Number 793 • March 2019

OHIP+ Program Changes

The Ontario government announced that the OHIP+ program is changing. Effective April 1, 2019, OHIP+ will no longer provide coverage for those Ontario children and youth who have drug coverage through a private insurance plan. Alberta Blue Cross will revert back to covering eligible medications that were previously covered by OHIP+ for our plan members with Alberta Blue Cross coverage. Plan member benefit eligibility will continue to be applied, such as co-pays, deductibles and maximums. If the plan member's drug claim is not an eligible benefit under their Alberta Blue Cross plan, the member will be responsible for the out of pocket expense.

There will be a transition process for prescription drug benefits that were previously approved under the Exceptional Access Program (EAP) of OHIP+. If the plan member had previous Alberta Blue Cross special authorization approval in place prior to January 1, 2018, our Clinical Drug Services department will contact them to determine if the medication is still required and then facilitate continuous coverage on the Alberta Blue Cross plan if necessary.

If there was no existing Alberta Blue Cross special authorization prior to January 1, 2018, the plan member will need to provide proof of prior EAP OHIP+ coverage using the attached transition form, along with the corresponding pharmacy receipt, via fax (1-877-828-4106 toll free), email **abctc@ab.bluecross.ca** or mail to Alberta Blue Cross Clinical Drug Services, 10009 – 108 Street NW Edmonton, AB, T5J 3C5. Proof of prior EAP OHIP+ coverage needs to be provided before September 30, 2019, in order to receive continuous coverage for drugs that require Special Authorization on the Alberta Blue Cross plan.

The plan member will receive information from our Clinical Drug Services department about how long their continuous coverage will remain in effect and the prescribing physician will need to submit a Special Authorization renewal request before the continuous coverage expires.

When you have questions:

For assistance with benefit or claim inquiries, please contact an Alberta Blue Cross Pharmacy Services Provider Relations contact centre representative at:

780-498-8370 (Edmonton and area) • **403-294-4041** (Calgary and area) • **1-800-361-9632** (toll free) **FAX 780-498-8406** (Edmonton and area) • **FAX 1-877-305-9911** (toll free)

Alberta Blue Cross offers online access to current Pharmacy Benefacts and supplemental claiming information to assist with the submission of your direct bill drug claims. **Visit ab.bluecross.ca/providers/pharmacy-home.php**





PHARMACY CONFIRMATION - OHIP+ TRANSITION OF EAP CLAIMS

Where OHIP+ has previously paid claims for a drug,

- 1. submit the claim electronically to the insurer on or after April 1, 2019 to determine if Prior Authorization (PA) is required.
- 2. If required, complete this form, print and affix patient receipt, showing payment of this drug by OHIP+ (dated prior to April 1, 2019) and return to the patient for submission to their insurer.
- 3. Please allow time for processing. Submission of this form is not a guarantee of

coverage.	ormodor or and rorm to not a guarantee or
DATE:	
Section 1: To be completed by Pharmacis	t.
Drug Name and DIN number:	Drug Dosage and frequency:
EAP Expiry date (OHIP+) for this drug (if	Signature of Pharmacist:
known):	
Pharmacy Telephone Number:	Carrier No:
r narmacy relephone Number.	Carrier No.
Policy or Group number:	Certificate number:
I oney or Group humber.	Certificate number.
Section 2: To be completed by Plan Meml	ber or Pharmacist:
Patient's Name (First, Last)	Patient's Date of Birth (DD/MM/YYYY)
Dian Mambar'a Nama (First Lost)	Signature of Dationt/Cuardian:
Plan Member's Name (First, Last)	Signature of Patient/Guardian:
Plan Member Signature:	Relationship to Patient:
	(member/spouse/dependent)
Are you enrolled in a Patient Support Progra	_ am?
☐ Yes ☐ No * If yes state which program:	
Affix pat	ient receipt here.