

Alberta Clinical Pharmacy Services Program

September 2020







Table of Contents

4	Alberta Clinical Pharmacy Services Program2		
	Clinical Pharmacy Services		
	New Pharmacy Services		
	Drugs Used		
	PINs		
	Special Service Codes		
	Filling an AB Clinical Pharmacy Services Rx		
	Setting up the Doctor Card		





Alberta Clinical Pharmacy Services Program

Clinical Pharmacy Services

As of April 1, 2014, the Compensation Plan for Pharmacy Services has been updated. You can view the changes by visiting http://www.health.alberta.ca/professionals/fees.html.

New Pharmacy Services

Tobacco Cessation Services: An SMMA Tobacco Cessation Initial Assessment may be claimed for a resident using a tobacco product daily and willing to receive Tobacco Cessation Services. Up to four SMMA Tobacco Cessation Follow-up Assessments may be claimed during the 365 day period after the SMMA Tobacco Cessation Initial Assessment.

SMMAs for **Albertans with Diabetes Mellitus**: An SMMA Diabetes Initial Assessment and SMMA Diabetes Follow-up Assessments may be claimed for Albertans with diabetes mellitus taking at least one Schedule 1 drug or insulin.

Discontinuation of a Prescribed Schedule 1 Drug: An Assessment for an Adaptation of a Prescription may be billed when adaptation results in the discontinuation of a prescribed Schedule 1 drug for a resident if the prescribed drug confers little or no benefit and/or excessive risk of harm.

The program includes:

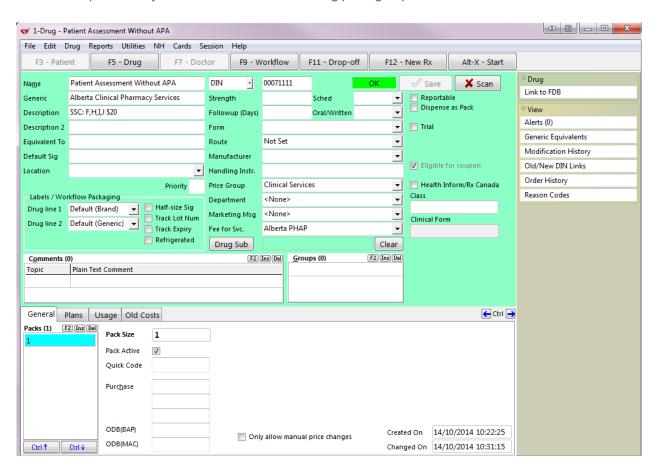
- Comprehensive Annual Care Plan (CACP);
- Albertans living with specific chronic diseases will be supported by pharmacists through assessment, care plan development and ongoing monitoring;
- Standard Medication Management Assessment (SMMA);
- Pharmacists will conduct medication reviews and develop care plans for patients with at least one chronic disease and on at least four continuous medications;
- Professional service following an assessment;
- The Section 3 Assessments (Prescription Renewal, Adaptation of a Prescription, Administration of a Product by Injection, Prescribing at Initial Access or to Manage Ongoing Therapy, Prescribing in an Emergency, Refusal to Fill a Prescription, Trial Prescription, Administration of a Publicly Funded Vaccine), may be claimed during the 365 day period after an initial assessment (CACP, SMMA, diabetes SMMA or tobacco cessation SMMA).





Drugs Used

PINs will be used to differentiate the type of clinical pharmacy service type provided and whether or not the service was provided by an APA Pharmacist. The drug price group used for these cards is Clinical Services.







PINs

The drug card PINs are grouped as follows based on whether the service was provided by a pharmacist with or without Additional Prescribing Authority (APA):

PIN	Description
0071111	Patient Assessment without APA
0071112	SMMA Initial Assessment without APA
0071113	SMMA Follow Up Assessment without APA
0071114	CACP Initial Assessment without APA
0071115	CACP Follow Up Assessment without APA
0081111	Patient Assessment with APA
0081112	SMMA Initial Assessment with APA
0081113	SMMA Follow Up Assessment with APA
0081114	CACP Initial Assessment with APA
0081115	CACP Follow Up Assessment with APA
0081116	Initial Access Prescribing with APA

NOTE: These prescriptions are Fee For Service prescriptions under ABPHAP.





Special Service Codes

When a clinical pharmacy service has been performed, a Special Service Code and PIN will be needed to differentiate the type of clinical activity.

