



PEI Pharmacare
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Programmes provinciaux de médicaments
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To/Destinataire: All Retail Pharmacists and Staff	From/Expéditeur: PEI Pharmacare
Date: December 30, 2025	Tel/ Tél: (902) 368-4847 Fax/Téléc: (902) 368-4905
Subject/Objet: Revised December 2025 Update to the Maximum Reimbursable Price List	Email/Courriel : pharmservices@ihis.org

The December 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 January 13, 2026. Changes in pricing related to the addition of new MRP categories will come into effect on February 13, 2026.

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 have 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.

NEW MRP CATEGORIES

There are no new MRP categories to report.

PRODUCTS ADDED TO THE MRP LIST

JAMP-BISACODYL 5MG DELAYED RELEASE TABLET	02246039
PMS-METHOTREXATE 10MG TABLETS	02561956

CHANGES TO MRP PRICES EFFECTIVE FEBRUARY 13, 2026

			<u>MNF</u>	<u>MRP</u>	<u>MRP+8%</u>
BISACODYL	00254142	DULCOLAX	SNC	0.0502	0.0542
5MG DELAYED	02273411	ODAN-BISACODYL	ODN	0.0502	0.0542
RELEASE TABLETS					

METHOTREXATE	02182750	METHOTREXATE	PFI	1.3994	1.5114
10MG TABLET	02553740	JAMP-METHOTREXATE	JPC	1.3994	1.5114

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.

DILANTIN 125MG/5ML ORAL SUSPENSION	00023450
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CHANGE IN MANUFACTURER

ZDS-LACOSAMIDE 50MG TABLET (WAS MAR-LACOSMIDE)	02487802
ZDS-LACOSAMIDE 100MG TABLET (WAS MAR-LACOSMIDE)	02487810
ZDS-LACOSAMIDE 150MG TABLET (WAS MAR-LACOSMIDE)	02487829
ZDS-LACOSAMIDE 200MG TABLET (WAS MAR-LACOSMIDE)	02487837