



**MANITOBA**

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June 2015

| Part 1 PROVINCIAL COVERAGE PROVISIONS    |   |
|--|---|
| Deductibles and co-payments (Pharmacare) | <ul style="list-style-type: none"> <li>➤ The annual Pharmacare deductible is based on Adjusted Family Income (which is total family income less \$3,000 for spouse and each dependent under 18).<br/>Adjusted family income &lt;\$15,000: deductible is 2.97% of total.<br/>Adjusted family income &gt;\$15,000 and &lt; or equal to \$21,000: deductible is 4.22% of total.<br/>Adjusted family income &gt;\$21,000 and &lt; or equal to \$22,000: deductible is 4.26% of total<br/>Adjusted Family income &gt;\$22,000 and &lt; or equal to \$23,000: deductible is 4.34% of total<br/>Adjusted Family income &gt;\$23,000 and &lt; or equal to \$24,000: deductible is 4.40% of total<br/>Adjusted Family income &gt;\$24,000 and &lt; or equal to \$25,000: deductible is 4.44% of total<br/>Adjusted Family income &gt;\$25,000 and &lt; or equal to \$26,000: deductible is 4.50% of total<br/>Adjusted Family income &gt;\$26,000 and &lt; or equal to \$27,000: deductible is 4.55% of total<br/>Adjusted Family income &gt;\$27,000 and &lt; or equal to \$28,000: deductible is 4.60% of total<br/>Adjusted Family income &gt;\$28,000 and &lt; or equal to \$29,000: deductible is 4.64% of total<br/>Adjusted Family income &gt;\$29,000 and &lt; or equal to \$40,000: deductible is 4.67% of total<br/>Adjusted Family income &gt;\$40,000 and &lt; or equal to \$42,500: deductible is 5.07% of total<br/>Adjusted Family income &gt;\$42,500 and &lt; or equal to \$45,000: deductible is 5.20% of total<br/>Adjusted Family income &gt;\$45,000 and &lt; or equal to \$47,500: deductible is 5.30% of total<br/>Adjusted Family income &gt;\$47,500 and &lt; or equal to \$75,000: deductible is 5.37% of total<br/>Adjusted Family income &gt;\$75,000: deductible is 6.73% of total</li> <li>➤ Social assistance: through Provincial Assistance (Employment &amp; Income Assistance). Must meet with worker to determine level of assistance required, and supply all information such as prescriptions, etc.</li> </ul> |
| Insulin Pump Support                     | <ul style="list-style-type: none"> <li>➤ Manitoba Health supports a Pediatric Insulin Pump Program for children and adolescents under 18 years of age. This program provides insulin pumps free of cost to eligible Manitoba children and adolescents and is administered by the Winnipeg Regional Health Authority through the Diabetes Education Resource for Children and Adolescents (DER-CA) at the Health Sciences Centre.</li> </ul>   |
| Emergency assistance                     | <ul style="list-style-type: none"> <li>➤ A monthly payment program has been implemented for the annual Pharmacare deductible for individuals whose monthly expense for eligible medications equals or exceeds 20% of their monthly income.</li> </ul>   |
| Formulary status of diabetes drugs       | <p>See <a href="http://www.diabetes.ca/publications-newsletters/advocacy-reports/provincial-territorial-formulary-chart">http://www.diabetes.ca/publications-newsletters/advocacy-reports/provincial-territorial-formulary-chart</a></p> <p>NOTE: Physicians can request benefit coverage for “not listed” drugs by writing to the Appeals Committee of the Manitoba Drug Standards and Therapeutics Committee. This committee meets monthly.</p>   |

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| <b>Part 2 ACCESS TO MEDICATION AND SUPPLIES</b><br>(✓) indicates access is available, subject to income, age, or other provisions or restrictions listed in Part 1.<br>(✗) indicates access is not available.<br>( * ) indicates special circumstances. See Comment column. |                        |         |            |                     |   |
|---|------------------------|---------|------------|---------------------|---|
|   | Individuals & Families | Seniors | Low income | Social Assistance   | Comment   |
| <b>Prescription medication</b>  |                        |         |            |                     |   |
| • Insulin   | ✓                      | ✓       | ✓          | ✓                   |   |
| • Oral agents:  | ✓                      | ✓       | ✓          | ✓                   |   |
| <b>Testing supplies</b>   |                        |         |            |                     |   |
| • Lancets   | ✓                      | ✓       | ✓          | ✓                   |   |
| • Monitors/meters   | *                      | *       | *          | ✓ (paid by voucher) | *Monitors are provided to patients free of charge by the monitor/meter manufacturer when a patient purchases a minimum of 100 test strips which are covered as a benefit in Manitoba. |
| • Test strips (BG)  | ✓                      | ✓       | ✓          | ✓                   | Cap of 4,000 strips per year. Over that amount apply using Part 3 EDS. <sup>1</sup>   |
| • Test strips (Ketone)  | ✓                      | ✓       | ✓          | ✓                   |   |
| <b>Insulin delivery</b>   |                        |         |            |                     |   |
| • Pen needles   | ✓                      | ✓       | ✓          | ✓                   |   |
| • Pumps   | *                      | ✗       | *          | *                   | * Pediatric Insulin Pump Program  |
| • Pump supplies   | ✓                      | ✓       | ✓          | ✓                   | Some pump supplies are covered such as infusion sets, cannulae and cartridges   |
| • Syringes  | ✓                      | ✓       | ✓          | ✓                   |   |

<sup>1</sup> EDS: EXCEPTION DRUG STATUS