

 Saskatchewan Ministry of Health Drug Plan and Extended Benefits Branch	Section	Reference
	<i>Pharmacy Professional Services</i>	DP-PPS-67
		Date of Issue
		June 1, 2026
		Revised
INVASIVE GROUP A STREPTOCOCCUS (iGAS) CHEMOPROPHYLAXIS PROGRAM POLICY and PROCEDURES		

POLICY

- Effective June 1, 2026, the Drug Plan and Extended Benefits Branch (DPEBB) will pay community pharmacies, under the Invasive Group A Streptococcus Chemoprophylaxis Program, an Invasive Group A Streptococcus Chemoprophylaxis Fee (iGAS-F) for the prescribing of chemoprophylaxis to Invasive Group A Streptococcus eligible contacts.
- The iGAS-F is only permitted when a pharmacist receives a letter issued by Saskatchewan Public Health which identifies and recommends high-risk individuals receive invasive Group A Streptococcus Chemoprophylaxis.
- The amount of the iGAS-F paid is in accordance with Schedule B of the Pharmacy Proprietor Agreement that is in effect on the date the prescription is issued.
- The iGAS-F is paid when a pharmacist prescribes an eligible medication for chemoprophylaxis of Invasive Group A Streptococcus according to the *Regulatory Bylaws of the Saskatchewan College of Pharmacy Professionals (SCPP)* using the *medSask Invasive Group A Streptococcus (iGAS) Chemoprophylaxis Guidelines* (the Guidelines).
- **No incentives shall be provided** by the Proprietor or an agent on behalf of the Proprietor to any other person in relation to the provision of Invasive Group A Streptococcus Chemoprophylaxis assessment and prescribing.
“Incentives” means any money, gifts, donations to a charity, rebates, refunds, customer loyalty programs, points, coupons, discounts, goods, dividends, and/or rewards which can be redeemed for a gift or other benefit.

PURPOSE

- To improve access to Invasive Group A Streptococcus Chemoprophylaxis for close contacts identified by Saskatchewan Public Health.

LEGISLATIVE AUTHORITY

- *The Pharmacy and Pharmacy Disciplines Act*

- *The Prescription Drugs Act (Saskatchewan)*
- *The Drug Schedules Regulations, 1997 Amendment Regulations*
- *The Health Administration Act*

PROGRAM DESCRIPTION

- The iGAS-F pays a pharmacy for the work and responsibility associated with a pharmacist assessing and prescribing an eligible medication for iGAS chemoprophylaxis according to the Guidelines.
- The DPEBB places billing thresholds and limitations on the assessment and prescribing, per patient in 365 days. These thresholds and limitations may not align with the Guidelines.
- The cost of the prescription for the eligible medication is subject to the eligible patient's usual medication coverage.

ELIGIBLE PATIENTS

- A Saskatchewan resident with a valid Health Services Number (HSN)*.

*Exclusions: Residents of a Special-care Home are not eligible for an iGAS-F.

A Special-care Home, formerly referred to as a Long-term Care Facility, is defined as a designated facility that provides personal or nursing care to individuals who reside in the home on a temporary or permanent basis. The home may provide any of the following types of care: convalescent care; rehabilitation services; palliative care; respite care; and day programming. Special-care homes are operated by the Saskatchewan Health Authority or by a provider that has a contract with the Saskatchewan Health Authority.

PROCEDURES

The Pharmacist will:

- Adhere to the *Regulatory Bylaws of the Saskatchewan College of Pharmacy Professionals*.
- Adhere to the Guidelines to determine appropriate action in the assessing and prescribing an eligible medication for iGAS chemoprophylaxis.
- Fully complete all sections of the appropriate medSask Pharmacist Assessment Record (PAR).
- Send the PAR in its entirety to the patient's primary practitioner, when applicable
- Prescribe a medication upon receipt of a letter issued by Saskatchewan Public Health, which identifies the individual as an iGAS close contact (the letter will contain the patient's name and HSN).

The Pharmacy will:

- Submit the medication claim for the medication prescribed for iGAS chemoprophylaxis electronically for adjudication or capture before the iGAS-F claim.
- Submit the iGAS-F on the same day as the medication claim.
- Match the prescriber in the iGAS-F claim to the prescriber submitted for the prescribed medication claim.
- Ensure the dispensed prescription is captured on the Pharmaceutical Information Program (PIP).
- Obtain medSask approval, in writing, prior to the use of a document other than the PAR.
- Retain copies of the Pharmacist Assessment Record as per SCPP Reference Manual - [Record Retention and Destruction guidelines](#).
- Provide copies of the PAR upon DPEBB's request as part of its review of adherence to the iGAS Chemoprophylaxis Policy and Procedures within 2 business days.

