Nova Scotia Prescription Monitoring Program
Business Plan 2026-2027

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History and Background

The Prescription Monitoring Association of Nova Scotia (PMANS) was incorporated in October 1991. In January 1992, the PMANS began operating a prescription monitoring program to monitor the prescribing and dispensing of specific narcotic and controlled drugs in Nova Scotia with the objective of curbing the overuse, misuse and diversion of these substances. Policy guidelines were established to give the program the ability to monitor specific narcotic and controlled drugs through the use of a triplicate prescription pad. Pharmacists were required through legislation to dispense these drugs only when prescribed on a triplicate prescription pad.

Although PMANS was a voluntary association, it played a vital role in identifying the need to establish a legislative framework to support the operations of a prescription monitoring program. Consequently, *The Prescription Monitoring Act* was approved in October 2004 and subsequently proclaimed along with the Prescription Monitoring Regulations in June 2005. A Prescription Monitoring Board was appointed with the legislated mandate to establish and operate a prescription monitoring program for Nova Scotia. The Administrator of the Program is Medavie Blue Cross (MBC).

The objectives of the Nova Scotia Prescription Monitoring Program (NSPMP) are to promote:

- The appropriate use of monitored drugs; and
- The reduction of abuse or misuse of monitored drugs.

In conjunction with the new legislation, the Administrator implemented an on-line system to receive prescription information for the specified list of monitored drugs. This information had historically been compiled utilizing the part of the triplicate prescription pad pharmacies were required to send to the Program. By the end of 2007, all community pharmacies were submitting this information via the on-line system.

In 2012, the NSPMP launched an online application (eAccess) that enabled prescribers and pharmacists to access program data 24/7. The portal allows prescribers and pharmacists to quickly access the most recent 18 months of NSPMP patient prescribing history prior to prescribing and dispensing monitored drugs.

In 2016, NSPMP fully integrated with the provincial Drug Information System (DIS) to transmit monitored drug claim information directly to NSPMP via multiple daily extracts. Once the extract is received, the monitored drug claims information is uploaded to the NSPMP database and to eAccess.

From 2017-2022, the NSPMP expanded to monitor benzodiazepines and tramadol, and implemented significant changes in response to the Covid-19 pandemic. The pandemic had far-reaching impacts on everyone, impacting healthcare providers and the way the NSPMP delivers support. Throughout the pandemic, the Program adapted to ensure that healthcare providers could continue to effectively and compassionately support Nova Scotians whose healthcare needs included the use of monitored drugs.

Introduction

The development, approval, implementation, and ongoing evaluation of an annual Business Plan are essential for the continued growth and success of the Nova Scotia Prescription Monitoring Program (NSPMP). The Business Plan identifies the Prescription Monitoring Advisory Board's current and planned strategic business objectives in support of its mandate. The Business Plan is developed in collaboration with the Nova Scotia Department of Health and Wellness and the Administrator. The Business Plan draws from various documents and is intended to:

1. Track the progress of ongoing operational/strategic initiatives.
2. Document strategic initiatives planned for the upcoming year.
3. Provide the Program cost projections, based on estimates of operational costs, if known.
4. Provide estimated costs associated with those strategic initiatives which require funding, if known.

Within this Business Plan document, outcomes from the previous period will be reviewed, as well as the planned objectives for the upcoming fiscal period. The final sections of the Business Plan will provide information on the financial structure and cost projections, if known.

Business Planning

Year Two of the Current Strategic Planning Cycle

Outcomes

The following table documents the status of the operational and strategic outcomes established for the current year relating to the NSPMP Strategic Plan. The chart outlines the second-year outcomes of the 2024-2027 Strategic Plan. The status reflected below represents year-to-date accomplishments:

Area	Outcomes (2025-2026)	Status			Comments
		Complete	In Progress	Pending	
Governance	• DHW continuing work toward addition of new public Board members. New criteria have been posted in Public Member application seeking individuals with a first voice or lived experience with mental health, addiction, chronic pain, either for themselves or a loved one.	**X**			• Positions posted. Two new public Board members have been appointed; first Board attendance Feb 2026. • Many Board position terms are expiring. All positions have been confirmed and/or reconfirmed.
	• Re-confirm all other non-public Board member seats.	**X**			• Expressions of interest for the Chair and Vice-Chair positions were gathered and voted on. New appointees came into place March 2026.
	• Chair and Vice-Chair positions on the Board are due for nomination.	**X**			• The NSPMP Advisory Board will be advised of new Federal Controlled Substances Regulations that will become effective Oct 2026; incorporating the temporary HC exemptions.
	• Status of Health Canada Exemption Section 56 (1)		**X**		

