Ontario Limited Use and Section 8

May 2020

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Limited Use products are listed in the ODB CDI Formulary with specific clinical criteria or conditions for use and will be reimbursed only when those conditions have been met. The prescriber must include a Reason for Use code for the ODB recipient to qualify for the coverage.

Viewing Limited Use Codes

1. Call up the drug in the **F5 - Drug** screen. If limited use codes are associated with the drug, a **View Reason Codes** button will appear. You can also view limited use codes associated with the drug but selecting **Reason Codes** from the right navigation pane.

2. The **Drug Reason Codes** screen will appear, displaying all limited use codes associated with the drug.

Click **OK** or Cancel to close the Drug Reason Codes screen or Print to generate a Limited Use Reason Code Report:

Limited Use Reason Code Report

Kroll Computer Systems Pharmacy, Suite 201-1502 West 50th Avenue Vancouver BC V0V 0V0

Phone: (604) 383-1010 Fax: (604) 383-0001
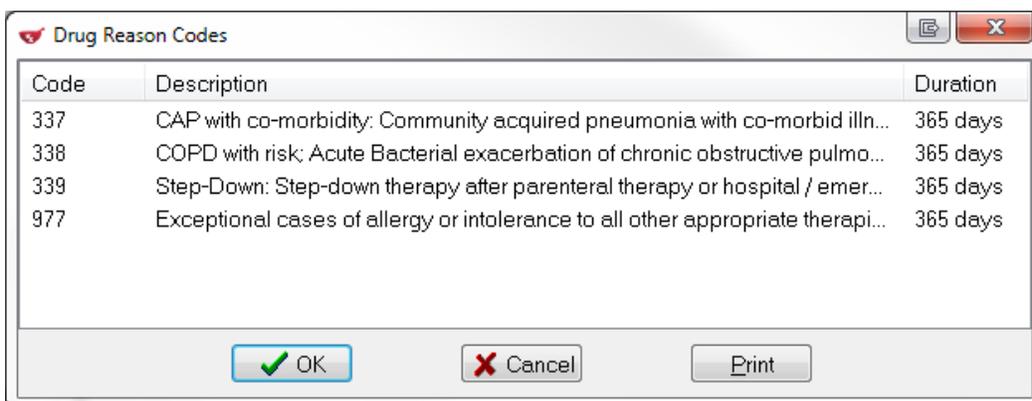
Limited Use Reason Code Report			Printed on: 16/09/2014 14:29:11
Drug		Code	Limited Use Reason
Form	DIN		
Avelox 400mg		337	CAP with co-morbidity: Community acquired pneumonia with co-morbid illnesses or failure to
TAB	02242965		first-line therapy.
Avelox 400mg		338	COPD with risk; Acute Bacterial exacerbation of chronic obstructive pulmonary disease (COPD)
TAB	02242965		with risk factors; bronchiectasis. Risk factors include: poor pulmonary lung function (FEVI below 50% predicted level), age over 65 years, co-morbid medical illness (congestive heart failure, diabetes, chronic renal failure, chronic liver disease), chronic corticosteriod use, malnutrition, prolonged duration of disease, or 4 more exacerbations/year.
Avelox 400mg		339	Step-Down: Step-down therapy after parenteral therapy or hospital / emergency department
TAB	02242965		discharge.
Avelox 400mg		977	Exceptional cases of allergy or intolerance to all other appropriate therapies.

Adding Limited Use Drugs to a Patient Profile

Limited Use numbers are stored at the patient level and they can be attached to a patient without filling a prescription when presented with a LUP form from the patient.

