



OHIP+ Frequently Asked Questions

What is OHIP+?

On January 1, 2018, the Ontario government introduced OHIP+: Children and Youth Pharmacare. Ontario residents, who are age 24 years or younger and OHIP-insured, are able to get eligible prescription medications for free under OHIP+, regardless of family income. Enrolment and drug coverage will be automatic, with no upfront costs such as co-payments or deductibles for eligible medications.

What is covered?

OHIP+ will cover all drugs currently reimbursed through the Ontario Drug Benefit (ODB) program. This includes more than 4,400 drug products listed on the ODB Formulary including:

- antibiotics to treat infections
- inhalers for asthma
- various insulins, oral diabetic medications and diabetes test strips
- epinephrine auto-injectors (e.g. EpiPen®)
- drugs to treat arthritis, epilepsy and other chronic conditions
- medications to treat mental health conditions (e.g. antidepressants)
- attention deficit hyperactivity disorder (ADHD) drugs
- drugs to treat some childhood cancers and other rare conditions

Additional drugs are eligible for funding through the Exceptional Access Program (EAP), if an individual qualifies. Drugs funded through EAP require a patient's prescriber (doctor/nurse practitioner) to submit a request to the Ministry of Health and Long-Term Care on their behalf.

Do I need to sign up?

No, simply give your Ontario pharmacy your Ontario health card number and a valid prescription for an eligible drug product to receive coverage through OHIP+.

Do I need OHIP+ if I have benefits that are provided through my ELHT benefits plan?

Yes, prescription drugs that are covered by the ODB program must be processed at your Ontario pharmacy through OHIP+ first, even if you have other health benefits coverage (e.g. benefits sponsored by your Employee Life and Health Trust (ELHT)).

How will my pharmacy know that the drug is covered under OHIP+?

Our carrier's drug claim systems are coded with information about you and/or your dependants to ensure ODB eligible drugs are submitted to OHIP+ as first payer. Your Ontario pharmacy uses these systems to make claims on your behalf.



What will happen at the pharmacy if my prescription is for an ODB eligible drug and I do not have my health card number?

The pharmacy will assist in finding the best possible solution to ensure that the patient's medication requirements are met. However, this may mean that you will need to pay for the prescription and manually submit the expense to the ODB program for reimbursement.

Will OHIP+ recipients have any out-of-pocket costs?

There is no deductible or co-payment applied to drugs funded through the ODB program for OHIP+ recipients. Note that Ontario pharmacists are required to dispense equivalent generic products, for a prescription for a brand name drug, if available. Generic drugs approved for use by Health Canada are as safe and effective as their brand name counterparts.

If your doctor/nurse practitioner writes you a “no substitution” prescription, you can receive a brand name drug where generic alternatives are available if you have had an adverse drug reaction to generic equivalents. ODB recipients, including OHIP+ recipients, are required to try two generic drug products (where available) and have a Side Effect Reporting Form completed and signed by their doctor/nurse practitioner for each generic tried before a “no substitution” prescription for a brand name drug will be reimbursed under the ODB program.

If OHIP+ does not cover 100% of my claim, can I submit the balance to my ELHT benefits plan?

OHIP+ funds 100% of all ODB eligible drugs up to the lowest cost alternative price listed on the ODB Formulary. If you or your dependant is 24-years-old or younger and have an exception to allow for the cost of the brand name drug under your ELHT benefits plan, the pharmacy can submit the balance through your ELHT benefits plan for consideration.

What happens if I am taking a drug that is not currently listed on the ODB Formulary?

If you are taking a medication that is not listed on the ODB Formulary, it may be eligible for coverage through the EAP or your ELHT benefits plan.

Ask your doctor/nurse practitioner if the drug is covered through EAP. If it is, have your doctor/nurse practitioner submit an EAP request. The approval process can take time, so take action now so you are not paying out-of-pocket the next time you get the prescription filled.

If the drug is not covered through EAP, then:

1. Ask the doctor/nurse practitioner if there is a suitable alternative drug covered on the ODB Formulary that can be prescribed instead.

OR

2. Have your pharmacy submit the claim to your ELHT benefits plan for consideration.



What happens if the drug is not funded through the ODB program (i.e. either on the ODB Formulary or through EAP)?

If you are taking medication that is not funded through the ODB program or through EAP, it may be eligible for coverage through your ELHT benefits plan.

1. Ask your doctor/nurse practitioner if there is a suitable alternative drug covered on the ODB Formulary that can be prescribed instead.

OR

2. Have your pharmacy submit the claim to your ELHT benefits plan for consideration.

How can I confirm which drugs are covered under the ODB program?

You can check if your medication is covered through the ODB program at:

www.ontario.ca/page/check-medication-coverage/

What are EAP drugs?

EAP drugs require your doctor/nurse practitioner to submit a form, including relevant medical information, to the government before you may be approved for coverage.

Will affected members be advised to submit a request to the EAP?

Yes, a notification has been sent on behalf of OTIP by our insurance carrier (Manulife) to those members who claimed EAP drugs prior to January 1, 2018. Members can work with their doctor/nurse practitioner to submit any required paperwork. The doctor/nurse practitioner may contact you with the status of your EAP request or you can call your doctor/nurse practitioner directly.

Do I need to advise OTIP if the drug is approved or denied under the EAP?

If the drug requires **prior authorization** under your ELHT benefits plan, you will need to advise OTIP of EAP **approvals or denials** for consideration of unpaid balances.

If the drug **does not require prior authorization** under your ELHT benefits plan, you will only need to advise OTIP of EAP **denials**. If the drug is approved through the EAP, OTIP does not need to be informed and the drug will be paid by the government.

Will my doctor/nurse practitioner charge me for completing an EAP request?

Your doctor/nurse practitioner cannot charge you to complete an EAP request.



Will my doctor/nurse practitioner know how to apply to the EAP?

The EAP has been established for years and doctors and nurse practitioners should be familiar with submitting EAP requests for their patients who are age 65 years and over. The Ministry of Health and Long-Term Care recently provided doctors and nurse practitioners with communication about the EAP, including the processes for submitting requests due to the introduction of OHIP+.

Are epinephrine auto-injectors (e.g. EpiPen®) a part of the ODB program?

Yes, epinephrine auto-injectors (e.g. EpiPen®) are covered under the ODB program as long as the patient has a valid prescription and a valid health card number.

Are Ontario students going to university/college in another province covered under OHIP+?

Students going to university or college in another province may still have their prescriptions covered by OHIP+ if they:

- Are age 24 years and younger
- Have a valid prescription for an eligible drug
- Remain insured by OHIP
- Get the medication from a pharmacy in Ontario

Otherwise, the expense can be submitted to your ELHT benefits plan for consideration, if it is an eligible prescription under your ELHT benefits plan and there is a valid prescription.

Where can I find more information about OHIP+?

For more information go to www.ontario.ca/ohipplus.