Area	Outcomes (2025-2026)	Status			Comments
		Complete	In Progress	Pending	
Brand/ Reputation	• Maintain and enhance, where possible, the NSPMP relationship with law enforcement. • NSPMP continues to present to a variety of external stakeholder groups and educational institutions.	**X** **X**			• NSPMP continues to be active member of Chief of Police Association Drug Committee and contributes to effective discussions and presentations. • NS Practice Ready Group, CPSNS Orientations, NS Chief of Police Association, DHW groups, DEANS, PRC, Dalhousie PGY1 group, Clinical Assessment group.
Financial	• On an ongoing basis, the Advisory Board will be provided overview of program financials for transparency and visibility.	**X**			• With the shift of the Board from Governance to Advisory, the Board has, and will continue, to receive financial updates for visibility into financial operations of the Program.
Data Integrity/ Infrastructure	• Collaborate with the Drug Information System to ensure the NSPMP receives prescription data that is accurate, timely and effectively integrated into the existing NSPMP system.		**X**		• NSPMP continues to work with the DIS to identify any potential solutions which may improve NSPMP data integrity. Items for investigation continue to be: data submitted missing correct health card numbers, prescriber IDs, incorrect volume formats, and dispenses for prescribers that are

Area	Outcomes (2025-2026)	Status			Comments
		Complete	In Progress	Pending	
	• Conduct pharmacy compound dispense audit for data accuracy. • Conduct pharmacy Health Card number submissions accuracy. • Conduct pharmacy submissions of quantities/volumes of monitored drugs typically used in the treatment of Opioid Use Disorder or chronic pain for accuracy.	X X X			not registered. DIS to investigate. • Results showed a variety of compound dispenses submitted with incorrect PIN or DIN or not submitted in general. PMP contacted each pharmacy with troubleshooting documents ensure correct use of Opinions PINs. PMP manually corrected where needed. • Results showed a variety of dispenses from various pharmacies submitted with generic Health Card Numbers. PMP manually corrected where needed. • Results showed a variety of dispenses from various pharmacies submitted with incorrect volumes. PMP contacted each pharmacy with troubleshooting documents to correct submissions. PMP manually corrected where needed.
Data Analysis	• Investigate and compile stimulant dispense data. Analyze data and present findings to various stakeholder groups for	X			• Stimulant dispense data was analyzed. Dispense data for the last five years was compiled. Data showed continued

Area	Outcomes (2025-2026)	Status			Comments
		Complete	In Progress	Pending	
	awareness and possible research activities. • Provide dispense data to variety of research bodies. Provide peer review and Program information input into publications.	X			upward trend in stimulant dispenses. Presentation of data was given to multiple stakeholder groups. Further exploration is desired from a research perspective. Made request of Academic Detailing group for possible research consideration. • Actively participated in and contributed to various research projects. In-depth education of the NSPMP was provided to researchers as well as data validation, peer review and quality analysis.
Programs and Services	• Advocate and facilitate support for education and research that meets the objects of the Program and/or measure its effectiveness.	X			• Ongoing support continues to be provided based on stakeholder requests and opportunities to offer presentations and contributions to papers and publications.

Area	Outcomes (2025-2026)	Status			Comments
		Complete	In Progress	Pending	
Human Resources	• On an ongoing basis, the Advisory Board may provide input regarding the current Program resources and review recommendations regarding any potential adjustments.	**X**			• The Advisory Board continues to receive updates on PMP's staffing structure. Annually, the Advisory Board provides feedback regarding management of the Program and its effectiveness.
Stakeholder Relations and Information Sharing	• Align communications with current programming priorities. Ongoing information sharing and education via Alerts and Bulletins regarding ongoing Health Canada exemptions, expanded scope of pharmacists and ongoing education related to authenticating verbal and fax orders. • Maintain and enhance, where possible, the NSPMP relationship with law enforcement (LE). • Continue to incorporate best practice key messages on prescribing of monitored drugs into communications with prescribers, pharmacists, and	**X** **X** **X**			• Key messaging regarding best practices and program data integrated into resource information and presentations as required. • Ongoing support and education continue to with each Law Enforcement (LE) request and outreach to/from the Program. Continued representation on LE Provincial Drug Committee. • Best practice messaging routinely incorporated into Prescriber Practice Review communications. • Presentations: NS Practice Ready Assessment Program, CPSNS Welcome Collaborative Group, Law Enforcement, PRC, DEANS,

Area	Outcomes (2025-2026)	Status			Comments
		Complete	In Progress	Pending	
	stakeholder groups. Includes written communication and presentations. • Actively contribute aggregate data and provide review of research or publications.	X			Dalhousie PGY1, Clinical Assessment group, various physician and pharmacist groups. • Contributed to research studies and publications: pharmacist opioid prescribing, IWK PICU opioid study and stimulant research study with IWK.

