

## 7. PRESCRIBING AND DISPENSING DRUGS

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## 7. PRESCRIBING AND DISPENSING DRUGS

### 7.1 Legislation Governing the Prescription of Drugs in BC

The prescribing and dispensing of drugs and controlled substances are governed both federally and provincially through a number of Acts and Regulations

#### Federal Legislation

Federal legislation governing drugs include the *Controlled Drugs and Substances Act* and Regulations and the *Food and Drugs Act* and Regulations.

#### Provincial Legislation

In British Columbia, the prescribing and dispensing of drugs is regulated through the *Pharmacists, Pharmacy Operations and Drug Scheduling Act*.

#### Legislative Authority for the Prescribing and Dispensing of Medications by Nurse Practitioners

Nurse practitioners registered with the College of Registered Nurses of British Columbia (CRNBC) are authorized to prescribe drugs approved for sale as outlined in the *Pharmacists, Pharmacy Operations and Drug Scheduling Act* and the federal *Food and Drug Act*, in accordance with the CRNBC *Standards for Prescribing and Dispensing Drugs*.

#### LEGISLATION FOR PRESCRIBING AND DISPENSING DRUGS

##### Federal Legislation:

*Controlled Drugs and Substances Act & Regulations*

<http://www.napra.org/docs/0/93/143.asp>

*Food and Drugs Act and Regulations*

<http://www.napra.org/docs/0/93/144.asp>

##### Provincial Legislation:

*Pharmacists, Pharmacy Operations & Drug Scheduling Act*

[http://www.qp.gov.bc.ca/statreg/stat/P/96363\\_01.htm](http://www.qp.gov.bc.ca/statreg/stat/P/96363_01.htm)

Nurse practitioners are authorized under the *Health Professions Act* and *Nurses (Registered) and Nurse Practitioners Regulation* to prescribe Schedule I drugs as listed in the Drug Schedules Regulation #9/98 of the *Pharmacists, Pharmacy Operations and Drug Scheduling Act* with the exception of certain drugs and drug groups. These exceptions are detailed in the *CRNBC/RNABC Scope of Practice for Nurse Practitioners (Family) Standards, Limits and Conditions*.

For detailed information on NP drug prescribing and dispensing, see:

**Drug Schedules Regulation**

Found at: [http://www.qp.gov.bc.ca/statreg/reg/P/Pharmacistsetc/9\\_98.htm](http://www.qp.gov.bc.ca/statreg/reg/P/Pharmacistsetc/9_98.htm)

Or contact the College of registered Nurses of British Columbia at:

<http://www.crnbc.ca>

## 7.2 PharmaCare

PharmaCare is British Columbia's drug program that assists British Columbia residents in paying for eligible prescription drugs and designated medical supplies. PharmaCare is part of the Ministry of Health.

PharmaCare's mission is to improve the health status of British Columbians by providing reimbursement to ensure reasonable access to and appropriate use of prescription drugs and related health benefit services for eligible residents of the province.

PharmaCare financial assistance is administered for the majority of British Columbia residents through the Fair PharmaCare plan, which provides assistance in paying for eligible PharmaCare benefits based on a family's net income.

Residents of British Columbia may also be eligible for PharmaCare financial assistance under one of the following categories:

- Permanent residents of licensed long-term care facilities (Plan B).
- Individuals receiving income assistance through the Ministry of Employment and Income Assistance (Plan C).
- Individuals registered with one of four provincial Cystic Fibrosis (CF) Clinics (Plan D).
- Children eligible for medical or full benefits through the At Home Program of the Ministry of Children and Family Development (Plan F).
- Individuals eligible for benefits through Mental Health Service Centres (Plan G).
- Individuals eligible for the BC Palliative Care Drug Plan (Plan P).

For more information about PharmaCare plans, see *Section 9: Additional Benefits for BC Residents*.

PharmaCare does not provide coverage for medications used in the treatment of cancer, kidney dialysis or transplant patients. Antiretroviral medications, though funded by PharmaCare, are covered only through the drug program of the British Columbia Centre for Excellence in HIV/AIDS.

These medications are provided by the following agencies:

**Antiretroviral medications**

British Columbia Centre for Excellence in HIV/AIDS  
St. Paul's Hospital, Vancouver  
Telephone (604) 806-8477  
[www.hivcfenet.ubc.ca](http://www.hivcfenet.ubc.ca)

**Cancer treatment medications**

B.C. Cancer Agency  
Telephone 1-800-663-3333  
[www.bccancer.bc.ca](http://www.bccancer.bc.ca)

**Kidney dialysis medications**

B.C. Renal Agency  
Telephone (604) 806 8845  
[www.cheos.ubc.ca/bcptra.html](http://www.cheos.ubc.ca/bcptra.html).  
[www.bcrenalagency.ca](http://www.bcrenalagency.ca)

**Transplant medications**

British Columbia Transplant Society  
Telephone 1-800-663-6189  
[www.transplant.bc.ca](http://www.transplant.bc.ca)

For more information on PharmaCare benefits, refer to *Section 9: Additional Benefits for BC Residents* in this manual.

