOTION	02247097	RATIO-AMCINONIDE	RPH
BROMAZEPAM	00518123	LECTOPAM (DISC FEB/18)	HLR
3MG TABLET	02230584	TEVA-BROMAZEPAM	TEV
METHYLPREDNISOLONE	00030759	DEPO-MEDROL	PFI
ACETATE 40MG/ML INJ	02245400	METHYLPREDNISOLONE (DISC JAN/18)	SDZ
METHYLPREDNISOLONE	01934333	DEPO-MEDROL	PFI
ACETATE 40MG/ML INJ	02245407	METHYLPREDNISOLONE (DISC JAN/18)	SDZ
METHYLPREDNISOLONE	00030767	DEPO-MEDROL	PFI
ACETATE 80MG/ML INJ	02245406	METHYLPREDNISOLONE (DISC JAN/18)	SDZ

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.

ACT-LOSARTAN HCT 50MG & 12.5MG TABLET	02388251
ACT-LOSARTAN HCT 100MG & 12.5MG TABLET	02388278
ACT-LOSARTAN HCT 100MG & 25MG TABLET	02388286
ACT-VENLAFAXINE XR 37.5MG EXTENDED RELEASE TABLET	02304317
ACT-VENLAFAXINE XR 75MG EXTENDED RELEASE TABLET	02304325
ACT-VENLAFAXINE XR 150MG EXTENDED RELEASE TABLET	02304333
ACT-ZOPICLONE 7.5MG TABLET (DISC APR/18)	02271958
APO-CIPROFLOX 750MG TABLET	02229523
APO-FENTANYL 100MUG/HR TRANSDERMAL PATCH	02314665
APO-IRBESARTAN 150MG TABLET	02386976
APO-OFLOXACIN 0.3% OPH SOL'N	02248398
APO-TIMOP 0.25% OPH SOL'N	00755826
ATORVASTATIN 10MG TABLET	02348705
ATORVASTATIN 20MG TABLET	02348713
ATORVASTATIN 40MG TABLET	02348721
ATORVASTATIN 80MG TABLET	02348748
AURO-CIPROFLOXACIN 750MG TABLET	02381931
BIAXIN XL 500MG EXTENDED RELEASE TABLET	02244756
MYLAN-FENTANYL MATRIX 12UG/HR TRANSDERMAL PATCH	02396696
MYLAN-FENTANYL MATRIX 25UG/HR TRANSDERMAL PATCH	02396718
MYLAN-FENTANYL MATRIX 50UG/HR TRANSDERMAL PATCH	02396726
MYLAN-FENTANYL MATRIX 75UG/HR TRANSDERMAL PATCH	02396734
MYLAN-FENTANYL MATRIX 100UG/HR TRANSDERMAL PATCH	02396742
NEXT CHOICE 0.75MG TABLET	02364905

PLAN B 0.75MG TABLET (DISC MAY/18)

02241674

TOBRAMYCIN 80MG/2ML INJ SOL'N

02382814

CHANGE IN MANUFACTURER

There are no changes in manufacturer to report.

NAME CHANGE

RHOVANE 7.5MG TABLETS (DIN 02008203) TO SANDOZ-ZOPICLONE 7.5MG TABLETS (02008203)

COLCHICINE 0.6MG TABLETS (DIN 00287873) TO SANDOZ-COLCHICINE 0.6MG TABLETS (00287873)

IMPORTANT NOTICES

Please be advised that effective February 25, 2019, APO-IMIQUIMOD 5% TOPICAL CREAM (DIN 02407825) will be de-listed.

PLAN B 1.5MG TABLETS DIN 02293854 have been added to the PEI Pharmacare Formulary effective February 5, 2019.