September 22, 2015

Dear: Healthcare Professional

Re: Changes to Approved Quantities of Blood Glucose Test Strips

As of October 15, 2015, the number of blood glucose test strips that are covered * by the Saskatchewan Drug Plan will be based on the type of diabetes treatment your patients are receiving. These changes align with guidelines published by the Canadian Diabetes Association. We ask for your assistance in communicating these changes with your patients when you next see them for their diabetes management.

If your patient fits into more than one of the categories below, the higher quantity applies.

**Table 1: Annual Approved Quantity**

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Notes</th>
<th>Annual Approved Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Managing diabetes <strong>with insulin</strong></td>
<td>This higher quantity applies whether or not you are also taking other diabetes medications</td>
<td>3,650 strips</td>
</tr>
<tr>
<td>Managing diabetes with <strong>medication with a higher risk of causing hypoglycemia</strong></td>
<td>Examples: gliclazide (Diamicron®), glyburide (Diabeta®), nateglinide (Starlix®), repaglinide (Gluconorm®)</td>
<td>400 strips</td>
</tr>
<tr>
<td>Managing diabetes <strong>medication with a lower risk of causing hypoglycemia</strong></td>
<td>Examples: acarbose (Glucobay®), linagliptin (Trajenta®), metformin (Glucophage®), pioglitazone (Actos®), saxagliptin (Onglyza®), sitagliptin (Januvia®)</td>
<td>200 strips</td>
</tr>
<tr>
<td>Managing diabetes through <strong>diet/lifestyle therapy</strong></td>
<td></td>
<td>200 strips</td>
</tr>
</tbody>
</table>

*Coverage is subject to the patient’s usual deductible and co-payment. Requests for strips in excess of these approved quantities will be considered based on the criteria listed below.

In certain circumstances periodic increases in blood glucose testing may be warranted, resulting in a need for more strips than a patient’s annual drug plan approved quantity allows. A maximum of 100 additional test strips per calendar year will be covered\(^1\) for patients who have been directed by their primary healthcare provider (e.g. diabetes educator, \(\ldots\))

\(^{1}\) Coverage will be available via individual request from the health care provider on behalf of the patient; requests must include the reason for the higher than typical monitoring schedule and the name of the health care professional recommending the additional supply.
pharmacist, physician or nurse practitioner) to monitor their blood glucose levels more closely, and who meet the following criteria:

- Occupation that requires strict avoidance of hypoglycemia for safety reasons (e.g., pilots, air-traffic controllers, commercial drivers, critical positions in railways, etc.)
- Not meeting glycemic targets, as determined by the physician, primary health care provider, pharmacist, or diabetes educator for 3 months or greater
- Changes in drug therapy that may impact blood glucose control (e.g. starting or stopping hypo or hyperglycemic inducing medication, drug/drug interaction, drug/disease interaction)
- Acute illness, or infection that may affect blood glucose control over a sustained period of time
- Gestational diabetes

Requests that fall outside of the policy/criteria above will be reviewed on a case-by-case basis by the Drug Plan.

Patient poster and a FAQs document are available to help you communicate these changes to your patients. Electronic copies of the documents are available on http://formulary.drugplan.health.gov.sk.ca.

Additional Patient diabetes resources and tools can be found on The Canadian Diabetes Association website or using the following link: http://guidelines.diabetes.ca/PatientResources

**Frequently Asked Questions**

1. **How is a claim for blood glucose test strips adjudicated, with respect to approved quantities, in the Drug Plan computer system?**
   - First the Drug Plan computer system will review anti-diabetes medication claims in the previous 6 months to identify claims for insulin products and other anti-diabetes medications. The system will then apply the approved quantity of BGTS that may be reimbursed for that patient in a 365 days period.
   - When a BGTS claim is submitted the computer system will look back over the previous 365 days and will calculate whether the patient has met their allotted maximum during that time. If the patient has not reached his/her maximum number of allotted strips over the previous 365 days he/she will be eligible to receive test strips up to that maximum amount.
   - The test strip allotment will apply to both on-line and paper claims.

2. **If the pharmacy is dispensing both test strips and anti-diabetes medication prescriptions, does it matter which order the claims are submitted to the Drug Plan?**
   - No. When processing a patient’s claim for test strips, the Drug Plan computer system is only looking for previous claims for test strips in the last 365 days period
   - It will take the Drug Plan computer system 24 hours to adjust a patient’s approved quantity after a new medication has been dispensed.

3. **Does the quantity of BGTS that the patient received prior to October 15, 2015 count towards the new approved quantity total going forward?**
   - No, patient’s count will begin at 0 on October 15th so previous quantities will not be counted going forward.

4. **How will the system work if a patient is taking an anti-diabetes medication that isn’t covered by the Drug Plan?**
   - When the system reviews for anti-diabetes claims, it is looking at both benefit and non-benefits drugs. The system will recognize all anti-diabetes medications even if it isn’t covered by the Drug Plan.
5. **How do I know how many strips a patient is entitled?**
   - Your patient’s BGTS approved quantity is determined based on their medication treatment. Please see the Table 1 above. If you have any questions, you can call the Drug Plan at 1-800-667-7581 or 306-787-3317 in Regina.

6. **What happens if my patient’s diabetes medication management changes?**
   - The Drug Plan will recognize changes to your patient’s medication profile and will adjust their approved quantity accordingly. The Drug Plan system will review each patient’s profiles on a nightly basis. If a new prescription for anti-diabetes medication has been filled that day, the system will recognize this change and the appropriate approved quantity will be set for the following day.
   - The system will only recognize the change if a prescription has been filled. If a patient is receiving physician samples, the change in medication therapy will not be recognized and approved quantities will not be adjusted.

7. **How do I request an increase to my patient’s blood glucose test strips approved quantity?**
   - Any primary care provider (e.g. diabetic educators, pharmacists, physicians, nurse practitioners) can call the Drug Plan at 1-800-667-7581 (or 306-787-3317 in Regina) to request an increase in blood glucose test strip approved quantity. Please provide the Drug Plan assessor with the following:
     - Patient’s Name
     - Patient’s Health Service Number
     - Requested Quantity
     - Reason for increase (see established criteria above)
     - Primary Care Provider Name and Phone Number

8. **What if my patient changes meters, how does this affect their approved quantity?**
   - Changing to a new device does not qualify as a reason for additional test strips. If the patient has not reached their allotment, they can receive test strips for their new device, but the total allocation includes the test strips from their previous device. It is recommended that the patient use a device that will be compatible with their current test strips to ensure the patient does not exceed their allocated maximum number of test strips for the year. If there are malfunctions with their current device, it is recommended that the patient use a new device that remains compatible with their test strips.

**Need more information about this or other Drug Plan program benefits?**

Visit [http://formulary.drugplan.health.gov.sk.ca](http://formulary.drugplan.health.gov.sk.ca) or call the Drug Plan at: 1-800-667-7581 or 306-787-3317 in Regina