The majority of medications used by BC residents are eligible for PharmaCare coverage as regular benefits, with the following exceptions:

### Low-Cost Alternative Program

If a drug is included in the Low Cost Alternative program, it means that there are a number of drugs available that contain the same active ingredient. PharmaCare covers these drugs only up to the cost of the designated low cost alternative(s). The low-cost alternative drug(s) are fully covered according to the rules of the individual's PharmaCare plan. The others are eligible for only partial coverage.

### Reference Drug Program

Some common medical conditions can be treated with a number of different drugs. These drugs may vary greatly in price but have the same medical effect. Under the Reference Drug Program, PharmaCare coverage is based on the cost of the reference drug or drugs in a therapeutic category. This is the drug(s) considered to be equally effective and the most cost effective in that category.

Groups of drugs included in the Reference Drug Program are:

- Histamine 2 receptor Blockers (H2 Blockers)—used to treat gastrointestinal hyperacidity.
- Non-Steroidal Anti-inflammatory drugs (NSAIDs)—used to treat inflammatory conditions such as arthritis.
- Nitrates—used to treat angina.
- Angiotensin Converting Enzyme Inhibitors (ACE inhibitors)—used to treat high blood pressure.
- Dihydropyridine Calcium Channel Blockers (Dihydropyridine CCBs)—used to treat high blood pressure.

### Maximum Days' Supply Policy

If a drug is intended for only short-term use, or if a first-time prescription for a drug intended for long-term use is purchased, PharmaCare covers only a 30-day supply. Short-term drugs include antibiotics, sedatives, sleeping pills and barbiturates, some of which are addictive or become less effective if used over a long period of time. For additional fills of prescriptions intended for long-term use, PharmaCare limits coverage to a 100-day supply.

The days' supply policy reduces drug wastage by first ensuring that a drug prescribed for a long-term condition will be effective and tolerable. It also promotes safety by reducing the incidence of leftover supplies. Exceptions may be requested by medical practitioners on behalf of residents in a rural or remote area without a pharmacy nearby. Explanatory documentation will be required.

## Special Authority (SA)

A Special Authority (SA) is an exemption that makes a particular drug eligible for full or partial PharmaCare coverage. Medical practitioners must submit SA requests on behalf of their patients. In cases of medical necessity, consideration may be given to coverage of a limited coverage medication or coverage for those unable to use the low cost alternative (due to allergy) or reference drug product (due to adverse reaction or treatment failure). Actual coverage is subject to the usual rules of patient's PharmaCare plan. Coverage is also subject to the Low Cost Alternative Program (if applicable) and to the Maximum Days' Supply and Maximum Pricing Policies.

Special Authorities are usually for a specific drug for an individual patient. On rare occasions, a Special Authority exemption may be granted to a physician or physician specialty group. These exemptions provide coverage of specific drugs for all the patients of a physician or specialty group.

Nurse practitioners may submit Special Authority requests for coverage of SA medications except in the following situations:

- SA medications that PharmaCare requires a member of a physician specialty group to prescribe; and
- Medications that NPs do not have the authority to prescribe.

### 7.3 PharmaNet

PharmaNet is a province wide secure computer network that increases drug safety by linking all pharmacies throughout British Columbia to a central set of data systems. These systems support drug dispensing, drug monitoring and claims processing.

PharmaNet was developed and is managed by BC's Ministry of Health. Operation and administration of PharmaNet is handled by Health Insurance BC (HIBC).

The purpose of PharmaNet is to:

- Prevent over consumption of prescription drugs by unintended duplication or fraud.
- Prevent inappropriate therapies by drug interaction checking and dosage range checking.
- Promote cost effective usage of drugs
- Improve standards of practice by offering comprehensive drug information and complete patient information.
- Streamline claims payments by offering immediate adjudication for pharmacies and the public.

PharmaNet provides pharmacists and emergency room physicians with up-to-the-minute information about all prescription medications dispensed to a patient anywhere in B.C.

A patient's medication history covers the previous 14 months and includes all drugs dispensed, reported drug allergies, and any clinical conditions the patient may have.

Access to PharmaNet data is strictly controlled; each user group has access only to the information required for their specific role. For instance, PharmaCare has access only to claim information; pharmacists have access to medication histories but cannot view any details of a patient's level of Fair PharmaCare financial assistance.

Nurse practitioners who require a patient's medication profile should ask the patient to request a printout of the medication history. The request can be made directly to the College of Pharmacists of BC or through the patient's pharmacy who will forward the request to the College on their behalf.

To contact PharmaCare or PharmaNet Help Desk: Pharmacies & Prescribers  
NOT A PUBLIC NUMBER  
Vancouver/Lower Mainland: (604) 682-7120

Elsewhere in BC (toll-free): 1-800-554-0225

Additional information about PharmaCare/PharmaNet is available at:  
<http://www.health.gov.bc.ca/pharme/>

The following is a sample of the form that is used by nurse practitioners when prescribing medication for patients. Note that the prescription must include the name, address, telephone number and prescriber number of the prescribing NP as well as the date and the name, address, telephone number, birthdate and PHN of the patient.

H6-2005/10

**VANCOUVER COASTAL HEALTH AUTHORITY**

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Date: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Birthdate: \_\_\_\_\_  
PHN: \_\_\_\_\_

**PLEASE LABEL CONTENTS**

Jennifer Beaveridge Prescriber # \_\_\_\_\_