Frequently Asked Questions for Health Care Providers: Dispensing of Mifepristone/misoprostol (Mifegymiso) and Claims Submission using the Health Network System

Updated December 7, 2017

This document replaces the versions originally posted on August 3, 2017 and September 11, 2017.

Overview
This notice is to provide information to health care providers (i.e., pharmacists and dispensing physicians) about claim submissions reimbursement for Mifepristone/misoprostol (Mifegymiso) using the ministry’s Health Network System (HNS).

On August 10, 2017, Ontario began publicly funding the drug Mifegymiso (combination mifepristone/misoprostol). All Ontarians with a valid Ontario health card number and a valid prescription are eligible for mifepristone/misoprostol (Mifegymiso). This includes Ontario Drug Benefit (ODB) Program recipients and non-ODB recipients.

On November 7, 2017, Health Canada issued an information update regarding changes to the different requirements and steps that are needed to prescribe, order, stock, and/or dispense mifepristone/misoprostol (Mifegymiso). The information update is available at:


The Health Canada notice updates the Product Monograph and Risk Mitigation Plan for Mifegymiso to extend the approved gestational age to nine weeks (63 days) into a pregnancy, rather than the previous limit of seven weeks (49 days). The notice also updates the dispensing requirements and removes the requirement for mandatory prescriber education and pharmacist and prescriber registration with the manufacturer.

Questions & Answers

1. When are dispensers able to receive reimbursement for dispensing Mifepristone/misoprostol (Mifegymiso) for Ontarians?

   **As of August 10, 2017**, accredited pharmacies and dispensing physicians with billing accounts for the HNS are eligible to receive reimbursement for dispensing Mifepristone/misoprostol (Mifegymiso). This is in accordance with ministry policies and their HNS subscription agreement.

2. What reimbursement information on Mifepristone/misoprostol (Mifegymiso) is available to dispensers?

   The Drug Identification Number (DIN) listed in the table is to be used for all Ontarians, regardless of eligibility for the Ontario Drug Benefit (ODB) Program.

   **Table 1: DIN to support reimbursement of Mifepristone/misoprostol (Mifegymiso)**

<table>
<thead>
<tr>
<th>DIN</th>
<th>Description</th>
<th>Total Amount Reimbursed (includes mark-up and dispensing fee)</th>
</tr>
</thead>
<tbody>
<tr>
<td>02444038</td>
<td>Mifepristone /misoprostol (Mifegymiso)</td>
<td>$337.2500</td>
</tr>
</tbody>
</table>

**Patient Eligibility**

3. Who is eligible for publicly-funding Mifepristone/misoprostol (Mifegymiso)?

   All Ontarians with a valid Ontario health card number and a valid prescription are eligible for Mifepristone/misoprostol (Mifegymiso).

   This includes ODB recipients and non-ODB recipients.
Claims for Payment through HNS and Ministry Payment

4. How are claims for Mifepristone/misoprostol (Mifegymiso) submitted through the HNS?

HNS claims for publicly funded Mifepristone/misoprostol (Mifegymiso) must contain the appropriate DIN of the drug that was dispensed to the patient.

Pharmacists must ensure the patient’s correct date of birth, health card number and name (as it appears on the health card) are entered accurately as part of the HNS claims submission.

5. What is the procedure to submit the claim to the HNS for publicly funded Mifepristone/misoprostol (Mifegymiso) for an ODB-eligible patient?

The claim submission follows the normal process for submitting claims on the HNS with the following additional information:

- Intervention code ‘PS’: (Professional Care Services)
- Drug Identification Number (DIN): 02444038
- Valid Pharmacist ID
- Professional Fee: $337.2500 (includes mark-up and dispensing fee)

6. What is the procedure to submit the claim to the HNS for a publicly funded Mifepristone/misoprostol (Mifegymiso) for a non-ODB-eligible patient?

When submitting a claim for a person who does not have ODB coverage, pharmacists must submit the following information:

- Patient Gender: ‘F’ = female
- Patient Date of Birth: Valid YYYYMMDD
- Patient’s Ontario Health Card number
- Intervention codes:
  - PS: Professional Care Services
  - ML: Established eligibility coverage (i.e., 1 day of the Plan ‘S’ coverage)
- Carrier ID: ‘S’
- Drug Identification Number (DIN): 02444038
• Valid Pharmacist ID
• Professional Fee: $337.2500 (includes mark-up and dispensing fee)

7. How does the ministry pay a claim to a pharmacy for dispensing Mifepristone/misoprostol (Mifegymiso)?

The payment is paid through the ministry’s HNS to the accredited pharmacy or dispensing physician that has a billing account with the ministry.

8. Can I submit manual (paper) claims for Mifepristone/misoprostol (Mifegymiso)?

Claims must be submitted online to the HNS, only.

These claims must include the following intervention codes:
• PS: Professional Care Services
• ML: Established eligibility coverage (i.e., 1 day of the Plan ‘S’ coverage)

9. When does the pharmacist submit the claim for payment for dispensing Mifepristone/misoprostol (Mifegymiso)?

Pharmacists should submit the claim on the same day of the dispensing Mifepristone/misoprostol (Mifegymiso).

Pharmacy Participation

10. Will all pharmacies have to participate in dispensing publicly funded Mifepristone/misoprostol (Mifegymiso) to Ontarians?

All pharmacies with valid HNS agreements and connected to the HNS may submit claims for payment for supplying Mifepristone/misoprostol (Mifegymiso) to eligible Ontarians with a valid prescription.

Pharmacists who have a religious or conscientious objection to Mifepristone/misoprostol (Mifegymiso) are required to comply with any policies or other professional expectations set out by the Ontario College of Pharmacists (OCP), such as the Code of Ethics and Professional Obligations when Declining to Provide a Pharmacy Product or Service due to Conscience or Religion Guideline.
Documentation and Record Keeping

11. What is the pharmacist required to document when dispensing Mifepristone/misoprostol (Mifegymiso) to eligible Ontarians?

Standard dispensing record keeping requirements under current standards of practice apply.

Pharmacists must keep records consistent with their obligations under the Pharmacy Act, 1991, the Drug and Pharmacies Regulation Act, and any further instructions provided by the OCP or the ministry.

Please refer to the applicable professional colleges for guidance relating to documentation requirements.

12. How long should the record be kept for billing purposes?

Pharmacy documentation must be maintained in a readily available format for the purpose of the ministry audit for a minimum of 2 years.

Restrictions

13. Are there any restrictions for Mifepristone/misoprostol (Mifegymiso) claims?

Only Mifepristone/misoprostol (Mifegymiso) that is dispensed pursuant to a valid prescription and in accordance with Ministry policies will be reimbursed. See Table 1 in question 2 above for the “Total Amount Reimbursed”.

14. I work in a hospital in-patient pharmacy; can I submit claims for reimbursement?

No. The cost of Mifepristone/misoprostol (Mifegymiso) dispensed from hospital in-patient pharmacies must be covered through the hospital’s budget.

Additional Questions

15. Is there a limit on quantity of drug that can be dispensed with each prescription?

No, however prescribers are encouraged to contact their respective regulatory college for more information and guidance regarding such a prescription.

16. Is there any additional follow-up or care required when dispensing Mifepristone/misoprostol (Mifegymiso)?
Providers are encouraged to contact their respective regulatory college for more information and guidance.

17. I am having trouble putting the claim through. Who should I contact?

If pharmacies have any questions or concerns related to billing issues, please contact the ODB Help Desk at 1-800-668-6641.