

# In Practice

## Drug Assistance for Cancer Patients

By Larry Broadfield, Manager, Provincial Managed Systemic Therapy Program, and Susan Kenney, Social Worker, Nova Scotia Cancer Centre, Queen Elizabeth II Health Sciences Centre

**D**rug therapy for the management of cancer and its symptoms, is an important aspect of effective cancer care. Much of the drug therapy requires patients to fill prescriptions from their local retail pharmacy, which can be costly for cancer patients, who are often unprepared for the prescription costs and paperwork necessary for prescription coverage.

Prescription costs are significant barriers to care for patients with low incomes. The Canadian Cancer Society - Nova Scotia Division (CCS-NSD) administered the Nova Scotia Department of Health's Treatment Drug Assistance Program (TDAP) from 1980 until September 30, 2001. Throughout this time, CCS-NSD staff and volunteers assisted cancer patients in accessing the program

and in conducting eligibility assessments. Through TDAP, Department of Health funding provided support for patients with gross family incomes of less than \$12,000. Additional funding from the CCS-NSD enabled patients with gross family incomes of up to \$15,720 to also receive program support. The TDAP covered the costs of cancer treatment drugs, antiemetics, laxatives, and nutritional supplements.

Following a series of discussions, focused on the government's role and responsibility in meeting the drug needs of cancer patients, especially those with low incomes, and the appropriateness of having community-based volunteers assess patient eligibility, the CCS-NSD Board of Directors decided to return the administration of TDAP back to the Department of Health.

On October 1, 2001 the administration of the TDAP was returned to the Department of Health and was renamed Drug Assistance for Cancer Patients (DACP). This program is fully funded by the Department of Health and provides coverage for cancer drugs, antiemetics and laxatives for patients who meet the eligibility criteria. This program no longer covers nutritional supplements.

**To apply for DACP the patient must:**

- be a resident of Nova Scotia, and
- have a gross family income no greater than \$15,720 per year, and
- not be eligible for coverage under other drug programs.

**Prescription costs are significant barriers to care for patients with low incomes.**

**Cancer Care Nova Scotia** is a program of the Department of Health. Its mandate is to evaluate, coordinate and strengthen the cancer system in Nova Scotia.

**Cancer Care Nova Scotia** works with and supports professionals and stakeholders in the health care system to bring about patient-centred change. Its ultimate goal is to reduce the burden of cancer on individuals, families, communities and the health care system.

**In Practice** is an insert for **Cancer Care Nova Scotia's** bi-monthly newsletter. It is written specifically for primary care practitioners with information that we hope will make a difference to your cancer practice.

Please contact Anne Murray, Education Coordinator, **Cancer Care Nova Scotia**, by phone at (902) 473-3781 or by email at [anne.murray@ccns.nshealth.ca](mailto:anne.murray@ccns.nshealth.ca) with comments or suggestions for future topics.



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Patients must apply directly to Pharmacare for DACP by completing an application (see attached). Pharmacare staff can answer any questions patients may have to assist them in completing the application. CCS-NSD volunteers can also assist patients in completing the application but they no longer conduct the income eligibility assessment.

A copy of the Income Tax Notice of Assessment or Re-assessment from Canada Customs and Revenue Agency for the patient, their parent(s) or guardian(s), spouse or common-law partner, must be attached to the application. If someone does not have the most recent Notice of Assessment or Re-assessment, they must obtain a copy from Canada Customs and Revenue Agency. For some patients, the income from the previous year may be higher than the current year (when they have the cancer diagnosis). If so, the patient may call the Nova Scotia Pharmacare Program to discuss their change in income level and potential eligibility.

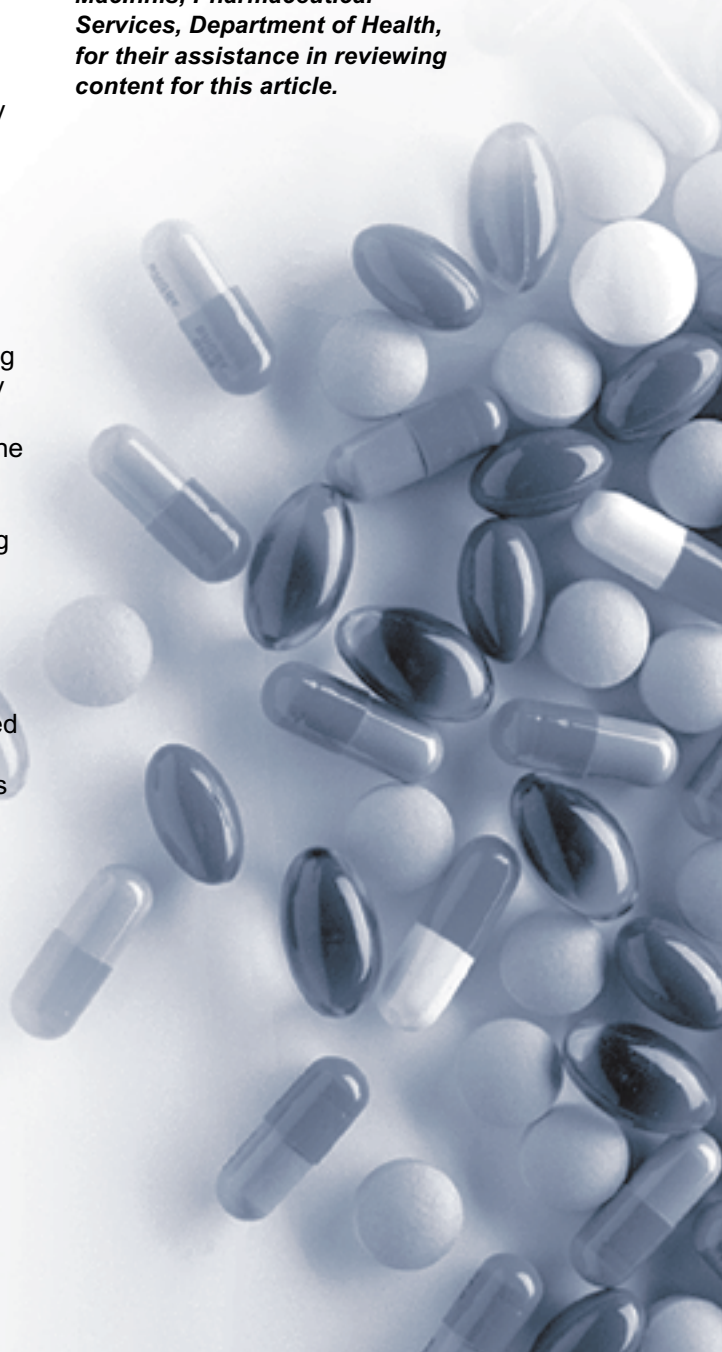
It takes a maximum of three working days to process applications, but every effort is made to process them on the day they are received. The patient or the patient's parent or guardian will receive a phone call to advise them whether or not they are eligible for drug assistance. Assessments are conducted annually to ensure continued eligibility.

