

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
Patient care plans		\$125 per Comprehensive Annual Care Plan (CACP) with additional prescribing authority (APA) or \$100 per CACP without APA (218,510 claims); \$75 per Standard Medication Management Assessment (SMMA) with APA or \$60 per SMMA (35,550 claims); \$25 per follow-up with APA or \$20 (1,074,151 claims for CACPs; 97,948 for SMMA); \$75 with APA or \$60 per SMMA for Diabetes and \$25 with APA or \$20 per follow-up (10,331 claims combined). SEE FOOTNOTE BELOW								
Medication reviews/management	\$60 per Medication Review - Standard, max. 2 annually, 6 mths apart (175,953 claims); \$70 per Medication Review - Pharmacist Consultation, max. 2 annually, 6 mths apart (16,592 claims); \$15 per Medication Review Follow-Up, max. 4 annually (17,540 claims)	Medication reviews a component of CACPs and SMMA's (see Patient care plans above)	\$60 per Medication Assessment (seniors) (11,492 claims); \$20 per follow-up, max. 2 annually (3,152 claims) \$60 per Medication Assessment and Compliance Packaging (1,752 claims)		\$60 per MedsCheck (461,510 claims); \$75 for MedsCheck for Diabetes (95,366 claims); \$90 for MedsCheck for Long-Term Care Annual (68,553 claims); \$150 for MedsCheck at Home (19,461 claims); \$25 per follow-up (86,526 claims for MedsCheck; 13,243 claims for MedsCheck for Diabetes Education); \$50 per quarterly follow-up for MedsCheck for Long-Term Care Quarterly (196,853 claims)		\$52.50 per Basic Medication Review (4,478 claims); \$150 per Medication Review Service (seniors) (1,036 claims); \$20 for follow-ups, max. 2 annually (172 claims)	\$52.50 per PharmaCheck (low-income) (11,075 claims)	\$52.50 per Basic Medication Review (2,383 claims); \$65 per Diabetic Medication Review (943 claims); \$20 per follow-up for Basic Medication Review, max. 4 annually (1,419 claims); \$25 per follow-up for Diabetic Medication Reviews (382 claims), max. 4 annually	\$52.50 per Medication Review (seniors); \$52.50 per Medication Review for Diabetes (all ages); max. 72 claims annually; (1,312 claims in total)
Immunization	\$10 (666,600 claims for flu, 15,072 claims for pneumonia, 16,819 claims for pertussis, HPV and other immunizations)	\$20 (616,625 claims for flu); \$13 for pneumonia, as of Jan-1-2019; authority for other immunizations, inc. travel vaccines SEE FOOTNOTE BELOW	\$13 (118,050 claims for flu)	\$7 (107,162 claims for flu; 1,947 for pneumonia; 1,275 for Tdap; 105 for Td; 23 for HPV) SEE FOOTNOTE BELOW	\$7.50 (1,198,853 claims for flu); authority for other immunizations, inc. travel vaccines		\$12 (124,805 claims for flu); authority for other specific vaccinations	\$12 (72,709 claims for flu for seniors and high-risk groups)	\$12.36 (26,800 claims for flu); authority to immunize again other infectious diseases	\$13 (7,214 claims for flu)
Administration of drugs by injection		\$20 per assessment and administration of drugs by injection (189,228 claims)	Authority to administer drugs by injection	Authority to administer drugs by injection	Authority to administer drugs by injection and inhalation for education and demonstration	\$18.30 per administration of drugs to demonstrate appropriate use	Authority to administer drugs by injection	Authority to administer drugs by injection	Authority to administer drugs by injection	Authority to administer drugs by injection
Prescribing authority: adaptation/altering of prescriptions	\$10 to renew/adapt/change dosage or formulation (239,378 claims)	\$20 per assessment for renewal/adaptation/discontinuation (551,875 claims for renewals; 159,338 claims for adaptations)	\$6 to renew, alter dosage form or alter missing information (total of 277,322 claims for all Rx authority, i.e., renewals/adaptations, emergency prescribing and medication reconciliations with prescribing [see "Prescribing authority: initial access" for details])	Authority for continuity of care prescribing and prescription adaptations	Authority to adapt or renew	\$12.70 per renewal (30+ days), max. 1 per person annually (281,938 claims); \$20.10 per dosage adjustment to ensure patient safety	\$14 per Prescription Adaptation (205 claims)	Authority to adapt or renew	\$14.83 per adaptation (152 claims)	\$11.96-\$12 per Medication Management adaptation (34,381 claims)
Prescribing authority: minor ailments		As part of CACPs, SMMA's by those with additional prescribing authority	\$18 per Minor Ailment Assessment for 16 conditions (16,704 claims) Authority to assess and prescribe for 7 additional conditions	Authority to assess and prescribe for 12 self-limiting conditions ("minor ailments")		\$16.25 per assessment for 9 conditions where no diagnosis is required and for 12 where diagnosis and treatment are known (248,186 claims)	Authority to assess and prescribe for 31 conditions	Authority to assess and prescribe for 32 conditions	Authority to assess and prescribe for 30 conditions	Authority to assess and prescribe for 29 conditions
