

Waiting for Pharmacare: Navigating Access to Prescription Medication

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It is possible for the details in the following presentation to change and shift from time to time. Please verify information with the appropriate administrators of a given program before providing advice to patients/clients.

Learning Objectives

- Review available public prescription drug programs in Ontario
- Determine eligibility and coverage for these programs
- Outline a process for determining and obtaining coverage:
 - By a program
 - For a drug

Ontario Drug Benefit

6 Programs in 1

Ontario Drug Benefit

- You are eligible for ODB program benefits if you live in Ontario, you have a valid [Ontario health card](#) and at least one of these statements applies to you :
 - [I am 65 years of age or older](#)
 - [I live in a Long-Term Care Home or a Home for Special Care](#)
 - [I am enrolled in the Home Care program](#)
 - [I have high drugs costs relative to my income and am registered in the Trillium Drug Program](#)
 - I receive social assistance through [Ontario Works](#) or the [Ontario Disability Support Program](#).

General Benefits

- All persons greater than 65 years of age with a valid Ontario health card
 - Eligible from 1st day of month following birthday
 - Benefit year August 1
 - Deductible and copay
 - Low income – \$0 deductible/\$2 copay
 - Higher income (up to \$100,000 single or \$160,000 couple) – \$100 deductible/\$6.11 copay
 - Highest income (greater than \$100,000 single or \$160,000 couple) – percentage-based deductible/\$6.11 copay

General Benefits

- Low income senior
 - Application-based
 - Same eligibility and benefit year
 - Threshold income less than:
 - \$16,018 single (plan for increase to \$19,300 in 2016)
 - \$24,175 couple (plan for increase to \$32,300 in 2016)

See “Co-Payment Application For Seniors” form

Trillium Drug Program

- You may qualify for the Trillium Drug Program if:
 - You have a valid Ontario health card
 - You live in Ontario

AND

- You are not covered under ODB as:
 - a senior over 65 years of age
 - someone who receives financial help through Ontario Works or the Ontario Disability Support Program
 - a resident of a long-term care home or home for special care
 - someone who receives home care services

OR

- You don't have private health insurance or your private insurance does not cover 100% of your prescription drug costs

See “Application for Trillium Drug Program” form

Trillium Drug Program

Patients should apply if:

- Their household spends a large portion of their income on medication.
- The patient has no other form of insurance or their private insurance does not cover certain drugs.
- Applicants must have a valid health card

What is a Household

- Unlike other program a household does not necessarily include all the members that live in a unit. i.e. It does not include family members that are independent.

Trillium describes a household as:

- “A single person or 2 or more people who are dependent on each other financially”.

Additional documents to be sent with application:

Proof of income can include:

- Notice of Assessment
- Letter from patients employer stating gross annual income or an affidavit stating this amount.
- T4 or T5 slips
- A letter from household member stating that no income was made from any source in the previous year.

Reasons for Application Being Rejected

- Missing signatures
- Missing proof of income
- Missing legal documents if signed by person other than household member
- Application deadline have past

Clearing the Air on Trillium Drug Program

- An applicant will never spend more money on their deductible than the cost of their medication.
- Patients will only have access to drugs that are on the formulary or drugs that have been approved by the Exceptional Access Program.
- Applicants should complete their taxes however if they have not completed their taxes there are other ways they can show prove of income.
- Patient can still be eligible for Trillium even if they have coverage from a private insurer.

Trillium Program Pros and Cons

Program Weakness

- Some patients are still not able to afford 4% deduction (\$350 lowest)
- Not available to undocumented person
- Forces family members to share their medication needs with each other.

