

Questions and Answers Regarding Ozempic Funding Status Change

1. What is the funding status of Ozempic and is it reimbursed under the Ontario Drug Benefit (ODB) Program?

As of January 31, 2024, Ozempic's listing status is changed to a Limited Use (LU) benefit in the ODB formulary, which means that patients must meet the new Limited Use criteria established for Ozempic in order to receive coverage under the ODB program. If a patient is an ODB-eligible recipient and the prescriber determines that the patient meets all of the Limited Use criteria for Ozempic, then Ozempic will be covered for that patient under the ODB program.

As such, as of January 31, 2024, all ODB recipients using Ozempic therapy must meet the LU criteria. Any prescription issued after January 31, 2024 must include the appropriate LU code if applicable. For patients who were receiving Ozempic through General Benefit prior to January 31, 2024, confirmation that the patient meets the LU criteria is required and the LU code must be documented on the next prescription at the time of filling. For patients with prior funding of Ozempic as a general benefit where the LU criteria cannot be confirmed with the prescriber, pharmacists may use the temporary LU code 279 when filling the prescription to avoid interruptions in therapy. This code will only be available for 3 months.

Ozempic is not funded for ODB program recipients who do not meet the LU criteria on the Formulary. Claims for payment for dispensing Ozempic for ODB program recipients who do not meet the LU requirement will be subject to recovery. Claims for payment for Ozempic must be supported by a prescription that includes the applicable Reason for Use (RFU) code, as described further in the Ontario Drug Programs Reference Manual.

2. Has the Ministry of Health established the funding criteria for Ozempic under the ODB program?

Yes. Ozempic is listed as a Limited Use (LU) benefit on the ODB formulary for Ontario Drug Benefit (ODB) recipients, effective January 31, 2024.

The LU criteria for Ozempic are as follows:

- For the treatment of adult patients with type 2 diabetes when adequate glycemic control is not achieved on the maximum tolerated dose of metformin or where metformin is contraindicated or inappropriate.
- Semaglutide is not funded in combination with another glucagon-like peptide-1 receptor agonist (GLP-1 RA) or dipeptidyl peptidase-4 (DPP-4) inhibitor.
- Injectable semaglutide is not funded in combination with oral semaglutide. Coverage is only provided for one dosage format.

Reimbursed dose: As per the product monograph

LU Authorization Period: Indefinite

Only ODB-eligible patients who meet the LU criteria and who have a valid prescription with the appropriate LU code will be eligible for funding under the ODB program.

3. A patient has been receiving Ozempic for the last year and is scheduled to receive the next refill in a month. The patient would like to know if they are covered by the ODB program for their future refills?

ODB-eligible patients will continue to be covered for Ozempic by the ODB program if they meet the Limited Use criteria. As of January 31, 2024, the prescriber must confirm each patient's eligibility by acknowledging on the prescription that the patient meets the new LU criteria for funding of Ozempic. For prior prescriptions for Ozempic that were funded as general benefits, the temporary LU code 279 may be used if the pharmacy is unable to reach the prescriber to obtain a new prescription and/or to confirm the patient's eligibility under the LU criteria. This option will only be available until April 30, 2024.

4. Is Ozempic funded under ODB after January 31, 2024 for patients who do not meet the LU criteria for Ozempic?

No. The LU criteria for Ozempic are consistent with the previous therapeutic notes and with the Health Canada-approved indication of type 2 diabetes. Ozempic is not funded for ODB program recipients who do not meet the LU criteria on the Formulary. Claims for payment for dispensing Ozempic for ODB program recipients who do not meet the LU requirement will be subject to recovery. Claims for payment

for Ozempic must be supported by a prescription that includes the applicable Reason for Use (RFU) code, as described further in the Ontario Drug Programs Reference Manual.

Between January 31, 2024 to April 30, 2024, pharmacists can use LU Code 279 to submit a claim for Ozempic (DINs 02471469, 02471477, 02540258) if they are unable to contact a patient's prescriber to obtain a new prescription with the LU criteria. This will ensure patients do not go without their drug until they are able to contact their prescriber. The rules regarding the use of LU code 279 are set out in the Ontario Drug Programs Reference Manual. Please refer to the Executive Officer Notice for more information.

5. Can patients who do not meet the LU criteria request coverage for other conditions for Ozempic through the Exceptional Access Program (EAP)?

Patients who do not meet the new LU criteria for Ozempic will not be considered for other conditions through the EAP. Effective on January 31, 2024, ODB-eligible recipients will only receive funding for Ozempic upon meeting the new LU criteria.

6. My patient is currently on Rybelsus (oral semaglutide) and was switched from Ozempic (injectable semaglutide) when it was not available. Can my patient be switched back to Ozempic injectable?

Rybelsus oral tablets and Ozempic injection are both Limited Use (LU) benefits in the ODB formulary with similar criteria. Switching is permitted for ODB patients upon meeting the LU criteria for each product, which specifies that injectable semaglutide is not funded in combination with oral semaglutide and that coverage is only provided for one dosage format.