



Social Services  
and Seniors

Services sociaux  
et des Aînés



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## Memorandum / Note de service

**To / Destinataire : All Retail Pharmacists and Staff**

**From / Expéditeur : Amanda Voutour**

Date : May 3, 2010

**Administrative Officer - Provincial Drug Programs**

Tel / Tél : (902) 620-3288 Fax / Téléc : (902) 368-4905

**Subject / Objet : Revised May 2010 Update to the Interchangeable / Maximum Allowable Cost List**

E-mail / Courriel : [advoutour@ihis.org](mailto:advoutour@ihis.org)

The May 2010 update to the PEI Drug Programs Interchangeable / Maximum Allowable Cost (MAC) List has been published. Changes in interchangeability will come into effect on the 17<sup>th</sup> May, 2010. Changes in pricing related to the addition of new interchangeable/MAC categories will come into effect on the 1<sup>st</sup> June 2010.

Adobe Acrobat (pdf) and Excel versions of the complete list can be downloaded from the Government website at: [www.gov.pe.ca/sss/](http://www.gov.pe.ca/sss/).

All product availability and pricing has been confirmed with manufacturers prior to publication of this update.

Please contact the Pharmacy Services Office at 368-4947 (Charlottetown) or 1-877-577-3737 (toll-free in PEI) if you are unable to access a copy of the list online.

Please note that the Maximum Allowable Cost List also contains products that although not listed in the Drug Programs Formulary but may be available through the Special Authorization (Exceptional Drug Request) Process. Refer to the Formulary to determine coverage of products under specific drug programs.

In addition, some of the Interchangeable / MAC Categories are only available through the Palliative Home Care Drug Pilot Project.

### NEW INTERCHANGEABLE / MAC CATEGORIES

LETROZOLE	02231384	FEMARA	NPC	2.8938
2.5MG TABLETS	02309114	PMS-LETROZOLE	PMS	2.8938
	02344815	SANDOZ-LETROZOLE	SDZ	2.8938

### PRODUCTS ADDED TO THE INTERCHANGEABLE / MAC LIST

The following products have been added to existing interchangeable categories.

RAN-FOSINOPRIL 10MG TABLETS	02294524
RAN-FOSINOPRIL 20MG TABLETS	02294532
SANDOZ-OLANZAPINE ODT 5MG TABLETS	02327775
SANDOZ-OLANZAPINE ODT 10MG TABLETS	02327783
SANDOZ-OLANZAPINE ODT 15MG TABLETS	02327791
SANDOZ-OLANZAPINE ODT 20MG TABLETS	02327805
SANDOZ-NARATRIPTAN 2.5MG TABLETS	02322323
ZYM-FLUOXETINE HCL 10MG CAPSULES	02302659

**CHANGES TO MAC PRICES**

NARATRIPTAN HCL	02237821	AMERGE	GSK	<b><u>8.6231</u></b>
2.5MG TABLETS	02314304	NOVO-NARATRIPTAN	NOP	<b><u>8.6231</u></b>
	02322323	SANDOZ-NARATRIPTAN	SDZ	<b><u>8.6231</u></b>

**DELETED INTERCHANGEABLE / MAC CATEGORIES**

There are no deleted categories to report.

**DISCONTINUED PRODUCTS**

The following products have been removed from the Maximum Allowable Cost List. These products will not appear in the next publication of the Drug Programs Formulary, but will remain as benefits for the next twelve months.

DESYREL 50MG TABLETS	00579351
NU-CIMET 200MG TABLETS	00865796
NU-DESIPRAMINE 10MG TABLETS	02211939
NU-DESIPRAMINE 25MG TABLETS	02211947
NU-DESIPRAMINE 50MG TABLETS	02211955
NU-DESIPRAMINE 75MG TABLETS	02211963
NU-DESIPRAMINE 100MG TABLETS	02211971
NU-DIFLUNISAL 250MG TABLETS	02058405
NU-DIFLUNISAL 500MG TABLETS	02058413
NU-HYDRAL 10MG TABLETS	01913204
NU-HYDRAL 25MG TABLETS	02004828
NU-HYDRAL 50MG TABLETS	02004836
NU-MEFENAMIC 250MG CAPSULES	02229569
NU-MEGESTROL 40MG TABLETS	02185415
NU-MEGESTROL 160MG TABLETS	02185423
NU-NIFED 10MG CAPSULES	00865591
NU-SULFINPYRAZONE 200MG TABLETS	02045699
NU-TETRA 250MG CAPSULES	00717606
NU-TRIMIPRAMINE 12.5MG TABLETS	02020599
NU-TRIMIPRAMINE 25MG TABLETS	02020602
NU-TRIMIPRAMINE 50MG TABLETS	02020610
NU-TRIMIPRAMINE 100MG TABLETS	02020629
PMS-DESIPRAMINE 10MG TABLETS	01946250
PMS-DESIPRAMINE 25MG TABLETS	01946269
PMS-METHOTRIMEPRAZINE 50MG TABLETS	02232905
RATIO-BENZYDAMINE 0.15% ORAL RINSE	02230170
URISPAS 200MG TABLET	00728179

**CHANGE IN MANUFACTURER**

AZATHIOPRINE 50MG TABLET	00004596	IMURAN	TRI	0.5689
KETOTIFEN FUMARATE 1MG TABLET	00577308	ZADITEN	NOP	0.6652
KETOTIFEN FUMARATE 0.2MG/ML SYRUP	00600784	ZADITEN	NOP	0.1397

**IMPORTANT NOTICES**

**\*Toloxin will now be covered under the FHB, DCAP, NH, FA-Pres and CC-Pres programs, but will not be listed as interchangeable with other Digoxin products.**

Cyclocort 0.1% topical ointment was listed in the April 2010 Mac List as a discontinuation. Effective discontinuation date is actually July 2010.