1. Call up the **F3 - Patient** screen for the selected patient and select **Limited Use Items** from the right navigation pane.
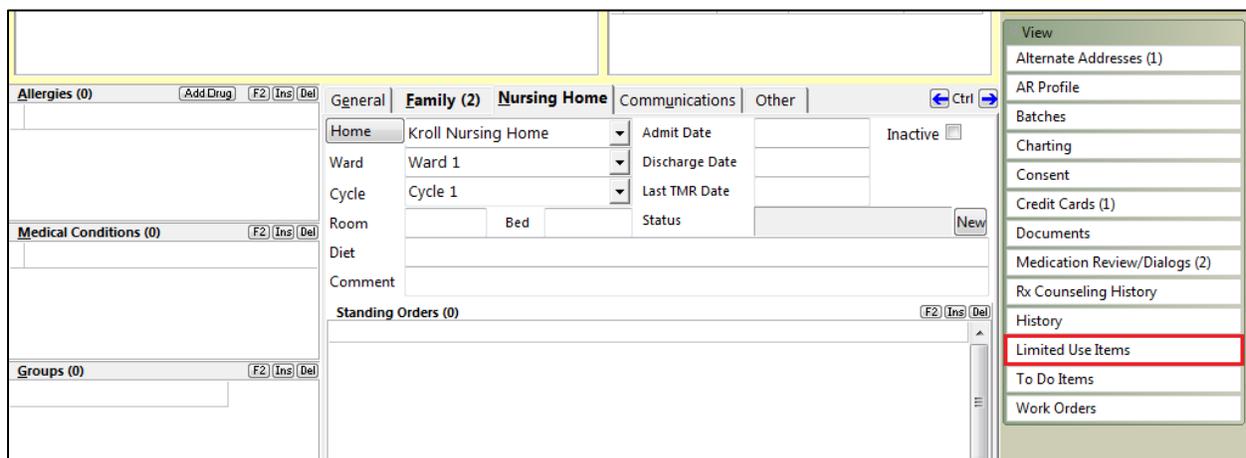
2. The **Patient Limited Use Drugs** screen will appear. Click **Ins** or press the **Insert** key on your keyboard to ad a new LUP.
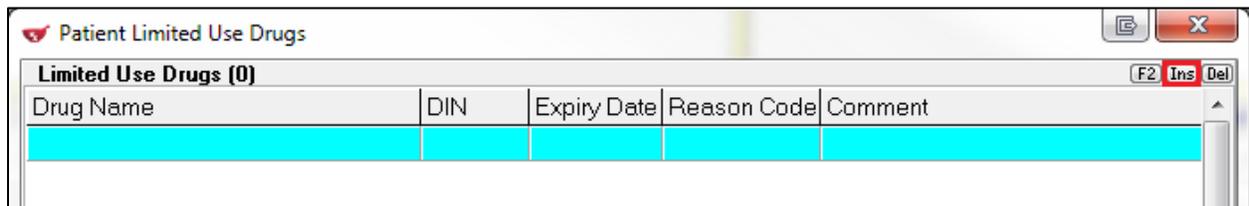
3. The **Patient Limited Use Drugs** form will appear. Enter the **DIN** or press **F2** to perform a drug search.
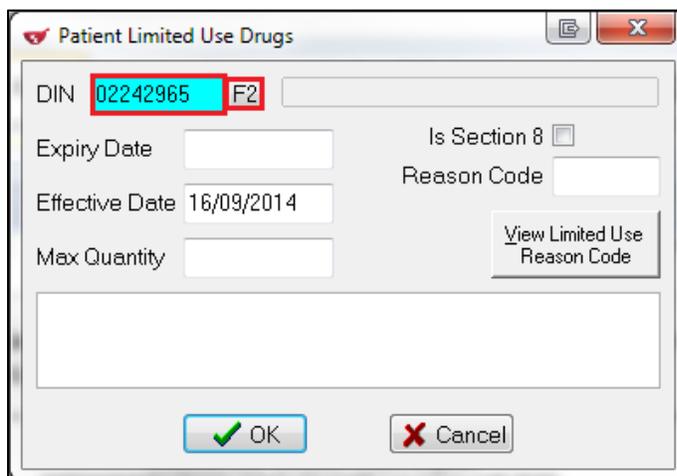
4. Click **View Limited Use Reason Code**. A list of reason codes that apply to the selected drug will appear. Select the appropriate reason code and click **OK**.
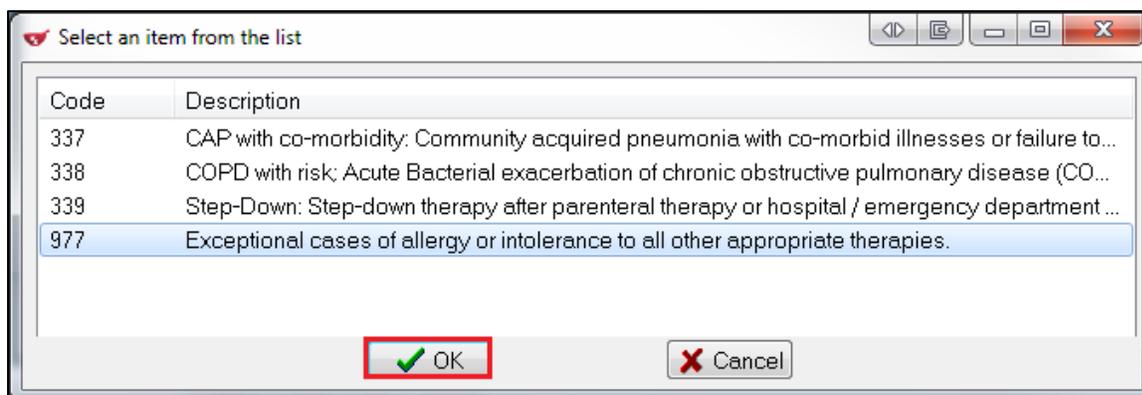
5. A **Reason Code** will populate in the **Patient Limited Use Drugs** form. Click **OK** to close the form.

