

**FEES AND CLAIMS DATA FOR GOVERNMENT-SPONSORED PHARMACIST SERVICES, BY PROVINCE (UPDATED SEPTEMBER 2017)**

 NOTE: All content in **RED** indicates that public funding is available only to eligible beneficiaries of the provincial drug plan.

	BRITISH COLUMBIA	ALBERTA	SASKATCHEWAN	MANITOBA	ONTARIO	QUEBEC*	NOVA SCOTIA	NEW BRUNSWICK	PRINCE EDWARD ISLAND	NEWFOUNDLAND/LABRADOR
<b>Patient care plans</b>		\$100 per Comprehensive Annual Care Plan (CACP, 130,378 claims); \$125 for pharmacists with additional prescribing authority (APA, 123,506 claims); \$60 per Standard Medication Management Assessment (SMMA, 38,770 claims); \$75 if pharmacist has APA (36,364 claims); \$20 for follow-ups without APA (373,447 claims for CACPs, 47,140 for SMMAAs); \$25 for follow-ups with APA (463,930 claims for CACPs, 56,136 for SMMAAs )								
<b>Medication reviews/management</b>	\$60 per Medication Review - Standard, max. 2 annually, 6 mths apart (177,114 claims); \$70 per Medication Review - Pharmacist Consultation, max. 2 annually, 6 mths apart (17,794 claims); \$15 per Medication Review Follow-Up, max. 4 annually (19,235 claims)	Medication reviews a component of CACPs and SMMAAs (see Patient care plans above)	<b>\$60 per Medication Assessment (seniors) (11,795 claims); \$20 per follow-up, max. 2 annually (3,465 claims) \$60 per Medication Assessment and Compliance Packaging (1,845 claims)</b>		\$60 per MedsCheck (543,902 claims); \$75 for MedsCheck for Diabetes (163,168 claims); \$90 for MedsCheck for Long-Term Care Annual (69,833 claims); \$150 for MedsCheck at Home (24,799 claims); \$25 per follow-up (163,242 claims for MedsCheck; 44,308 claims for MedsCheck for Diabetes Education); \$50 per quarterly follow-up for MedsCheck for Long-Term Care Quarterly (198,510 claims)		<b>\$52.50 per Basic Medication Review (3,728 claims); \$150 per Medication Review Service (seniors) (669 claims); \$20 for follow-ups, max. 2 annually (118 claims)</b>	<b>\$52.50 per PharmaCheck (low-income) (12,318 claims)</b>	<b>\$52.50 per Medication Review (2,130 claims); \$65 per Diabetic Medication Review (948 claims); \$20 per follow-up for Medication Reviews, max. 4 annually (1,047 claims); \$25 per follow-up for Diabetic Medication Reviews (369 claims), max. 4 annually</b>	<b>\$52.50 per Medication Review (seniors); \$52.50 per Medication Review for Diabetes (all ages); max. 72 claims annually; (1,629 claims)</b>
<b>Immunization</b>	\$10 (557,533 claims for flu; 13,156 claims for pneumonia; 655 claims for pertussis; 620 claims for HPV; 11,218 claims for other)	\$20 (533,053 claims for flu); authority for other immunizations, inc. travel vaccines (no public funding)	\$13 (90,374 claims for flu)	\$7 (79,050 claims for flu; data not available for pneumonia, HPV, Tdap [tetanus, diphtheria, pertussis])	\$7.50 (1,010,548 claims for flu); authority for other immunizations, inc. travel vaccines (no public funding)		\$12 (104,170 claims for flu)	\$12 (63,315 claims for flu for seniors and high-risk groups)	\$12.36 (9,280 claims for flu); authority to immunize again other infectious diseases, no public funding	<b>\$13 (3,757 claims for flu)</b>
<b>Administration of drugs by injection</b>		\$20 per assessment and administration of drugs by injection (169,419 claims)	Authority to administer drugs by injection; no public funding	Authority to administer drugs by injection; no public funding	Authority to administer drugs by injection and inhalation for education and demonstration; no public funding	Authority to administer drugs to demonstrate appropriate use; no public funding	Authority to administer drugs by injection; no public funding	Authority to administer drugs by injection; no public funding	Authority to administer drugs by injection; no public funding	Authority to administer drugs by injection; no public funding
<b>Adaptation/altering of prescriptions, including continuity of care and renewals</b>	\$10 to renew and adapt (226,296 claims)	\$20 per assessment for renewal/adaptation/discontinuation (533,393 claims for renewals; 151,679 claims for adaptations)	\$6 to renew, alter dosage form or alter missing information (249,608 claims)	Authority for continuity of care prescribing and prescription adaptations; no public funding	Authority to adapt or renew; no public funding	\$12.50 per renewal (30+ days), max. 1 per person annually (158,358 claims)	<b>\$14 per Prescription Adaptation (293 claims)</b>	Authority to adapt or renew; no public funding	<b>\$14.83 per adaptation (123 claims)</b>	<b>\$11.96-\$12 per Medication Management adaptation (33,918 claims)</b>
<b>Refusals to fill</b>	\$20	\$20 per assessment (8,523 claims)	<b>1.5X dispensing fee, max. \$17.10 (16 claims)</b>		<b>\$15 as part of Pharmaceutical Opinions program</b>	<b>\$8.96 for first 48,500 prescriptions; then \$8.37 (67,444 claims)</b>	<b>\$14 (49 claims)</b>		<b>\$14.83 (14 claims)</b>	<b>\$23.92-\$24 (32 claims)</b>
<b>Therapeutic substitutions</b>	\$17.20 (8,753 claims)	\$20 per assessment (claims included under adaptation)				Authority to substitute for out-of-stocks; no public funding	<b>\$26.25 (366 claims, for proton pump inhibitors only)</b>	Authority to substitute; no public funding	<b>\$14.83 (6 claims for eligible drug classes)</b>	<b>\$11.96-\$12</b>
