Ontario IG Utilization Management Strategy Update

Provincial Agencies Trillium Gift of Life Network, Blood and Specialized Programs
Ministry of Health and Long -Term Care

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IG Utilization Management Strategy Update

Background
The Ontario Ministry of Health and Long-Term Care (MOHLTC) developed its first Ontario IG Utilization Management Strategy in 2012 and it was updated in 2015. The following items reflect the core requirements from these strategies that are still valid in mitigating unsustainable increases in IG utilization.

Scope
The IG Utilization Management Strategy applies to all hospitals where IG is dispensed by either a transfusion service or pharmacy. Physicians and practitioners who order IG must be made aware of and adhere to these directives.

Strategy

2. **Implementation of the MOHLTC IG Request Form.** All new requests for IG must be submitted using the MOHLTC Form. A record of the completed forms must be retained for five (5) years to permit spot audits. The record can be either paper, microfilm or electronic.

3. **Review/Approval for Indications NOT Listed on Request Form.** IG ordered for clinical indications not approved in the guidelines will be subject to screening at the hospital level. A physician appointed to serve as the approving physician, or their designate, must sign the form. NOTE: in the case of a life-threatening situation, the request for IG will be filled immediately.

4. **Dosing Through “Adjusted Body Weight” Calculation.** Ideal dosing reduces both the demand for IG and adverse events like hemolysis. Hospitals may elect to use the dose calculator for all patients to confirm the accuracy of the requested dose, but it must be used for all obese patients. The dose calculator and BMI tool can be found on: [http://transfusionontario.org/en/download/bmi-dose-calculator/](http://transfusionontario.org/en/download/bmi-dose-calculator/)

5. **Evaluating Clinical Outcomes and Need for Reassessment.** For patients being treated regularly over a period of time, a mechanism to evaluate clinical impact must be established. A patient must be evaluated 6 months after the initial
prescription and every 12 months after that. A new MOHLTC request form must be completed initially and for each reassessment, especially for patients on long term therapy. The target shall be to prescribe the minimum effective dose.

6. **No Outdating of Product.** There must be no expiry of IG. Canadian Blood Services does not accept returns, but the Ontario Regional Blood Coordinating Network (ORBCoN) will assist you in the redistribution of this expensive product to another hospital that will use it before it expires.

7. **Use for both IVIG and SCIG.** The MOHLTC request form is to be used for both IVIG and SCIG requests.

### In the Future

The MOHLTC is currently exploring alternate funding models with an expert working group. A letter was sent to patient groups and LHIN CEOs on September 29, 2017 informing them of this initiative. Depending on the solutions developed by this group, there may be upcoming changes to the IG ordering process at Ontario hospitals. The MOHLTC in conjunction with ORBCoN will keep hospitals apprised of any changes.