



PHARMACY

UPDATE

Alberta edition

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DAYS' SUPPLY GREATER THAN 100 DAYS

To reduce waste associated with unused medication, all new Green Shield Canada (GSC) prescriptions are limited to an initial 30-day supply. Ongoing prescription claims are processed in the amount prescribed up to a maximum of a 100-days' supply.

If a GSC plan member needs a supply of more than 100 days for vacation purposes, GSC will allow these to be processed in real time up to a maximum of 183 days. For the claim to process via OLTP, the pharmacist will need to use intervention code **"MV – Vacation Supply."**

If the system does not allow the full, submitted vacation supply, there may be a frequency limitation on the drug. The pharmacy is encouraged to submit the claim via OLTP up to the frequency maximum and instruct the plan member to submit the balance for reimbursement (ensure the receipt indicates the claim is for a vacation supply).

In the case of coordination of benefits with a provincial program, if the program denies the excess days' supply, the member will need to submit their denial letter from the province along with their "paid in full" receipt. Unfortunately, an OLTP claim submission containing a "DA" intervention code without a paid amount is not sufficient proof of a denial.

COORDINATING DIABETIC SUPPLY COVERAGE WITH ALBERTA'S COVERAGE FOR SENIORS PROGRAM

Plan members enrolled in the Seniors Program receive 100 per cent coverage for diabetes supplies (test strips, needles, syringes, and lancets) when purchased from a licensed pharmacy, up to a maximum of \$2,400 per eligible person depending on the method of [diabetes management](#).

When submitting a claim to GSC where a portion has been paid by the Coverage for Seniors program, use the intervention code "DA" and ensure that the [GSC-assigned PIN](#) for the diabetic supply is submitted. The "DA" code indicates that the claim is being coordinated with the provincial program.

If the patient has exhausted the Coverage for Seniors program benefit or does not qualify for diabetic supplies under the program, the intervention code "DY" may be used and the [GSC-assigned PIN](#) for the diabetic supply should be submitted. The "DY" code indicates that the patient is not eligible for the government's diabetic supply program or has used up the funds available from that program.

REAL-TIME SUBMISSION OF GLUCOSE MONITORING SYSTEMS

Pharmacists can submit claims for flash and continuous glucose monitoring systems (transmitters and sensors) through their pharmacy software by:

- Following the claim submission guidelines from the provincial drug plan and using the provincial assigned PIN(s), along with intervention code “DA” to indicate that the claim is being coordinated with the provincial program, **or**
- Submitting the applicable PIN(s) found [here](#).

Reimbursement of flash and glucose monitoring systems requires a valid prescription and is limited to patients with insulin-dependent diabetes. To confirm eligibility*, the adjudication system will look in the patient’s most recent 90-day claim history for evidence of use of short-acting or intermediate-acting insulin, an insulin pump, or insulin pump supplies, otherwise the claim will deny. Where the claim denies, please direct the patient to their doctor to obtain a prescription indicating the use of short-acting or intermediate-acting insulin. The patient can then submit that prescription to GSC via the GSC *everywhere* website or mobile application. GSC will then load an approval into the patient’s file which will enable payment of the claim.

*Note that in some cases additional plan-specific eligibility requirements may apply.