<b>Emergency prescription refills</b>	Authority for emergency refills; no public funding	As part of prescription renewals	\$10, max. 1 claim per patient per 28 days (claims data n/a)	Authority for emergency refills; no public funding	Authority for emergency refills; no public funding		Authority for emergency refills; no public funding	Authority for emergency refills; no public funding		<b>\$11.96-\$12</b>
<b>Minor ailments</b>		As part of CACPs, SMMAAs by those with additional prescribing authority	\$18 per Minor Ailment Assessment for 16 conditions (14,512 claims)	Authority to assess and prescribe for 12 self-limiting conditions ("minor ailments"); no public funding		\$16 per assessment for 7 conditions where no diagnosis is required and for 12 where diagnosis and treatment are known (107,666 claims)	Authority to assess and prescribe for 31 conditions; no public funding	Authority to assess and prescribe for minor ailments; no public funding	Authority to assess and prescribe for 30 conditions; no public funding	Authority to assess and prescribe for minor ailments; no public funding
<b>Initial-access prescribing or to manage ongoing therapy (exc. minor ailments)</b>		\$25 per assessment for initiating medication therapy with APA (206,395 claims) \$20 per assessment for emergency prescriptions (26,777 claims)	Collaborative Practice Agreements with physicians enable pharmacists to select, initiate, monitor and modify drug therapies; no public funding	Authority for prescribing by Extended Practice pharmacists within the scope of their specialty; no public funding. Authority to prescribe in "state of emergency;" no public funding	Authority to initiate Schedule 1 smoking cessation therapy; see below for funding details for smoking cessation services	To reach therapeutic target: \$15.50-\$19.50 for initial evaluation (based on condition); \$40 annually for min. 2 follow-ups for certain conditions; \$50 annually for min. 3 follow-ups for insulin-dependent diabetes; \$16 per follow-up for anticoagulation, max. 1/mth. (128,557 claims for all)	Authority to assess and prescribe in emergencies; no public funding	Authority to initiate smoking cessation therapy; no public funding. Authority to assess and prescribe in emergencies; no public funding	Authority to assess and prescribe in emergencies; no public funding	Authority to initiate smoking cessation therapy; no public funding
<b>Pharmaceutical opinions</b>					<b>\$15 per opinion (212,910 claims for "Change to prescription," 96,697 claims for "No change to prescription," 17,501 claims for "Not filled as prescribed")</b>	<b>\$19.79 (198,552 claims)</b>				
<b>Smoking cessation</b>	\$10 per dispensing of nicotine replacement therapy, max. 3 annually (claims data n/a)	As part of SMMAAs and follow-up SMMAAs; max. 4 follow-ups	<b>Up to \$300 annually (\$2 per minute) for Partnership to Assist with the Cessation of Tobacco (PACT) (4,940 claims)</b>	Authority to prescribe for smoking cessation; no public funding	<b>Up to \$125 annually; \$40 for initial consult; \$15 for up to 3 primary follow-ups; \$10 for up to 4 secondary follow-ups (6,288 claims)</b>	\$16 to prescribe for smoking cessation as part of minor ailments (30,423 claims out of total for minor ailments)	Authority to prescribe for smoking cessation as part of minor ailments; no public funding		Authority to prescribe for smoking cessation as part of minor ailments; no public funding	Authority to assess and prescribe for smoking cessation; no public funding
<b>Other services</b>	\$10 for trial prescriptions (claims data n/a)	\$20 for assessment of appropriateness of new prescription medications (trial prescriptions, 19,323 claims)	2X dispensing fee, max. \$22.80 for emergency contraception prescribing (7,721 claims); \$25 for medication reconciliations (seamless care) with prescribing or 1.5X dispensing fee, max. \$17.10 for medication reconciliations; \$7.50 for trial prescriptions; \$3.50/day for Direct Observed Therapy for Hepatitis C drugs; \$3.50/day for methadone managed care		Authority to perform a procedure below the dermis for education and demonstration; no public funding \$70 for naloxone program, initial kit; \$45 for replacement kit (17,543 claims)	\$18.02 for emergency contraception prescribing (107,378 claims)				<b>\$23.92-\$24 for Antibiotic Medication Adherence; \$11.96-\$12 for follow-ups, max. 1 per antibiotic (96,286 claims); \$23.92-\$24 for COPD Medication Adherence; \$11.96-\$12 for follow-ups, max. 2 (163 claims). Authority for trial prescriptions; no public funding</b>

Information current as of September 2017, and collected from provincial ministries of health and provincial pharmacy associations. Claims data are for fiscal year ending March 31, 2017, with the exception of Quebec where the data is for year ending December 2016.

\*In Quebec, legislation requires private insurance plans to pay the same fees as the public plan for pharmacists' services, except for refusals to fill and Pharmaceutical Opinions. This chart gives claims data for the public plan only.