Filling a Prescription for an Limited Use Drug

1. Enter the prescription as per usual. When you click **F12 - Fill Rx**, a prompt will appear informing you that you are filling an exception drug.
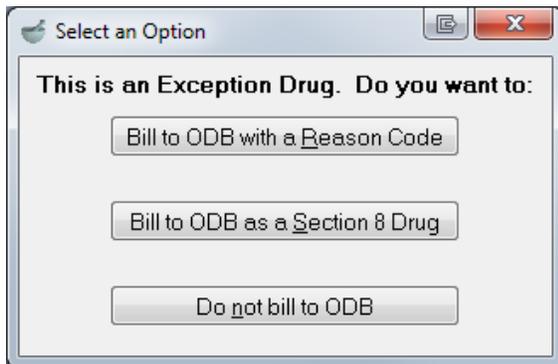
2. Select **Bill to ODB with a Reason Code**. If the prescription is covered by Section 8, select **Bill to ODB as a Section 8 Drug**.

3. Select the appropriate Limited Use Code and click **OK**.
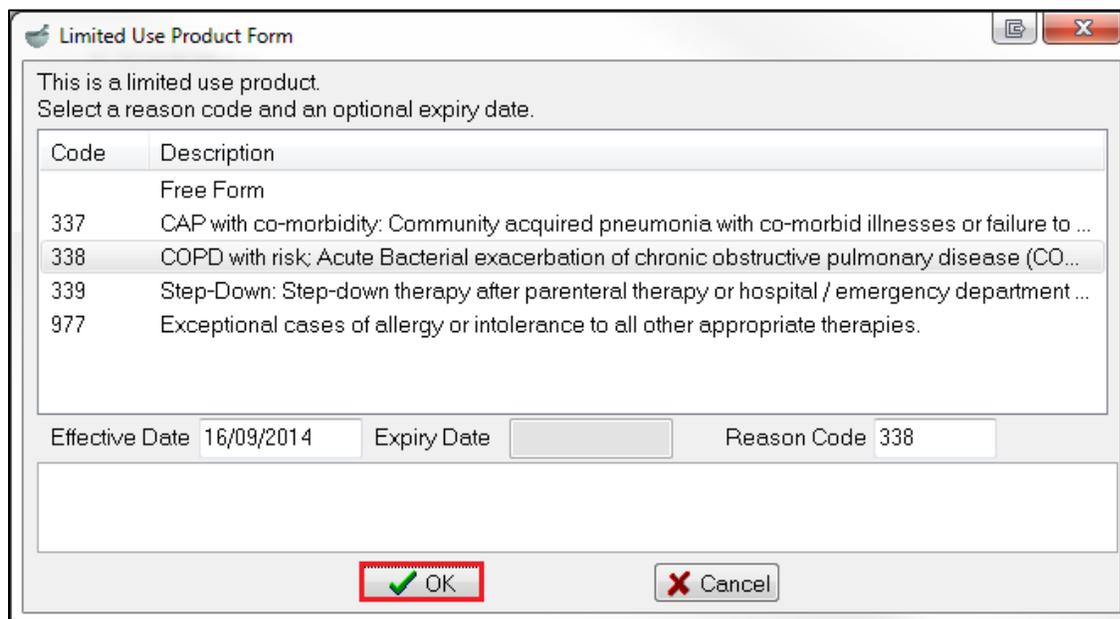
The Limited Use Code will appear in the **Plans** tab on the **F12** screen:
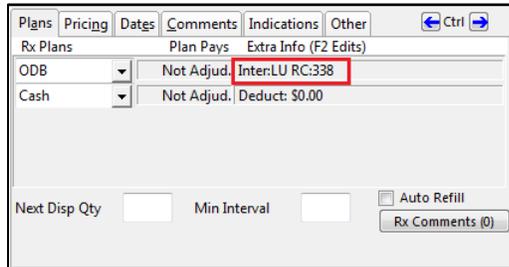
Limited Use Request Report

A Limited Use Request that can be printed and faxed to the doctor if an ODB patient has prescription for a drug that is covered by ODB under LUP and the doctor did not indicated the appropriate LUP code on the Rx.

