

Dispensing Fee limits for Plan Members

Excluding Saskatchewan and Quebec

March 15, 2024

As of **April 1st, 2024**, Medavie Blue Cross will be implementing two Dispensing Fee Programs to manage the number of dispensing fees for maintenance drugs by adding a limit to the reimbursement of the dispensing fee portion of a claim. **These management programs do not apply to all plans. Members that are impacted will receive notice directly either through the mail or from their plan sponsors.** Alternatively, members can verify coverage via their plan booklet on the Medavie Mobile app.

This limit will only apply to members receiving maintenance drug prescriptions that are filled monthly when they could be filled for a 3-month supply, after a trial phase has been completed.

Trial Phase: When the member has claimed less than 3 months supply of a new maintenance drug.

Note: the limit does not apply during the trial phase.

Message **KX** will be displayed on the last transaction counted in the trial phase to inform the pharmacist that the next claim should be for a maintenance supply.

KX	PATIENT IS NOW ELIGIBLE FOR MAINTENANCE SUPPLY	PATIENT ADMISS. À PROV. D'ENTRETIEN
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Maintenance Phase: Once a new maintenance drug has been claimed for at least 3 months. The “KX” response code will continue to be returned even if the member is receiving a maintenance supply.

Program 1 - Dispensing Fee Frequency Limit (standard):

The member is given a frequency of 5 dispensing fees every 12 months for each maintenance drug, and begins on the day of the 1st claim recognized as maintenance. The number of dispensing fees is shared between a brand and its generic of the same strength, but not with different strengths as a dose increase might require adjustment and a new trial phase.

If less than a 3-month supply is dispensed during the maintenance phase, the member will not have enough number of fees left for the rest of the period at the current supply. The pharmacy will receive a reject code of:

59	# OF DISPENSING FEE WILL BE EXCEEDED FOR THE PERIOD - INCREASE DAY SUPPLY	NOMBRE DE FRAIS D'HONORAIRES SERA DÉPASSÉ POUR LA PÉRIODE - AUGMENTER LA PROVISION
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The pharmacy can choose to increase the supply to 3 months or claim the same amount after having made the member aware of the impact.

if the member declines to increase the day supply, use the “HG” intervention code and the reject code “59” will not be returned until the next benefit period.

HG = client has provided consent



If the member has used up their 5 dispensing fees for the maintenance period, the “OL” warning will be returned.

OL	MAX ALLOWABLE DISPENSING FEE EXCEEDED	NBR MAXIMUM DE FRAIS D'HONORAIRES DEPASSE
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Program 2 – Dispensing Fee Minimum Day Supply Limit

Once the drug is in a maintenance phase, the dispensing fee will only be paid if the drug is dispensed for a 3-month supply. The “DR” response code will be returned.

DR	DAYS SUPPLY LOWER THAN MINIMUM ALLOWABLE	NBRE DE JRS D'APPROV. INF. AU MIN. ADM.
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Exclusions:

Specialty drugs, compounds, high-cost drugs, narcotics, targeted, and controlled drugs, and COB with government plans are excluded from the program.

Exceptions

An exception form will need to be submitted for medical and/or safety, storage, or co-pay exceptions. Exception approvals are granted for 1 year.

The exception form is available [here](#) and can be submitted via secured email or fax.

The request will be reviewed by our Special Authorization Unit (SAU)

1. **Medical reason exception:** the exception form must be filled out by a prescriber or pharmacist.
2. **Safety, storage, or co-pay exception:** the exception form can be filled out by the member, prescriber, or pharmacist.

Intervention codes (no exception form needed) for the following:

3. **Compliance Packs** will not be counted or limited by the dispensing fee program for retail compliance packing and Long-Term Care. Use intervention code:

MY = Long term care Rx Split for compliance

The exception will remain valid for the rest of the 12-month period for that drug.

An exception form, listing each DIN and for each member, can be submitted for approval to avoid entering the “MY” intervention code. Please note that a change or addition of a DIN will require a new form to be submitted.

4. **Pharmacy cannot dispense a 3-month supply:** If the prescription is less than a 3-month supply and the pharmacist cannot extend it. Use intervention code:

UX = Emergency dispensing fee limit override

The exception will remain valid for the rest of the 12-month period for that drug.

Should you have any questions, please contact our Customer Contact Center at: 1-800-667-4511.

Pharmacy Benefit Strategy Team