

Multi-Year Pharmacy Funding Framework update

This benefact provides further clarification on the application of the Maintenance Medication Dispensing Policy for members of the Low-Income Health Benefit (LIHB) Plans, compounding price limits, definition of narcotic transition services and a fact sheet for Albertans.

Maintenance Medication Policy clarification for government-sponsored drug programs

Effective October 1, 2026, the Maintenance Medication Dispensing Policy will apply to all Government of Alberta-sponsored drug programs, excluding Palliative Coverage (see **Benefact 1337** for more details).

Low Income Health Benefit (LIHB) plans will be transitioning to follow the full Maintenance Medication Dispensing Policy. Before the full transition, as of now, for LIHB plans, drug products that aren't included on the Maintenance Medication List (MML) will continue to be subject to any applicable days' supply product limitations until they can be fully aligned. LIHB days' supply product limitation guidelines apply to the eligible drugs and products for the Alberta Adult Health Benefit, Alberta Child Health Benefit and Income Support programs as defined in the Alberta Humans Services Drug Benefit Supplement and in the Alberta Drug Benefit List.

The exception to this requirement is Palliative Coverage, which will continue to operate under existing dispensing requirements.

Any changes to the MML or the product limitation guidelines for LIHB will be notified to pharmacies through future communications.

Updates to compounding price limits

Clarification is being provided on the new limits to select topical compound medications outlined in **Benefact 1341**.

Effective October 1, 2026, topical compound medications containing diclofenac or another NSAID as the **main active ingredient** intended for eligible beneficiaries under government-sponsored drug plans, including individuals receiving palliative care benefits, are subject to a maximum reimbursable amount of \$0.55 per gram (inclusive of ingredient costs and allowable upcharge #1 [AU#1]). This price cap applies to topical compound NSAIDs (including diclofenac), when the compound is a combination with lidocaine, menthol and/or camphor, regardless of concentration of these additional ingredients. Amounts exceeding the maximum reimbursable amount aren't eligible for reimbursement under the plan.

For multi-ingredient compounds, the main active ingredient requirement remains the same as defined in the **Reference Guide for Alberta Pharmacies** for Eligibility Guidelines for Topical Diclofenac Compounds.

When submitting claims, pharmacies are expected to bill compound ingredients in accordance with existing program requirements and applicable billing guidance. The main active ingredient in the compound would determine the appropriate Product Identification Number (PIN) used for claim submission.

The maximum reimbursable amount represents the full benefit available under government-sponsored drug plans for eligible topical compound medications. Amounts exceeding the maximum reimbursable amount aren't eligible for reimbursement or payment under the plan nor should these amounts be charged to, or otherwise recovered from the patient.

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Concurrent opioid therapy exception and transition period for daily dispensing fees

Methadone and buprenorphine/naloxone (Suboxone) are exempt from the daily dispensing fee limit and don't require a Daily Dispensing Authorization Form. A pharmacy may not claim a daily dispensing fee for an opioid medication when a dispensing fee is already being paid for methadone or buprenorphine/naloxone for the same patient on the same day.

Exception: A daily dispensing fee may be payable for a concurrently prescribed opioid medication when the patient is receiving care through a licensed Narcotic Transition Service (NTS) pharmacy and the concurrent opioid forms part of a documented NTS treatment protocol. Concurrent prescribing alone, including a prescription directing daily dispensing, doesn't qualify for this exception. A list of licensed NTS sites will be used for compliance verification purposes. Currently there are 6 pharmacies supporting 7 licensed NTS sites. These 6 pharmacies would qualify for daily dispensing for a concurrent opioid when a dispensing fee is already being paid for methadone or buprenorphine/naloxone for the same patient for the same day.

To support implementation, a 2-month transition period until December 1, 2026 will be provided. During this time, pharmacies will:

- Be expected to refer and enroll eligible patients into NTS.
 - More information regarding referring patients can be found at <https://www.albertahealthservices.ca/info/Page3086.aspx>
 - More information for patients can be found at <https://www.albertahealthservices.ca/services/odp.aspx>
- Be expected to provide information to patients who don't have access to the Opioid Dependency Programs readily available to them to <https://recoveryalberta.ca/page14106.aspx>
- Be provided with information on the licensed NTS operated by Recovery Alberta.
 - More information on NTS can be found at <https://www.alberta.ca/narcotic-transition-service-provider-licensing>
 - For enquires on NTS eligibility: amh.cam@gov.ab.ca

The transition period is being provided to ensure pharmacies have sufficient time to establish the appropriate clinical and operational processes before the exception requirements are fully applied.

Fact sheet for Albertans available

To assist with education and awareness for Albertans, the Government of Alberta has developed a **fact sheet** outlining changes related to the Payor of Last Resort, the new Pharmacy Funding Framework and Provincial Naloxone Program policy updates. The fact sheet, linked above, includes QR codes linking to additional information and may be printed and provided to Albertans at the pharmacy's discretion.

Previous Communications:

- **Pharmacy Benefact 1320 - June 2026:** Special announcement: New multi-year Pharmacy Funding Framework
- **Pharmacy Benefact 1321- June 2026:** Second notice: Pharmacy services billing cap effective June 26, 2026
- **FAQ-for-Pharmacist-CAP.pdf**
- **Pharmacy Benefact 1333 - August 2026:** Multi-year Pharmacy Funding Framework update: Enhanced Care Plan claims reporting requirements
- **FAQ-for-CACP-and-SMMA-PIN.pdf**

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PHARMACY BENEFACT

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- **Pharmacy Benefact 1335 - September 2026:** New Multi-Year Pharmacy Funding Framework: Updates to dispensing fees
- **Pharmacy Benefact 1337 - September 2026:** Multi-Year Pharmacy Funding Framework update: Maintenance Medication Dispensing Policy and introduction of a Maintenance Medication List (MML)
- **Maintenance Medication Dispensing Policy FAQ**
- **MML List of Drugs.xlsx**
- **Pharmacy Benefact 1339 - September 2026:** Multi-Year Pharmacy Funding Framework: Update to Daily Dispensing Policy
- **Pharmacy Benefact 1341 - September 2026:** Multi-Year Pharmacy Funding Framework Update: Introduction of unit price limits on select topical compound medications.
- **Pharmacy Benefact 1342 - September 2026:** Clarification Benefact #1

For assistance with benefit or claim inquiries, please contact an Alberta Blue Cross Pharmacy Services Provider Relations contact centre representative at

780-498-8370 (Edmonton and area)

403-294-4041 (Calgary and area)

1-800-361-9632 (toll free)

FAX 780-498-8406 (Edmonton and area)

FAX 1-877-305-9911 (toll free)

Alberta Blue Cross offers online access to current Pharmacy Benefacts and supplemental claiming information to assist with the submission of your direct-bill drug claims.

Visit ab.bluecross.ca/providers/pharmacy-home.php