Prescribing authority: initial access or to manage ongoing therapy (exc. minor ailment)		\$25 per assessment for initiating medication therapy with APA (300,396 claims). \$20 per assessment for emergency prescriptions (19,786 claims). \$20 per assessment for continuity of care during declared "state of emergency" (claims data n/a)	Collaborative Practice Agreements with physicians enable pharmacists to select, initiate, monitor and modify drug therapies; 2X dispensing fee, max. \$22.80 for emergency contraception prescribing (8,251 claims) ; \$25 for medication reconciliations with prescribing (claims inc. under all Rx authority, see "Prescribing authority: adaptation")	Authority for prescribing by Extended Practice pharmacists within the scope of their specialty. Authority to prescribe in "state of emergency"	Authority to initiate Schedule 1 smoking cessation therapy; see below for funding details for smoking cessation services	To reach therapeutic target: \$15.74-\$19.81 for initial evaluation (based on condition); \$40.63 annually for min. 2 follow-ups for certain conditions; \$50.79 annually for min. 3 follow-ups for insulin-dependent diabetes; \$16.25 per month for anticoagulation (236,488 claims for all). \$18.30 for emergency contraception prescribing (110,983 claims)	Authority to assess and prescribe in emergencies. Authority to initiate smoking cessation therapy.	Authority to initiate smoking cessation therapy. Authority to assess and prescribe in emergencies. Authority to assess and prescribe for travel health	Authority to assess and prescribe in emergencies. Authority to initiate smoking cessation therapy.	Authority to initiate smoking cessation therapy
Refusals to fill	\$20	\$20 per assessment (5,053 claims)	1.5X dispensing fee, max. \$17.10 (1 claim)		\$15 as part of Pharmaceutical Opinions	\$9.10 (61,676 claims)	\$14 (14 claims)		\$14.83 (9 claims)	\$23.92-\$24 (2 claims)
Therapeutic substitutions	\$17.20 (8,369 claims)	\$20 per assessment (claims included under adaptation)				\$16.25 per substitution for out-of-stocks	\$26.25 (263 claims, for proton pump inhibitors only)	Authority to substitute	\$14.83 (7 claims for eligible drug classes)	\$11.96-\$12 (regular dispensing fee)
Pharmaceutical opinions					\$15 per opinion (233,714 claims for "Change to prescription," 103,701 claims for "No change to prescription," 18,973 claims for "Not filled as prescribed")	\$20.10 (250,506 claims)				
Smoking cessation	\$10 per dispensing of nicotine replacement therapy, max. 3 annually (140,000 claims)	As part of SMMA's and follow-up SMMA's; max. 4 follow-ups (32,618 claims)	Up to \$300 annually (\$2 per minute) for Partnership to Assist with the Cessation of Tobacco (PACT) (4,630 claims)	Authority to prescribe for smoking cessation	Up to \$125 annually: \$40 for initial consult (2,065 claims); \$15 for each of up to 3 primary follow-ups (2,659 claims); \$10 for each of up to 4 secondary follow-ups (1,494 claims)	\$16.25 to prescribe for smoking cessation as part of minor ailments (56,297 claims)	Authority to prescribe for smoking cessation as part of minor ailments	Authority to initiate smoking cessation therapy	Authority to prescribe for smoking cessation as part of minor ailments	Authority to assess and prescribe for smoking cessation
Other services	\$10 for trial prescriptions (claims data n/a)	\$20 for assessment of appropriateness of new prescription medications (trial prescriptions)	1.5X dispensing fee, max. \$17.10 for seamless care (398 claims); \$7.50 for trial prescriptions; \$3.50/day for Direct Observed Therapy for Hepatitis C drugs (159 claims); \$3.50/day for methadone managed care (69,711 claims)		Authority to perform a procedure below the dermis for education and demonstration; \$10 for initial naloxone kits (50,402 claims for injectable; n/a for intranasal); \$10 for replacement kits (16,824 claims for injectable; n/a for intranasal)	\$9.10 per transmission of patient medication profile (445,729 claims); \$18.30 per naloxone training (2,255 claims); \$18.30 per consultation for medication abortion (18 claims); \$30/week for palliative care service (legislation pending); \$25 per post-hospital medication reconciliation (legislation pending)	\$50/month/patient during pilot for Anti-Coagulation Management Service project (funding until Sept-2019)			\$23.92-\$24 for Antibiotic Medication Adherence; \$11.96-\$12 for follow-ups, max. 1 per antibiotic (85,910 claims); \$23.92-\$24 for COPD Medication Adherence; \$11.96-\$12 for follow-ups, max. 2 (151 claims). Authority for trial prescriptions

FOOTNOTES: Information current as of September 2018, collected from provincial pharmacy associations and ministries of health. Claims data are for fiscal year ending March 31, 2018, with the exception of Quebec where the data is for year ending June 30, 2018. In **Alberta**, as of May 17, 2018, fees changed to \$100 per CACP, \$60 per SMMA and \$20 per follow-up, with or without APA. The fee for flu shots changed to \$13. In **Manitoba**, claims data for pneumonia and Tdap immunizations include non-publicly funded injections. In **all provinces**, pharmacists also have authority to prescribe emergency refills.

* In Quebec, legislation requires private insurance plans to pay the same professional service fees as the public plan, except for refusals to fill and Pharmaceutical Opinions. This chart gives claims data for the public plan only. Funding for professional fees kicks in after patients meet the universal drug plan's requirements for deductibles and co-pays.