PIN	SSC	SSF
0071111	F,H,I,J	\$20
0071112	L	\$60
0071113	M	\$20
0071114	L	\$100
0071115	M	\$20
0081111	F,H,I,J	\$20
0081112	L	\$75
0081113	M	\$25
0081114	L	\$125
0081115	М	\$25
0081116	K	\$25





The Special Service codes used are as follows:

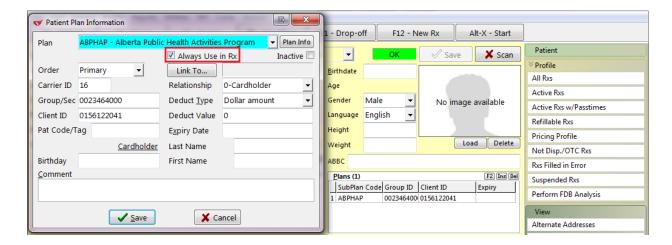
Special Service Codes	Code Value – Clinical Activity		
F	Assessment for a Prescription Renewal		
Н	Assessment for an Adaptation of a Prescription		
I	Assessment for Prescribing in an Emergency		
J	Assessment for the Administration of a Product by Injection		
K	Assessment for Prescribing at Initial Access or to Manage Ongoing Therapy		
L	Initial assessment of patient's needs		
M	Follow-up assessment of patient's needs		





Filling an AB Clinical Pharmacy Services Rx

Before filling for a Clinical Pharmacy Services Rx, ensure that the ABPHAP plan exists in the Patient Card. The patient's client ID will be their provincial PHN. Check off the option, Always Use in Rx.

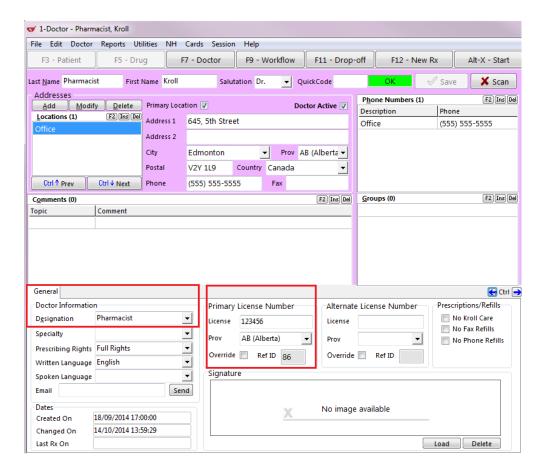






Setting up the Doctor Card

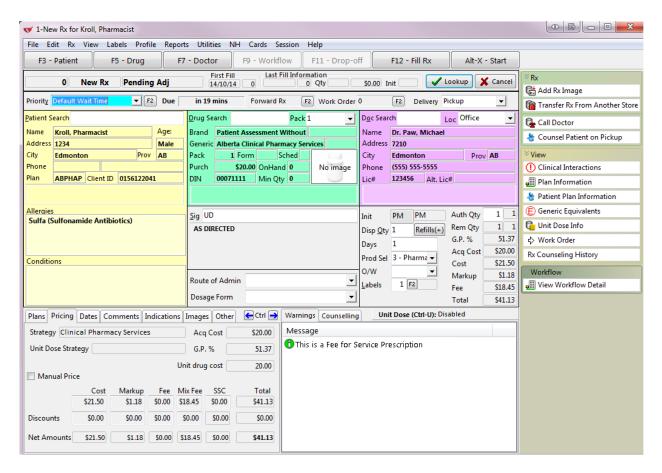
To fill a prescription for a fee for service claim, the doctor card must be entered with Pharmacist credentials. See below:







Select the appropriate drug (i.e. appropriate PIN) and enter the dispensing quantity and days with a quantity of 1.

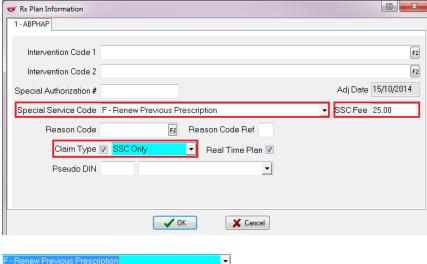






To select the appropriate special service codes, do the following:

- 1. From the F 12 screen, select View > Plan Information > ABPHAP
- 2. Select the **Special Service Code** dropdown menu to view the list of SSC codes.





The Special Service Code Fee will be populated automatically based on the selected SSC code.

NOTE: An incorrect submission of the PIN add SSC combination may result in claim rejection of **D1 – DIN/PIN/GP/SSC** not a benefit.





As of October 1st, 2012, it will become mandatory to submit an ICD-9 code in order to collect the prominent disease associated to the assessment. Clicking the F2 button beside the **Reason Code** field - on the **Plan Information** screen - will bring up the list. Ensure that the code selected represents the prominent disease for the assessment.

