

**FEES AND CLAIMS DATA FOR GOVERNMENT-SPONSORED PHARMACIST SERVICES, BY PROVINCE
(UPDATED SEPTEMBER 2014)**

	BRITISH COLUMBIA	ALBERTA	SASKATCHEWAN	MANITOBA	ONTARIO	QUEBEC	NOVA SCOTIA	NEW BRUNSWICK	PRINCE EDWARD ISLAND	NEWFOUNDLAND/LABRADOR
Patient care plans		\$100 per Comprehensive Annual Care Plan (CACP, 87,915 claims); \$125 for pharmacists with additional prescribing authority (APA, 15,044 claims); \$60 per Standard Medication Management Assessment (SMMA, 29,814 claims); \$75 if pharmacist has APA (3,243 claims); \$20 for follow-ups without APA (3,159 claims for SMMA follow-ups; 18,501 claims for CACP follow-ups); \$25 for follow-ups with APA (838 claims for SMMA follow-ups; 7,552 claims for CACP follow-ups)								
Medication reviews/management	\$60 per Medication Review - Standard (127,489 claims); \$70 per Medication Review - Pharmacist Consultation (12,910 claims); \$15 per Medication Review Follow-Up (9,712 claims)	Medication reviews a component of CACPs and SMMA's	\$60 per Medication Assessment Program Program, Follow-up maximum two per year (8,898 claims; followup 1,253 claims)		\$60 per MedsCheck annually (777,918 claims); \$75 for MedsCheck for Diabetes annually (213,562 claims); \$90 for MedsCheck for Long-Term Care annually (68,582 claims); \$150 for MedsCheck at Home annually (29,795 claims); \$25 per annual follow-up (203,823 claims for MedsCheck; 60,924 claims for MedsCheck for Diabetes); \$50 per quarterly follow-up for MedsCheck for Long-Term Care (210,974 claims)		\$52.50 per Basic Medication Review (7,619 claims); \$150 per Medication Review Service for insured seniors (417 claims)	\$52.50 per PharmaCheck for low income seniors (12,589 claims from April 1, 2013 to March 31, 2014)	\$52.50 per Medication Review (3888 claims); \$65 per Diabetic Medication Review (1,824 claims); \$20 per quarterly follow-up for Medication Reviews (83 claims); \$25 per quarterly follow-up for Diabetic Medication Reviews (47 claims)	\$52.50 per Medication Review; \$52.50 per Medication Review for Diabetes; \$52.50 per Medication Review for COPD (over age 65)
Immunization	\$10 (2012 claims data [2013 not available at time of printing]: 117,100 claims for flu shots; 2,602 claims for pneumonia; 9,594 claims for pertussis)	\$20 (360,000 claims for flu shots; 53,355 claims for "other" immunizations)		Authority to immunize but no funding to date	\$7.50 (764,000 claims for flu shots)		\$11.50 for flu shots (78,152 claims)	\$12 (40,479 claims for flu shots)	U&C fee (\$12.18) for flu shots; authority to immunize again other infectious diseases pending regulations, and no funding to date	Authority to immunize against infectious diseases pending; no funding to date
Administration of drugs by injection		\$20 per assessment and administration of medications by injection, excluding travel vaccines		Authority to administer drugs by injection; no funding to date	Authority to administer drugs by injection but no funding to date	Authority to administer drugs to demonstrate appropriate use pending under Bill 41	Authority to administer drugs by injection; no funding to date	Authority to administer drugs by injection but no funding to date	Authority to administer drugs by injection pending regulations; no funding to date	
Adaptation/altering of prescriptions, including continuity of care and renewals	\$10 to renew and \$17.20 to adapt (169,228 claims)	\$20 per assessment for renewal/adaptation/discontinuation (350,700 claims for renewals; 82,313 claims for adaptations)	\$6 per Renewal/Alter Dosage (3,000 claims)	Authority for continuity of care prescribing and prescription adaptations; no funding to date	Authority to adapt or renew but no funding to date	Authority to adapt pending under Bill 41	\$14 per Prescription Adaptation (2,161 claims)	Authority to adapt or renew but no funding	\$25 per compliance packaging (per 28 days); \$14.20 per adaptation (268 claims)*	\$10.90 per Medication Management adaptation
Refusals to fill	2 times U&C fee	\$20 per assessment (4,665 claims)	1.5 times U&C fee (25 claims)		\$15 (part of Pharmaceutical Opinions program) (12,509 claims)	\$8.78 (58,174 claims)	\$14 (162 claims)		\$14.20 (7 claims)*	\$21.80
Therapeutic substitutions	\$17.20 (6,562 claims)	\$20 per assessment (claims included under adaptation)				Authority to substitute pending under Bill 41	\$26.25 but not yet in effect	Authority to substitute but no funding to date	\$14.20 (10 claims)*	
Minor ailments		As part of CACPs, SMMA's or initial-access prescribing	\$18 per Minor Ailment Assessment (7,501)	Authority to assess and prescribe for self-limiting conditions ("minor ailments") but no funding to date.		Authority to assess and prescribe for minor ailments pending under Bill 41	Authority to assess and prescribe for minor ailments but no funding to date	Authority to assess and prescribe for minor ailments; no funding to date	Authority to assess and prescribe for minor ailments pending regulations; no funding to date	
Initial-access prescribing or to manage ongoing therapy		\$25 per assessment for initiating medication therapy with APA (24,751 claims)		Authority for extended practice prescribing by extended practice pharmacists within the scope of their specialty; no funding to date	Authority to initiate Schedule 1 smoking cessation therapy; see below for funding details for smoking cessation services	Authority to prescribe a medication for which no diagnosis necessary pending under Bill 41				
Pharmaceutical opinions		As part of CACPs, SMMA's or trial prescriptions			\$15 per opinion "Not filled as prescribed" (98,184 claims); \$15 for "No change to prescription" (80,202 claims); \$15 for "Change to prescription" (221,549 claims) ; for beneficiaries of provincial drug plan only	\$19.40 (81,124 claims)				
Trial prescriptions		\$20 per assessment of appropriateness of new prescription medication								
Smoking cessation		As part of SMMA's and follow-up SMMA's; maximum of four follow-ups	Up to \$300 annually (\$2 per minute) for Partnership to Assist with the Cessation of Tobacco (PACT) (7,927 claims)	Cognitive service programs, including smoking cessation, but no funding to date	Up to \$125 annually for beneficiaries of provincial drug plan: \$40 for initial consult; \$15 for up to 3 primary follow-up; \$10 for up to 4 secondary follow-ups					
Emergency prescription refills	Authority for emergency refills; no funding to date	\$20 per assessment (29, 521 claims)	\$10 (max 1 claim per patient per 28 days) (6,435 claims)	Authority for emergency refills; no funding to date	Authority for emergency refills; no funding to date		Authority for emergency refills; no funding to date	Authority for emergency refills; no funding to date		Authority for emergency refills; no funding to date

* Data current as of September 1, 2014 and collected from provincial ministries of health and pharmacy associations. Where possible, most recent claims data for fiscal year indicated in parentheses; claims data for fiscal year pending. Fiscal year end is March 31 for all provinces except Alberta, where it is July 1.
Note: Pharmacists in Saskatchewan can also submit claims for emergency contraception prescribing (billed at 2 times the U&C fee) and medications reconciliation (billed at \$25). Pharmacists in Quebec can submit claims for emergency contraception prescribing (billed at \$17.67) *PEI: for final four months of year-end 2013-2014