Program Strengths

- Application relatively easy to fill out.
- Over 4300 medication listed
- Cost of deductible can change in mid year if income has dropped more than 10%
- It covers medication for entire family

ODB Formulary System

ODB Formulary

- General Benefits
- Limited Use Benefits
- Exceptional Access Program
- Telephone Request Service
- Diabetes Testing Agents
- Nutritional Products
- Compassionate Review Policy
- Special Drugs Program
- New Drug Funding (Cancer Care Ontario)
- Inherited Metabolic Diseases Program

ODB Formulary

- Available in print and electronic formats
 - eFormulary most up-to-date

<https://www.healthinfo.moh.gov.on.ca/formulary/>

ODB – Limited Use Benefits

- Drugs not covered as general benefits
 - criteria for use
 - indicated by prescriber on prescription (no additional documentation required)

ODB – Exceptional Access Program

- Drugs not otherwise covered as either general or limited use benefits
 - individual clinical review
 - criteria-driven (diagnosis, previous treatments, etc.)
 - generally written requests

See “Request for an Unlisted Drug Product – Exceptional Access Program (EAP)” form

http://www.health.gov.on.ca/en/pro/programs/drugs/pdf/frequently_requested_drugs.pdf

ODB – Telephone Request Service

- Category of EAP providing more rapid turnaround for time sensitive treatments
 - individual clinical review
 - criteria-driven (diagnosis, previous treatments, etc.)
 - telephone requests

http://www.health.gov.on.ca/en/public/programs/drugs/publications/trs/trs_guide.pdf

Diabetes Testing Agents

Diabetes Treatment	Maximum number of test strips per year
Patients managing diabetes with insulin	3,000
Patients managing diabetes with anti-diabetes medication with higher risk of causing hypoglycemia*	400
Patients managing diabetes using anti-diabetes medication with lower risk of causing hypoglycemia*	200
Patients managing diabetes through diet/lifestyle therapy only (no insulin or anti-diabetes medications)	200

Non-Insured Health Benefits (NIHB)

First Nations and Inuit Peoples

Non-Insured Health Benefit

- Health Canada provides eligible First Nations and Inuit people with medication when they are not covered by a private insurer or a province or a territory health and social program. (Treaty 6, Medicine Chest Clause)

Eligibility

- Must live in Canada
- First Nations Peoples registered under the *Indian Act**
- Inuit recognized by one of the Inuit land claims or organizations
- An infant under 12 months old whose parent is eligible
- Clients must first submit claims to private insurer or provincial insurer before resorting to the NIHB Program.

* Federal legislation which came into being in 1876.

Benefit Criteria

- The item must be on the NIHB Benefit List or Schedule
- Product will be covered if it is not covered by any other programs
- Prior approval is obtained
- The item is prescribed by a professional who is licensed to prescribe.

NIHB at a Glance

Positive

- Federal government providing medication benefits to First Nations and Inuit Peoples as national policy
- Appeals process
- Covers some over the counter medication as well as equipment, dental, mental health counseling etc.
- Drugs covered by NIHB that are not covered on provincial formularies.

Negative

- Federal government not recognizing the provision of medication as a constitutional right (Medicine Chest Clause, Treaty 6)
- Does not cover Métis and First Nations people who do not have status under the *Indian Act*
- Some pharmacies request that patients pay for the medication upfront
- Excluded items which will not be covered under any circumstances.

Advocacy/Case Management Role

- Have an understanding of the the system and knowing how to navigate it (troubleshooting).
- Explaining the process to the pt/client in a way that they understand.
- Assisting patient in writing letters and gathering documents.
- Liaising with private insurance companies to request letter of drug coverage.
- Speaking to pharmacists, physicians, social and benefits case workers on the clients/patients behalf.

Other Avenues

- Private
- Interim Federal Health (for refugees)
 - <http://www.cic.gc.ca/english/refugees/outside/summary-ifhp.asp>
- Samples/Compassionate supply from manufacturers

References

- Ontario Public Drug Programs
 - <http://www.health.gov.on.ca/en/public/programs/drugs/>
- Non-Insured Health Benefits for First Nations and Inuit
 - <http://www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/index-eng.php>