APPENDIX C

MAXIMUM ALLOWABLE COST (MAC) POLICY

For many common medical conditions, drug manufacturers market a wide variety of prescription drugs that often vary in price but achieve the same medical effect. Under the MAC policy, the Drug Plan obtains expert advice on which prescription drug products within a group of similar medications are safe and beneficial, and the most cost-effective. The price of the most cost-effective drugs are used as a guide to set the maximum allowable cost the Drug Plan will cover for other similar drugs used to treat the same condition. The price is not necessarily set at the lowest cost drug.

Patients have two options if they are prescribed a drug whose price is above the MAC for the group: (1) they can either continue to take the higher priced drug and pay the difference in cost over the MAC, or (2) they can talk to their prescriber about switching to a drug that is within the MAC. If the patient wishes to switch medications they will need a new prescription from their prescriber.

If the patient chooses to remain on a higher priced drug, then only the maximum allowable cost will count towards their deductible and/or calculation of their co-payment.

The expert drug review committee assesses the need for exemptions (and any exemption criteria) as they review each possible MAC group. Exemption criteria (where applicable) are noted in the chart below for each group. If a MAC group exemption is approved for an individual patient, prescription coverage will be subject to the lowest cost interchangeable alternative within the exempted group of drugs.

The MAC policy applies equally to all Saskatchewan residents eligible for benefits under the Drug Plan and Extended Benefits Branch. Drug Plan benefits are based on the lowest priced interchangeable brand as listed in the Formulary.

**MAXIMUM ALLOWABLE COST GROUP(S)**

**Proton Pump Inhibitors (PPIs)**

<table>
<thead>
<tr>
<th>Group includes</th>
<th>esomeprazole, lansoprazole, omeprazole, pantoprazole magnesium, pantoprazole sodium, rabeprazole¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum Allowable Cost</td>
<td>$0.20 per tablet or capsule (subject to the patient's usual co-payment and deductible)</td>
</tr>
</tbody>
</table>
| Individual Patient Exemption Criteria | Past PPI Treatment Failure  
  - Exemptions will NOT be approved for patients based on treatment failure with alternate PPIs.  
  Alternative Medication Administration Requirements  
  - Exemptions can be provided for patients unable to swallow solid oral medications or who require administration of a PPI through a feeding tube. Prescribers or pharmacists may request an exemption for one of the following alternative PPIs:  
    o esomeprazole magnesium trihydrate, delayed release tablet, 20mg, 40mg  
    o lansoprazole, delayed release capsule, 15mg, 30mg  
    o omeprazole, capsule/tablet, 20mg |

¹ Including generic equivalents.
- Certain formulations of esomeprazole, lansoprazole, and omeprazole may be administered orally and/or via feeding tube.
- Prescribers and pharmacists should consult with appropriate references for specific administration instructions.

| Notes | - Some of these drugs are available under the Exception Drug Status (EDS) program. For EDS PPIs, patients must meet EDS criteria to qualify for coverage. See Appendix A for information on EDS criteria for specific PPIs.
- Lansoprazole 15mg and 30mg orally disintegrating tablets, omeprazole 10mg tablet/capsule, as well as HP-PAC prescriptions are not affected by this policy.
- At this price point rabeprazole 20mg tablet falls above the $0.20 threshold. However, the Drug Plan has exempted it from the MAC and will allow claims to fully adjudicate at this product’s list price.
- Please refer to the Formulary website for current prices of medications in this category. |

### Intranasal Corticosteroids (INCS)

<table>
<thead>
<tr>
<th>Group includes</th>
<th>Nasally administered forms of beclomethasone, budesonide, ciclesonide, flunisolide, and mometasone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum Allowable Cost</td>
<td>$16.04/unit (subject to the patient’s usual co-payment and deductible)</td>
</tr>
<tr>
<td>Individual Patient Exemption Criteria</td>
<td>None</td>
</tr>
<tr>
<td>Notes</td>
<td>Please refer to the Formulary website for current prices of medications in this category.</td>
</tr>
</tbody>
</table>