Manitoba
Health, Healthy Living and Seniors

METHADONE REIMBURSEMENT PRODECURE

UPDATED (October 9, 2014)

QUESTIONS AND ANSWERS

Changes to The Specified Drugs Regulation of *The Prescription Drugs Cost Assistance Act* will indicate that Methadose* (for opioid dependence) and Metadol* (for pain management) will be covered benefits.

Will methadone capsules be covered under Part 3 Exception Drug Status (EDS)?

- Capsules compounded from methadone powder are not an eligible benefit through Provincial Drug Programs (PDP) and will not be covered under Part 3 EDS. This aligns Manitoba with other Canadian jurisdictions. Compounded methadone capsules are not benefits in Saskatchewan, Ontario, Quebec, Nova Scotia, PEI or Newfoundland and Labrador. British Columbia and New Brunswick require special authorization for methadone prepared in dosage forms other than the oral solution.

Will there be a transition period to accommodate the change in coverage? Will prescribers be informed of the policy in order to re-assess, re-write new prescriptions?

- This procedure will take effect as of October 16, 2014. A transition period of approximately three months until the effective date of the next Bulletin in mid-January 2015 will allow for: part fills of existing prescriptions to be filled (using the old pseudo PIN) and new prescriptions to be written and filled (using the new DINs). Those who prescribe methadone in Manitoba will be informed of the procedure.

Why is the quantity in DPIN being entered in Millilitres (ml) and not Milligrams (mg) of methadone?

- All Methadose prescriptions are to be entered in DPIN in millilitres. The entry in millilitres (ml) is consistent with the DPIN entry requirement for all other liquid formulations of products. The ml entry is consistent with the

entry in methodology in other provincial jurisdictions which will address prior safety issues through a more consistent and accurate documentation of the quantity, strength and number of day's supply of methadone provided to the patient in the DPIN history. By using the Drug Identification Number (DIN) of the product, DPIN can also provide drug interaction information.

- In some jurisdictions, pharmacists have both the ml and mg on the label for their patients in order to alleviate some of this concern.

  For example: 100mg of methadone would be billed to DPIN as 10ml."

Is Methadose covered for chronic pain?

- Methadose, like compounded methadone, will be listed on the Manitoba Formulary as an unrestricted Part 1 benefit.
- The benefit status for Methadose and delisting of compounded methadone in Manitoba is consistent with actions undertaken in other Canadian jurisdictions.

Do we need to dilute the Methadose solution?

- The cherry-flavoured formulation is a hypertonic concentrate containing sucrose 40%, and the manufacturer advises that it would be difficult to distill, extract or inject. The cherry flavoured formulation can be dispensed without further dilution. However, pharmacists/prescribers may dilute this formulation at their clinical discretion
- Dilution may be considered if a greater volume of solution is required to help prevent 'cheeking' the Methadose or to ensure the patient has received the entire dose.
- The clear, unflavored, dye-free formulation is not hypertonic; therefore, pharmacists are required to dilute this product in approximately 60 ml of a coloured, flavored vehicle such as grape flavoured Kool-Aid™ or orange Tang™. Dilution with a crystalline liquid is required to minimize the risk of abuse and/or diversion by injection. Dilution of the unflavored formulation with distilled water is not appropriate.
- The practice of diluting Methadose with any diluent including crystalline solution (Tang) is not considered compounding and is not eligible for reimbursement as an extemporaneous compound.

When we bill the Methadose 10mg/ml stock solution, do we submit the claim as a regular drug product or should we bill it as a compound?

- The practice of diluting Methadose with any diluent including crystalline solution is not compounding and is not eligible for reimbursement as an extemporaneous compound.

How am I paid for Methadose; what should my professional fee be?

- This procedure notes that pharmacists are to bill for the cost of the drug plus one professional fee. The professional fee would be at the same frequency as if you were dispensing the compounded methadone. If you have a fee structure for Methadose, whereby the fee may vary depending on the days supply provided, and charge these same fee(s) to a cash paying customer, this is acceptable.
- The pharmacy will not be reimbursed for the cost of the crystalline solution (Tang) that is used to prepare the methadone dose for the patient.

For NIHB clients, the only product on the current benefit list is the powder. Have you heard if they will add this new liquid as well?

- Manitoba Health understands that the NIHB drug plan will mimic what is done in each province. This has occurred in other provinces that have listed Methadose.

We get a lot of pain management people taking different doses - 1mg/ml, 5mg/ml 10mg/ml and 50mg/ml. How could they continue receiving their pain medication if only the 10mg/ml is covered?

- Methadose, like compounded methadone, will be listed on the Manitoba Formulary as an unrestricted Part 1 benefit.
- Methadose is manufactured in a 10 mg/ml strength to allow for easy conversion.
- The benefit status for Methadose and delisting of compounded methadone in Manitoba is consistent with actions undertaken in other Canadian jurisdictions.

How will the change affect patients?

- Some patients will note differences in the dispensing of Methadose versus compounded methadone solution, including:

  Colour change: Methadose is available as a colourless (flavourless) or red colour (cherry) formulation. Depending on the formulation of Methadose that is dispensed and the diluent added, there may or may not be a change in the colour of the final dose dispensed to the patient.

  Different taste: Methadose is available as flavourless or cherry-flavoured formulations. Depending on the formulation dispensed, the final methadone dose may or may not have a different flavour.

  Volume: The final volume dispensed may be different.

  Viscosity: Methadose may impact the viscosity or consistency of the final product dispensed to patients. Patients may perceive this change as being slightly thicker or “stickier”.

- Pharmacists are reminded that monitoring of adverse events may be necessary during the transition period of compounded methadone solution to Methadose solution.
- Due to the differences in formulations it is important for methadone prescribers and pharmacists to communicate these changes to patients.
- The new strength of methadone used to prepare the methadone dose may also pose a public safety risk during this time of transition, therefore careful management and communication between methadone prescribers and pharmacy staff involved in the preparation of doses is encouraged**.**

Our pharmacy system software is not designed with a decimal place for the quantity dispensed. How can I input the correct quantity of 7.5ml for a 75mg dose?

- Please contact your pharmacy software vendor to activate the decimal point on your software if necessary. Software vendors have confirmed that decimal points can be accommodated on software systems.