

New Brunswick Prescription Drug Program

September 2020







Table of Contents

New Brunswick Prescription Drug Program (NBPDP)	 į
Program Objectives	
Eligibility	
Billing for NB Medscheck	
Setting up a Doctor	
Documentation Requirements	
Sample Personal Medication Record:	





New Brunswick Prescription Drug Program (NBPDP)

The New Brunswick Prescription Drug Program (NBPDP) began accepting claims for the New Brunswick PharmaCheck medication review program on June 1, 2012. The program's goal and objectives are as follows:

Program Objectives

- To provide a professional pharmacy service focused on the appropriate utilization of chronic medications to improve patient outcomes;
- To improve a patient's knowledge of and adherence with their medications;
- To enhance the potential benefits associated with a patient's medications;
- To reduce the potential risks associated with a patient's medications.

Eligibility

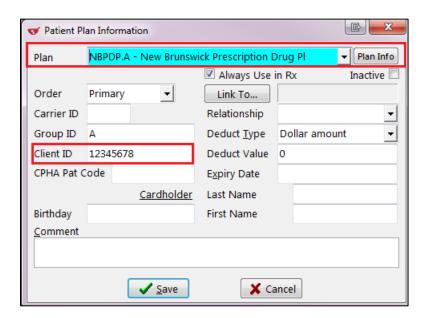
- NBPDP Plan A (Senior) beneficiaries taking three or more chronic prescription medications;
- Only one Medication Check-up will be reimbursed per Plan A beneficiary per year (April 1st to March 31st).





Billing for NB Medscheck

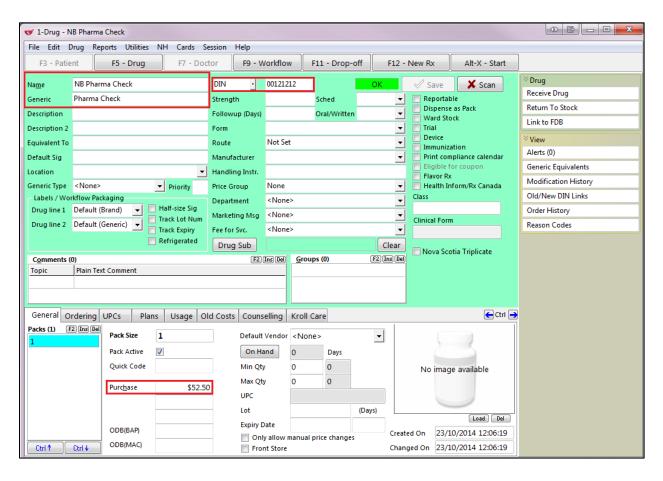
Setup the patient plan with NBPDP Plan A (Senior) as follows:







Fill a prescription with a PIN of 00121212.

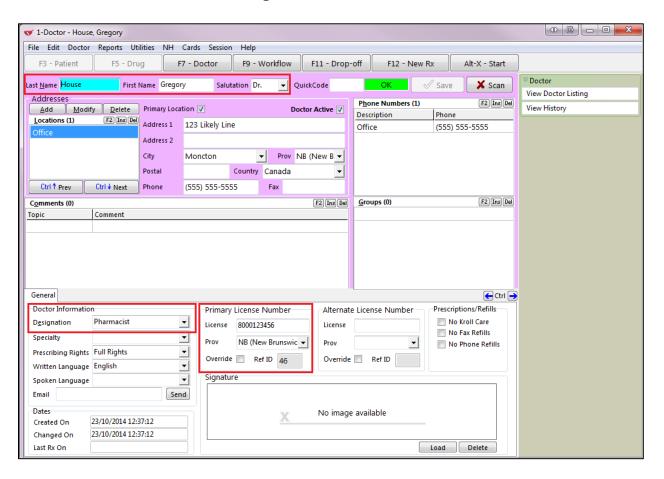






Setting up a Doctor

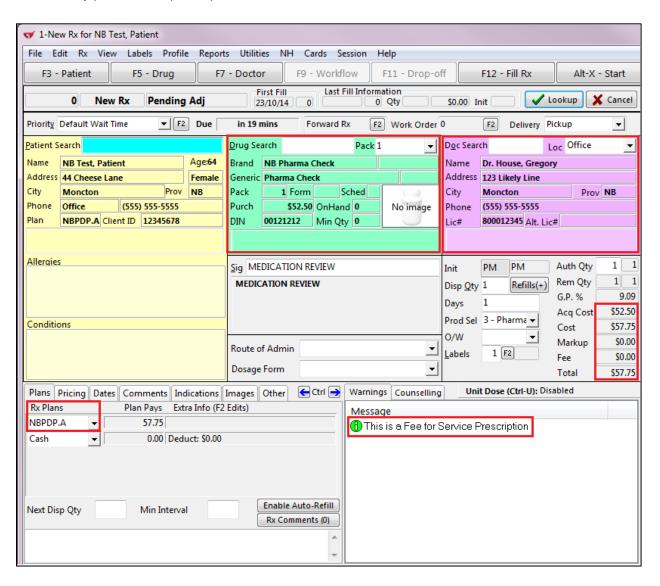
- 1. Create a doctor profile with the credentials of the pharmacist who performed the medication review.
- 2. Enter the license number of the pharmacist proceeded by '8000'.
- 3. Select Pharmacist from the Designation menu.







Note the key points of the prescription:







Documentation Requirements

- Patients must leave with a complete, accurate, up-to-date personal medication record that includes the name and signature of the patient and the pharmacist who conducted the medication check-up, as well as the pharmacy's contact information;
- A copy of the signed record must be retained by the pharmacy for a period of three years;
- It is recommended that consent be obtained from the patient if their personal health information related to a medication check-up is to be shared with another health care provider.

After completing a medication check-up, it is expected that a patient understand:

- The names of their medications;
- Why they are taking their medications;
- The best way to take their medications;
- Any special instructions that may be associated with the proper use of their medications.





Sample Personal Medication Record:

PERSONAL MEDICATION RECORD OF: Mallatha, Preetha				PHARMACY CONTACT INFORMATION Kroll Test Pharmacy, 123 Any Street, Fredericton, New Brunswick E3A 0A1				
MEDICATION ALLERGIES, INTOLERANCES, OTHER ALLERGIES				FAMILY DOCTOR CONTACT INFORMATION				
			Phone		FAX		_	
Name of medication Brand/Generic	Strength/Dose	How to take this medication (frequency, time of day, etc.)	F	urpose	Comments	Presci	riber	
Apo-Pravastatin20mg	20mg - 30 TAB	ASDIRECTED				Dr. Smith, jo	ohn	
Ratio-Ramipril 1.25mg	1.25mg - 30 CAP	ASDIRECTED				Dr. Smith, jo	ohn	
Apo-Ramipril 10mg	10mg - 30 CAP	ASDIRECTED				Dr. Test, Do	ctor	
Apo-Atorvastatin40mg	40mg - 30 TAB	ASDIRECTED				Dr. Test, Do	ctor	
Apo-Metformin500mg	500mg - 30 TAB	US				Dr. Test, Do	ctor	
							_	
		l completeness of information provided macist to share this medication list with					ange to	
Additional Comments/Action	ons Needed:					,		
Patient name			Patient S	ignature			_	
						Date 23-Oct-2014	_	

Expected completion time: 20-30 minutes

Frequency: One medication check-up will be reimbursed per Plan A beneficiary per fiscal year.