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Programmes provinciaux de médicaments  
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<b>To / Destinataire: All Retail Pharmacists and Staff</b>	<b>From / Expéditeur: PEI Pharmacare</b>
<b>Date: April 22, 2025</b>	Tel / Tél: (902) 368-4947 Fax / Téléc : (902) 368-4905
<b>Subject / Objet: Revised April 2025 Update to the Maximum Reimbursable Price List</b>	Email/Courriel : <a href="mailto:pharmservices@ihis.org">pharmservices@ihis.org</a>

The April 2025 update to the PEI Pharmacare Maximum Reimbursable Price (MRP) List has been published. Changes for products added to the MRP list will come into effect on May 6, 2025. Changes in pricing related to the addition of new MRP categories will come into effect on June 6, 2025.

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 MRP Categories are only available through the Palliative Home Care Drug Pilot Project.

**NEW MRP CATEGORIES**

			<u>MNF</u>	<u>MRP</u>	<u>MRP+8%</u>
LEVOTHYROXINE SODIUM 25MCG TABLET	02172062 02550709	SYNTHROID APO-LEVOTHYROXINE	BGP APX	0.0815 0.0815	0.0880 0.0880
LEVOTHYROXINE SODIUM 50MCG TABLET	02172070 02213192 02550717	SYNTHROID EXTROXIN APO-LEVOTHYROXINE	BGP ASN APX	0.0373 0.0373 0.0373	0.0403 0.0403 0.0403
LEVOTHYROXINE SODIUM 75MCG TABLET	02172089 02550725	SYNTHROID APO-LEVOTHYROXINE	BGP APX	0.0881 0.0881	0.0951 0.0951
LEVOTHYROXINE SODIUM 88MCG TABLET	02172097 02550733	SYNTHROID APO-LEVOTHYROXINE	BGP APX	0.0881 0.0881	0.0951 0.0951
LEVOTHYROXINE SODIUM 100MCG TABLET	02172100 02213206 02534681	SYNTHROID EXTROXIN APO-LEVOTHYROXINE	BGP ASN APX	0.0460 0.0460 0.0460	0.0497 0.0497 0.0497
LEVOTHYROXINE SODIUM 112MCG TABLET	02171228 02550741	SYNTHROID APO-LEVOTHYROXINE	BGP APX	0.0930 0.0930	0.1004 0.1004

LEVOTHYROXINE SODIUM 125MCG TABLET	02172119 02550768	SYNTHROID APO-LEVOTHYROXINE	BGP APX	0.0941 0.0941	0.1016 0.1016
LEVOTHYROXINE SODIUM 137MCG TABLET	02233852 02550776	SYNTHROID APO-LEVOTHYROXINE	BGP APX	0.1801 0.1801	0.1945 0.1945
LEVOTHYROXINE SODIUM 150MCG TABLET	02172127 02213214 02550784	SYNTHROID EXTROXIN APO-LEVOTHYROXINE	BGP ASN APX	0.0495 0.0495 0.0495	0.0535 0.0535 0.0535
LEVOTHYROXINE SODIUM 175MCG TABLET	02172135 02550792	SYNTHROID APO-LEVOTHYROXINE	BGP APX	0.1009 0.1009	0.1090 0.1090
LEVOTHYROXINE SODIUM 200MCG TABLET	02172143 02213222 02550806	SYNTHROID EXTROXIN APO-LEVOTHYROXINE	BGP ASN APX	0.0526 0.0526 0.0526	0.0568 0.0568 0.0568
LEVOTHYROXINE SODIUM 300MCG TABLET	02172151 02534703	SYNTHROID APO-LEVOTHYROXINE	BGP APX	0.1087 0.1087	0.1174 0.1174
NITROFURANTOIN 50MG CAPSULE (MACROCRYSTALS)	02231015 02495503	TEVA-NITROFURANTOIN JAMP-NITROFURANTOIN	TEV JPC	0.4583 0.2927	0.4950 0.3161
NITROFURANTOIN 100MG CAPSULE (MACROCRYSTALS)	02231016 02495511	TEVA-NITROFURANTOIN JAMP-NITROFURANTOIN	TEV JPC	0.8451 0.5499	0.9127 0.5939

#### PRODUCTS ADDED TO THE MRP LIST

There are no products added to the MRP list to report.

#### CHANGES TO MRP PRICES EFFECTIVE JUNE 6, 2025

			<u>MNF</u>	<u>MRP</u>	<u>MRP+8%</u>
INDOMETHACIN 50MG CAPSULE	00337439 02461536	TEVA-INDOMETHACIN MINT-INDOMETHACIN	TEV MNT	0.2469 0.2469	0.2667 0.2667
NILOTINIB 150MG CAPSULE	02368250 02550881	TASIGNA APO-NILOTINIB	NVR APX	18.2127 18.2127	19.6697 19.6697
NILOTINIB 200MG CAPSULE	02315874 02550903	TASIGNA APO-NILOTINIB	NVR APX	25.3520 25.3520	27.3802 27.3802
NITROFURANTOIN 50MG CAPSULE (MACROCRYSTALS)	02231015	TEVA-NITROFURANTOIN	TEV	0.2927	0.3161
NITROFURANTOIN 100MG CAPSULE (MACROCRYSTALS)	02231016	TEVA-NITROFURANTOIN	TEV	0.5499	0.5939

#### DELETED MRP CATEGORIES

There are no deleted MRP categories to report.

**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.

AURO-INDOMETHACIN 50MG CAPSULE 02499223

NAT-CITALOPRAM 20MG TABLET 02409011

NAT-CITALOPRAM 40MG TABLET 02409038

**CHANGE IN MANUFACTURER**

There are no changes in manufacturers to report.