The Drug Plan and Extended Benefits Branch will:

- Provide pharmacies with the Invasive Group A Streptococcus (iGAS) Chemoprophylaxis Program Policy and Procedures.
- Pay pharmacies the iGAS-F upon receipt of the electronic claim.
- Update the list of Drug Identification Numbers (DINs) for eligible products under the Program.
- Request and review the PAR to confirm adherence to the Invasive Group A Streptococcus (iGAS) Chemoprophylaxis Program Policy and Procedures.
- Recover the iGAS-F if DPEBB determines, based on its review, that there was non-adherence to the Invasive Group A Streptococcus (iGAS) Chemoprophylaxis Program Policy and Procedures.

BILLING PROCEDURE:

Steps for pharmacists when prescribing under the Program and submitting the iGAS-F:

1. Dispense the eligible medication(s) and submit the claim for adjudication or capture electronically via the DPEBB on-line claim system.
2. Adjudicate the iGAS-F using the appropriate pseudoDIN to the DPEBB.
3. Billing shall occur on a real-time basis and using the Billing Codes listed in Appendix I.

Step 1: Dispensing the Medication:

- Use "SKCP" and your own pharmacist ID number in the Health Provider fields.
- Use "D" in front of your own pharmacist ID number.
- Ensure the following fields are:
 - **PATIENT IDENTIFIER** = client nine-digit Health Services Number (HSN)
 - **DISPENSING DATE** = date of the activity (e.g., June 1, 2026)
 - **RX NUMBER** = enter the sequential RX#
 - **HEALTH PROVIDER ORGANIZATION ID** = SKCP
 - **HEALTH PROVIDER ID** = Pharmacist ID number (e.g., D1234)
 - **PHARMACIST ORGANIZATION ID** = SK
 - **PHARMACIST ID** = Pharmacist ID number (e.g., D1234)
 - **DIN** = enter the DIN of the product prescribed and dispensed
 - **COMPOUNDING FEE (CF)** = \$0.00
 - **COMPOUND NAME** = blank
 - **QUANTITY (QTY)** = enter quantity dispensed
 - **DAYS SUPPLY** = enter days supply dispensed
 - **ACQUISITION COST (AC)** = enter actual acquisition cost
 - **DISPENSING FEE (DF)** = enter usual and customary fee
 - **MARKUP** = tiered as per pharmacy agreement
 - **TOTAL RX COST** = enter total cost
 - **PATIENT PAID** = as appropriate
 - **ADJUDICATION FLAG** = Y/N

Step 2: Submitting an Invasive Group A Streptococcus Chemoprophylaxis (iGAS-F):

- Submit the iGAS-F electronically* via the DPEBB on-line claim system on the date the prescription is issued.
- DBEBB pays 100% of the iGAS-F to the pharmacy.
- Ensure the following fields are:
 - **PATIENT IDENTIFIER** = client nine-digit Health Services Number (HSN)
 - **DISPENSING DATE** = date of the activity (e.g., June 1, 2026)
***must be submitted after and on the same day as the prescription claim in step 1**
 - **RX NUMBER** = enter the sequential RX#
 - **HEALTH PROVIDER ORGANIZATION ID** = SKCP
 - **HEALTH PROVIDER ID** = Pharmacist ID number (e.g., D1234)
***must match the provider ID from the prescription claim in step 1**
 - **PHARMACIST ORGANIZATION ID** = SK
 - **PHARMACIST ID** = Pharmacist ID number (e.g., D1234)
 - **DIN** = enter appropriate billing code (pseudoDIN) for service provided (see Appendix I)
 - **COMPOUNDING FEE (CF)** = \$0.00
 - **COMPOUND NAME** = blank
 - **QUANTITY (QTY)** = 1 (limitations are as noted in Appendix I)
 - **DAYS SUPPLY** = enter days supply dispensed
 - **ACQUISITION COST (AC)** = \$25.00 or as per Schedule B of the Pharmacy Proprietor Agreement
 - **DISPENSING FEE (DF)** = \$0.00
 - **MARKUP** = 00 / 00 / 00
 - **TOTAL RX COST** = total fee
 - **PATIENT PAID** = \$0.00
 - **ADJUDICATION FLAG** = Y

- Please note: DPEBB will not accept paper claims.
- Use the **DPEBB web page** <https://www.drugplan.health.gov.sk.ca> if unable to bill the fees electronically through the pharmacy's Practice Management System.
- Contact the pharmacy's software vendor if unsure how to install the WEB certificate.

APPENDIX I:
Billing Codes and Threshold/Limitations

Billing Code (pseudoDIN)	Description	Cost	Billing Threshold/Limitations* *DPEBB Threshold/Limitations may not align with the prescribing limits within the medSask <i>Minor Ailments and Self-Care Guidelines</i>
00951677	Invasive Group A Strep Fee (iGAS-F)	\$25.00	• Maximum of FOUR (4) claims in a 365-day period per patient • Must be submitted as a Quantity of ONE (1)