Method 1: From the Alt-X Start Screen

1. Go to **Reports** > **Patient** > **Limited Use Request**.

2. The **Limited Use Request** form will appear.

Method 2: From the Patient Profile

1. Call up the **F3 - Patient** screen for the selected patient and select **All Rxs** from the right navigation pane.

2. Use the spacebar to highlight the Rx you want to generate the Limited Use Request for.

3. Select **Extra Functions** > **Limited Use Request**.

4. The **Limited Use Request** form will appear. **Rx Info** will be checked by default with all other fields greyed out. This ensures the report only includes information that has been entered for the selected Rx.
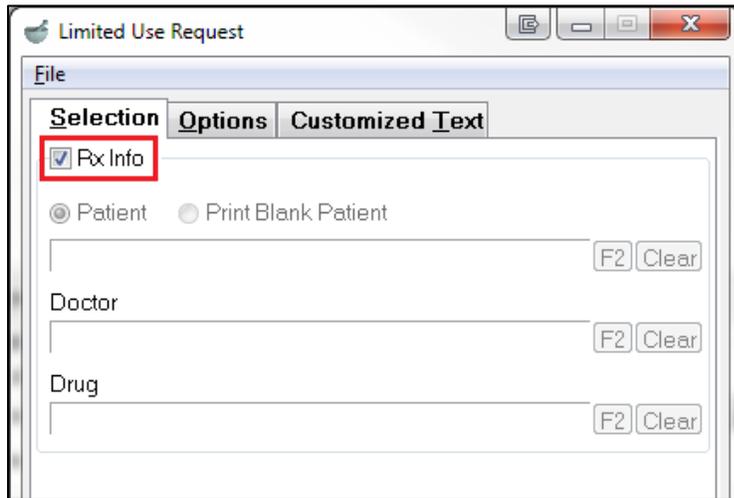
If you uncheck **Rx Info**, the **Patient**, **Doctor**, and **Drug** field become available.
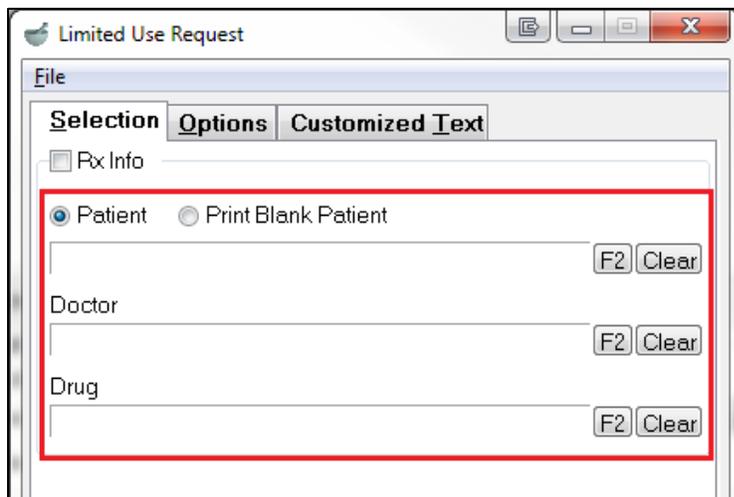
Selection tab