Progress Toward Strategic Plan Goals

Entering its second year of the three-year Strategic Plan, the NSPMP successfully executed a number of operational items in the 2025-2026 year to support its Strategic Plan. Additional operational activities were explored through a variety of engagement activities and surveys with the Advisory Board. The strategic goals for the 2024-2027 Strategic Plan are:

1. Provide strategic support for prescribing monitored drugs to patients for acute, chronic, and long-term care needs.
2. Increase public and professional awareness of how the NSPMP's mandate supports patient care, harm reduction and public safety.
3. Position the Advisory Board as a primary resource for government on its policies related to monitored drugs.
4. Optimize the efficiency and effectiveness of the Program.

Year Three of the New Strategic Planning Cycle (2024-2027)

Year 3 Planned Outcomes

The NSPMP is entering its third year of its current Strategic Planning Cycle (2024-2027). The following table documents goals for the operational and strategic initiatives for Year Three (2026-2027). Key areas of focus for this year include operational items that support the new Strategic Planning goals. Each item is specifically linked to one or more of the strategic goals listed above.

Area	Applicable Strategic Goals	Year Three (2026/2027) Activities/Initiatives to Support Strategic Goals
Governance	• Strategic Goal #3: Position the Advisory Board as a primary resource for government on its policies related to monitored drugs.	• Support and collaborate with DHW to assess current Regulations and Policies, identifying areas to revise. • Assess and review any required communication or changes that may result from law amendments to its Regulations. • Provide orientation and support to newly appointed public Board members as well as any newly designated professional Board positions.
Brand/ Reputation	• Strategic Plan Goal #2: Increase public and professional awareness of how the Nova Scotia Prescription Monitoring Program (NSPMP) mandate supports patient care, harm reduction and public safety.	• Research, design and develop education activities to impact awareness of the NSPMP and its mandate. • Enhance public-facing NSPMP website to include educational material. • Continue to participate in stakeholder presentations and invitations for consultation/collaboration on research studies and publications.
Financial	• Strategic Goal #4: Optimize the efficiency and effectiveness of the program.	• On an ongoing basis, the Advisory Board may review recommendations regarding any potential adjustments to current Program resources and will continue to receive financial reporting results. • Implement identified process or efficiency changes that remove manual effort, increase data integrity and/or provide a more streamlined process for prescribers.
Data Integrity/ Infrastructure	• Strategic Goal #1: Provide strategic support for prescribing monitored drugs to patients for acute, chronic, and long-term care needs. • Strategic Goal #4: Optimize the efficiency and effectiveness of the program.	• Collaborate with the Drug Information System to ensure the NSPMP receives prescription data that is accurate, timely and effectively integrated into the existing NSPMP system. Continue to work with the DIS to identify any potential issues and solutions which may improve NSPMP data integrity. • Report regularly to the Advisory Board regarding the effectiveness of efforts to improve data integrity and volume of data errors tracked.
Business Process Excellence	• Strategic Goal #4: Optimize the efficiency and effectiveness of the Program.	• Continual review of processes to improve quality, efficiency and volume of reviews, including reduction of manual data fixes. • Monitor, evaluate and adjust intervention processes with a focus on reducing administrative burden on prescribers including DUR processes. Review DUR criteria and selection stats to assess effectiveness of DURs (specifically DUR 2 and 4).