All health professionals, who care for cancer patients in Nova Scotia, need to understand this process, and to be prepared to assist patients and families with access to the DACP program. Patients may seek help from health professionals including family doctors and others.

Local CCS-NSD volunteers or representatives may also provide assistance. Health professionals should try to enroll cancer patients into the DACP program early in the cancer management trajectory, to avoid delay and distress when prescriptions are urgently needed. An eligibility form is attached for your information.

Additional copies of the form and further information about the program are available by calling the Nova Scotia Pharmacare Program, at 429-6565 or toll-free at 1-800-544-6191.

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## *Drug Assistance for Cancer Patients*

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### **Eligibility:**

To apply for *Drug Assistance for Cancer Patients* the patient must:

- be a resident of Nova Scotia, and
- have a gross family income no greater than \$15,720 per year, and
- not be eligible for coverage under other drug programs.

### **Application Process:**

The application for *Drug Assistance for Cancer Patients* is printed on the reverse side of this form. Please answer all questions completely and accurately. Incomplete or inaccurate applications cannot be processed.

Attach a copy of the Income Tax Notice of Assessment or Re-assessment from Canada Customs and Revenue Agency for the patient, their parent(s) or guardian(s), spouse or common-law partner.

If you do not have the most recent Notice of Assessment or Re-assessment, please obtain a copy from Canada Customs and Revenue Agency by phoning 1-800-959-8281.

Forward the completed application and the Notice of Assessment to the address or fax number below.

Please allow three working days after the application is received for processing. The patient or the patient's parent or guardian will then receive a phone call to advise whether or not the patient is eligible for drug assistance.

Assessments will be conducted annually to ensure continued eligibility.

### **Benefits:**

*Drug Assistance for Cancer Patients* provides approved cancer-related drug benefits, which are reviewed by the Nova Scotia Formulary Management Committee, a committee of clinicians, drug information specialists, and pharmacists. Benefit changes may occur from time to time.

If you have any questions please contact:

### **Nova Scotia Pharmacare Programs**

**PO Box 500, Halifax, Nova Scotia B3J 2S1**

**For assistance, call toll free at 1-800-544-6191 or locally at 429-6565**

**Fax: (902) 468-9402**

Patient's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone Number Home \_\_\_\_\_ Work \_\_\_\_\_ Other \_\_\_\_\_

NS Health Card Number (MSI) \_\_\_\_\_ (10 digit number)

If the patient is a dependent, name of parent(s) or guardian(s) \_\_\_\_\_

Parent(s) or Guardian(s) Telephone Number \_\_\_\_\_

Is the patient currently covered by a prescription drug plan/program? Yes No

**INCOME INFORMATION**

Provide the information requested below for the patient, their parent(s) or guardian(s), spouse or common-law partner. Enter the amount on line 150 from the most current Income Tax Return for each person.

**Include a copy of the Income Tax Notice of Assessment or Re-assessment from Canada Customs & Revenue Agency for each person .**

Surname, First Name	NS Health Card Number (MSI) 10 digit number	Gross Income (Line 150)
<b>If the total gross family income is greater than \$15,720, the patient does not qualify for assistance.</b>		<b>TOTAL</b>

**Statement of Information Accuracy**

I declare that the information provided on this application is accurate and true and I will immediately notify the Nova Scotia Pharmacare Programs of any changes.

**Statement for Release of Medical Information Related to the Patient**

I hereby authorize Dr. \_\_\_\_\_ of \_\_\_\_\_  
(Name) (Address)

to provide the Nova Scotia Pharmacare Programs with medical information **related to the patient** that may be required to determine eligibility.

**Authorization for Release of Information**

I hereby consent to the release, by the Canada Customs and Revenue Agency to the Minister of Health, or his/her designate, of information from my income tax returns. The information will be relevant to, and used solely for, the purpose of determining and verifying the family income provided on this application. The information will not be disclosed to any person without my approval. This authorization is valid for the most recent taxation year prior to signature. It is also valid for the current taxation year and subsequent consecutive taxation years for which assistance is requested. I understand that, if I wish to withdraw this consent, I may do so at any time by writing to the Nova Scotia Pharmacare Programs.

I understand and endorse the above Statement of Information Accuracy, Statement for Release of Medical Information Related to the Patient (if applicable), and the Authorization for the Release of Information, as indicated by my signature below.

Patient/Parent/Guardian's signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse/Common-Law Partner's signature \_\_\_\_\_ Date \_\_\_\_\_