The **Selection** tab allows you to specify the patient, doctor, and drug to be included in the report. Click the **F2** button next to the respective field(s) to perform a search and make a selection. Click **Clear** to remove a selected item.

Select **Print Blank Patient** if you do not want any patient information to appear in the report.

Options tab

The **Options** tab allows you to specify the appearance of the report. Place a checkmark next to the items you want printed in the report.
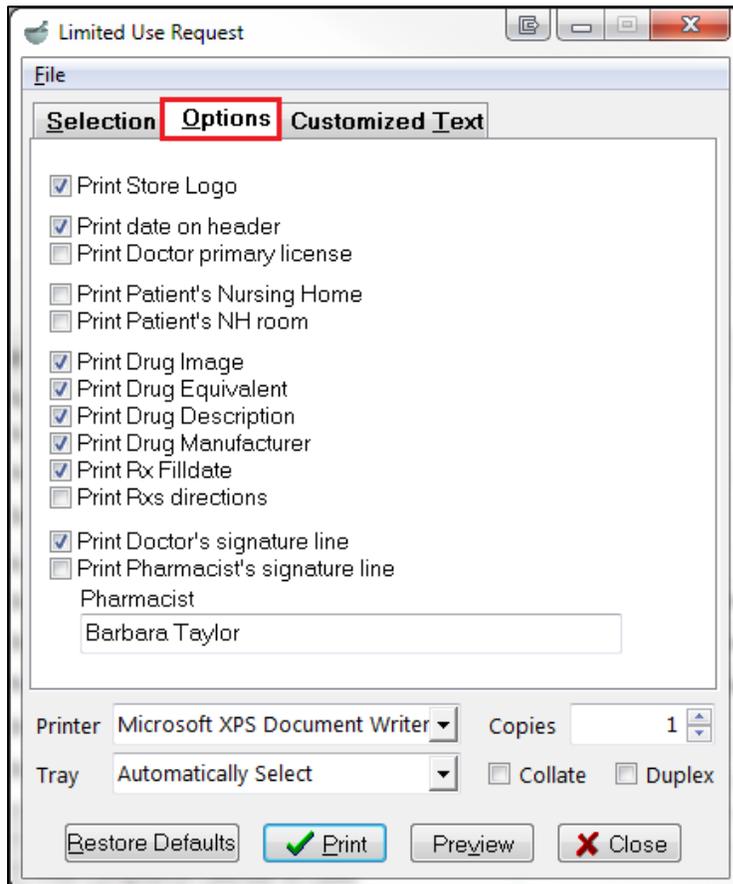
Customized Text tab

