

To / Destinataire : All Retail Pharmacists and Staff	From / Expéditeur : Amanda Clair
Date : July 13, 2021	Tel / Tél : (902) 620-3288 Fax /Télec : (902) 368-4905
Subject / Objet : Revised July 2021 Update to the Maximum Reimbursable Price List	Email/Courriel: adclair@ihis.org

The July 2021 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 July 26, 2021. Changes in pricing related to the addition of new MRP categories will come into effect on August 1, 2021.

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>MRP</u>	<u>MRP+6%</u>
BUDESONIDE 0.25MG/ML	01978918	PULMICORT NEBUAMP	AZE	0.3593	0.3809
INHALATION SOLUTION	02494272	TARO-BUDESONIDE	TAR	0.3593	0.3809
FERROUS SULFATE	02237385	FERODAN INFANT	ODN	0.1432	0.1518
75MG (15MG IRON)/ML	80008309	JAMP-FERROUS SULFATE	JPC	0.1432	0.1518
ORAL DROPS					
HYDROCORTISONE	00681989	DERMAFLEX HC	PAL	0.0915	0.0970
ACETATE/UREA 1%-10%	80061501	JAMP-HYDROCORTISONE ACET-UREA	JPC	0.0915	0.0970
TOPICAL CREAM					
POTASSIUM CITRATE	02085992	K-LYTE	WES	0.4760	0.5046
25MMOL EFFERVESCENT	80033602	JAMP-K EFFERVESCENT	JPC	0.4760	0.5046
TABLET					

PRODUCTS ADDED TO THE MRP LIST

ACH-PREGABALIN 25MG CAPSULE	02449838
ACH-PREGABALIN 50MG CAPSULE	02449846
ACH-PREGABALIN 75MG CAPSULE	02449854
ACH-PREGABALIN 225MG CAPSULE	02449897
ACH-PREGABALIN 300MG CAPSULE	02449900
BUSPIRONE 10MG TABLET	02447851

EPINEPHRINE 1MG/ML PARENTERAL SOLUTION	02435810
JAMP-HC 1% TOPICAL CREAM	80057178
JAMP-HYDROCORTISONE 1% TOPICAL CREAM	80057189
OLMESARTAN-HCTZ 20MG/12.5MG TABLET	02509601
OLMESARTAN-HCTZ 40MG/12.5MG TABLET	02509636
OLMESARTAN-HCTZ 40MG/25MG TABLET	02509628
TARO-BUDESONIDE 0.125MG/ML INHALATION SOLUTION	02494264
TARO-BUDESONIDE 0.5MG/ML INHALATION SOLUTION	02494280

CHANGES TO MRP PRICES

				<u>MRP</u>	<u>MRP+6%</u>
BUDESONIDE 0.125MG/ML INHALATION SOLUTION	02229099 02465949 02494264	PULMICORT NEBUAMP TEVA-BUDESONIDE TARO-BUDESONIDE	AZE TEV TAR	0.1143 0.1143 0.1143	0.1212 0.1212 0.1212
BUDESONIDE 0.5MG/ML INHALATION SOLUTION	01978926 02465957 02494280	PULMICORT NEBUAMP TEVA-BUDESONIDE TARO-BUDESONIDE	AZE TEV TAR	0.4559 0.4559 0.4559	0.4833 0.4833 0.4833
CEFPROZIL 250MG TABLET	02293528 02302179	RAN-CEFPROZIL SANDOZ-CEFPROZIL (DISC APR/21)	RAN SDZ	1.7374	1.8416
EPINEPHRINE 1MG/ML INJECTION SOLUTION (1ML)	00721891 00155357 02435810	EPINEPHRINE INJECTION USP ADRENALINE CHLORIDE EPINEPHRINE	HOS ERF TLG	3.8500 3.8500 3.8500	4.0810 4.0810 4.0810
HYDROCORTISONE 1% TOPICAL CREAM	00716839 02412926 80057178	HYDERM HYDROCORTISONE JAMP-HC	TAR SDZ JPC	0.0875 0.0875 0.0875	0.0928 0.0928 0.0928

DELETED MRP CATEGORIES

DESMOPRESSIN 10MCG/DOSE NASAL SPRAY-25 OR 50 DOSES	00836362 02242465	DDAVP (DISC JUL/20) DESMOPRESSIN	FEI AAA
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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.

SANDOZ-CEFPROZIL 250MG TABLET	02302179
SANDOZ-METOPROLOL SR 100MG TABLET	02303396

CHANGE IN MANUFACTURER

M-PILOCARPINE 5MG TABLET (was Accel-Pilocarpine)	MRA
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PRODUCTS REMOVED FROM THE FORMULARY

PMS-FERROUS SULFATE 150MG/5ML ORAL SYRUP	00792675
PMS-SODIUM CROMOGLYCATE 1% INHALTION SOLUTION	02046113