Manitoba
Health, Seniors and Active Living

Information for Pharmacists

Notice – Approved Compounds for Pain Management

January 19, 2018

- This Notice is being sent to all pharmacies to provide further clarification and information on approved compounds for Pain Management. On page 2 of this Notice, PIN numbers are provided for specific pain management compounds; these compounds do not require approval from EDS or approval using a Compound Exception Form.

- Please refer to the Claims Submission Procedure – Extemporaneous Products (Compounding) for guidance on submitting a claim for an extemporaneous product. The pharmacy must enter 1) Drug Cost under the appropriate PIN and 2) a professional fee less than or equal to $30 beginning August 18, 2017(amount regularly charged to persons responsible for paying the professional fee without reimbursement).

- The appropriate Claims Submission Procedure should be followed for any other compounds not referenced below.

- We would ask all pharmacists to review the documents and webinars posted on the Information for Health Professionals webpage at: http://www.gov.mb.ca/health/pharmacare/healthprofessionals.html

- Clinically effective concentrations for drugs that are benefits on the Manitoba Drug Benefits Formulary are as follows and MUST be present in clinically effective concentrations for the compound to be eligible:
  - Ketamine (5 - 15%)
  - Amitriptyline (2 - 10%)
  - Ketoprofen (>5%)
  - Baclofen (2 - 5%)
  - Clonidine (0.1 - 0.3%)
  - Nifedipine (2 - 16%)
  - Amitriptyline (2 - 10%)
  - Gabapentin (4 - 10%)
  - Diclofenac (>5%)

  Other active ingredients not listed above may be considered and will be evaluated as required.

- In selecting a transdermal base, the pharmacist must assess the chemical and physical properties of each and compatibilities with each Active Pharmaceutical Ingredient (API) and ensure stability is always balanced with the suitability for the patient and site of application.

- The following compounds do not require prior approval.

Compound	Billing PIN
Diclofenac 10% + Tetracaine 5% in a suitable transdermal base	00911500
Ketorolac 10% + Tetracaine 5% in a suitable transdermal base	00911503
Note: the addition of Baclofen (2 - 5%) and/or CMO and/or DMSO to either of the above is acceptable	
Diclofenac 8% + Baclofen 2% + Tetracaine 2% in a suitable transdermal base	00911506
Diclofenac 8% + Baclofen 5% + Tetracaine 5% in a suitable transdermal base	00911509
Note: the addition of Amitriptyline and/or CMO and/or DMSO to either of the above is acceptable	
Ketamine 10% + Morphine 1% + Amitriptyline 2% + Lidocaine 5% in a suitable transdermal base	00911512
Ketamine 10% + Morphine 1% + Amitriptyline 5% + Lidocaine 5% in a suitable transdermal base	00911515
Note: the addition of DMSO to either of the above is acceptable	
Ketamine 10% + Morphine 1% + Gabapentin 6% + Amitriptyline 2% + Tetracaine 5% in a suitable transdermal base	00911518
Loperamide 10%, Morphine 1% + gabapentin 6% + Amitriptyline 2% + Tetracaine 5% in a suitable transdermal base	00911521
Note: the addition of DMSO is acceptable	

REMINDER: Pharmacies do NOT receive drug interaction information when submitting claims using PINs. Please review all claims carefully prior to submitting.

- Prescriptions that contain a Proprietary Base (eg. PCCA and Medisca) can be substituted at the discretion of the compounding pharmacist for another base with equivalent transdermal properties. The following transdermal bases are considered eligible benefits: Versa Cream, VersaPro Cream, Diffusimax, PHLOGEL, PLO Transdermal Cream Bases, Lipo Cream, and Lipoderm Cream.

Special Requests (Case-By-Case) and Requests for Consideration of Benefit Coverage

- Ineligible compounds (eg. mouth rinses) associated with treatment being received through CCMB will be considered on a case-by-case basis. The pharmacist should complete a Special Authority Compound Worksheet and note that the prescriber is associated with CCMB.

- Prescribers may submit a request to Manitoba to review the clinical- and cost-effectiveness of any exceptions to the above.

    - To request consideration for a compound to be designated as a benefit for all Manitobans, the prescriber may write to the Provincial Drug Programs. This letter should include (as appropriate):
        - Compounding recipe and overview of each ingredient;
        - Current clinical information and comparative clinical studies;
        - Position in therapy of the compound as defined in clinical practice guidelines;
        - Description of the costs and value (per patient);
        - Requested coverage (place in therapy, initiation and continuation/renewal criteria including duration of therapy, discontinuation criteria, etc.)
        - A declaration (in form and content acceptable to Manitoba) that the recipe and all information can be publically disclosed.

    - To request special consideration for coverage on a case-by-case basis, the prescriber may write to the Provincial Drug Programs Review Committee (PDPRC), based upon the unique circumstances of the patient and alternative treatments tried.
        - Additional information on the Provincial Drug Programs Review Process and requirements can be found at: https://www.gov.mb.ca/health/mdbif/docs/edsnotice.pdf.

If your questions are not answered by reviewing the Claims Submission Procedures and FAQs posted at:
https://www.gov.mb.ca/health/pharmacare/healthprofessionals.html

Please send an e-mail to PDPInfoAudit@gov.mb.ca.