The **Customized Text** tab contains editable text that is printed in the first and second sections of the report. Place a checkmark next to **First Section** and/or **Second Section** to include the entered text in the report.
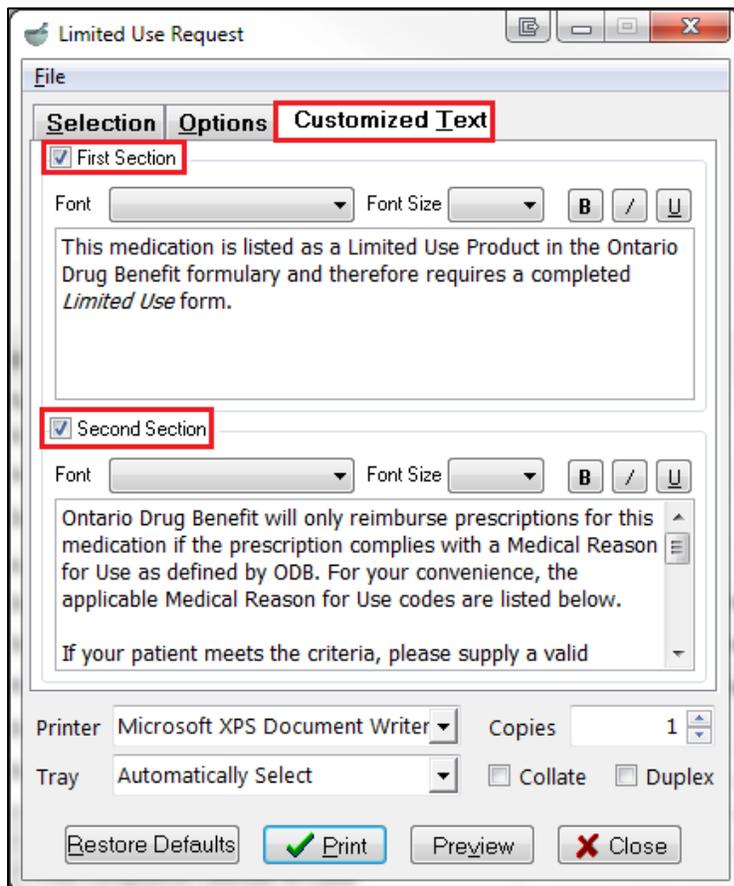
Click **Preview** to preview the report or **Print** to print.

Sample Limited Use Request Report

Kroll Pharmacy

Greenwoods way Edmonton , AB   J4J 4J4
Phone: (780) 555-5555 Fax: (780) 444-4444

Dr. Drake   Oct 06, 2014

- ON   N5A 3H5
Office: 273-4550

Dr. Zhang:

You have prescribed the following medication for your patient **Jane Doe**

This medication is listed as a Limited Use Product in the Ontario Drug Benefit formulary and therefore requires a completed *Limited Use* form.

DIN:	02238682		
Brand Name:	Plavix		
Generic Name:	Clopidogrel Bisulfate	Description:	Salmon Round Tab 75
Strength:	75mg	Manufacturer:	SAV
Drug Form:	TAB (Film-coated Tablet)		

Ontario Drug Benefit will only reimburse prescriptions for this medication if the prescription complies with a Medical Reason for Use as defined by ODB. For your convenience, the applicable Medical Reason for Use codes are listed below.

If your patient meets the criteria, please supply a valid prescription ensuring the appropriate *Limited Use* code is clearly written and forward back to our pharmacy as soon as possible:

- Patient Name   - Medical Reason for Use Code
- Date   - Doctor Signature
- DrugName   - CPSO #

We appreciate your prompt asistance in this matter. Thank you.

Pharmacist: _____
                              April

Medical Reason for Use Codes:

375   For patients immediately post-hospitalization for Acute Coronary Syndrome (ACS), in combination with ASA. ACS is defined as any mycocardial infarction (MI) or unstable angina (UA).

376   For patients immediately pre- or post- percutaneous coronary intervention (PCI). *Therapy may be initiated up to 10 days prior to PCI.

411   For patients who experience a stroke or transient ischemic attack while taking Aggrenox (dipyridamole & ASA) or ASA alone; or For patients experiencing ongoing severe symptomatic peripheral vascular disease (i.e. with Ankle Brachial Index < 0.5) after a vascular event while on ASA. ASA should not be used concomitantly; or For patients requiring ASA with documented severe allergy to ASA, such as anaphylactic reaction or bronchospasm. Gastrointestinal events, including GI bleeds, are excluded.

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