Area	Applicable Strategic Goals	Year Three (2026/2027) Activities/Initiatives to Support Strategic Goals
Programs and Services	• Strategic Goal #1: Provide strategic support for prescribing monitored drugs to patients for acute, chronic, and long-term care needs. • Strategic Plan Goal #2: Increase public and professional awareness of how the Nova Scotia Prescription Monitoring Program (NSPMP) mandate supports patient care, harm reduction and public safety.	• Ongoing support will be provided to prescribers. • Ongoing pharmacy and medical consultations will be available to all prescribers. • Continue to review monitoring activities and criteria for trends/flags and offer resources and support as needed. Research, design and develop educational material for prescribers and patients with risks of monitored drugs and tips to ensure patient safety. • Continue to participate in stakeholder presentations and invitations for consultation/collaboration on research studies and publications.
Information Sharing	• Strategic Plan Goal #2: Increase public and professional awareness of how the Nova Scotia Prescription Monitoring Program (NSPMP) mandate supports patient care, harm reduction and public safety. • Strategic Plan Goal #3: Position the Advisory Board as a primary resource for government on its policies related to monitored drugs.	• Leverage key guidelines and best practice support. • Continue the collaborative work of the Practice Review Committee related to prescriber reviews and DUR cases. • Continue to participate in DEANS Committee meetings. • Ongoing support continues to be provided through individual Law Enforcement (LE) requests. • Enhance public-facing NSPMP website to include education section. • Continue to participate in stakeholder presentations and invitations for consultation/collaboration on research studies and publications.
Human Resources	• Strategic Goal #4: Optimize the efficiency and effectiveness of the Program.	• Monitor and assess the impact to workload resulting from population growth, additional prescribers, new prescriber types and accumulation of manual data fixes. • Monitor and assess the impact to workload and resources resulting from the increased operational activities related topublic and professional awareness of the NSPMP.
Stakeholder Relations	• Strategic Goal #1: Provide strategic support for prescribing monitored drugs to patients for	• Continue the collaborative work of the Practice Review Committee related to prescriber reviews and DUR cases. • Continue to participate in DEANS Committee meetings.

Area	Applicable Strategic Goals	Year Three (2026/2027) Activities/Initiatives to Support Strategic Goals
	acute, chronic, and long-term care needs. • Strategic Plan Goal #2: Increase public and professional awareness of how the Nova Scotia Prescription Monitoring Program (NSPMP) mandate supports patient care, harm reduction and public safety.	• The NSPMP will continue to be active member of NS Chief of Police Association Drug Committee and contribute to effective discussions and presentations. • Continue to deliver presentations to NS Practice Ready Group, CPSNS Orientations, Dalhousie University, Atlantic Mentorship Network and invitations for consultation/collaboration on research studies and publications. • Contribute to the finalization of changes to Regulations and associated Policies.

Program Cost Projections (2024-2025 and 2026-2027)

The Administrator is funded to operate the NSPMP in accordance with the *Prescription Monitoring Act* and Regulations and is based on Schedule C of the Services Agreement between Medavie Inc. and the Province of Nova Scotia (current contract signed 2021). The current funding model was agreed upon and came into effect on June 1, 2021. Under this model, Medavie Inc. bills a single set fixed annual fee for the operational cost of administering the NSPMP to the Nova Scotia Department of Health & Wellness.

Single Set Fixed Annual Fee:

Fixed annual fee costs for the NSPMP under the model include the overhead for the program. The base annual fixed cost increases each year based on an annual economic price adjustment model as stipulated in the contract (if applicable).

Flow-Through Costs:

Medavie processes flow-through costs as part of the operational envelope, that are charged directly to the Department of Health and Wellness.

These costs may include (but not limited to):

1. Board/Committee Expenses: all expenses related to Board and Committee meetings.
2. Prescription pad costs: materials, production, postage, couriers.
3. Subject Matter Experts externally contracted.
4. Consultant fees (i.e., Medical Consultant)

Fixed Operational Costs under the Service Agreement

(Comparison of Actual and Projected Costs)

Cost Area	Projected 2025/26 ($)	Actual 2025/26 ($)	Variance	Projections 2026/2027
Fixed Fees	$1,481,898	$1,481,898	$0	To be determined
Flow Through	$82,760	$69,128	$13,631	Estimate below
Total	$1,564,658	$1,551,026	$13,631	To be determined

Notes:

1. Flow-through costs may also include additional funds for operational activities resulting from the new Strategic Plan (NSPMP).
2. Breakdown of flow-through estimate is below.

New strategic initiatives and planning for the new strategic cycle are underway. Costs related to strategic initiatives will be determined once outlined. The Strategic Initiatives flow-through section is a placeholder. The need for any additional funding to support strategic initiatives outside the contractual agreement is determined through the change request process*.

***A change request shall be submitted to estimate the time and cost associated with any new work for strategic plan items and/or may be contracted to an external consultant or vendor.**

Estimated Operational Flow-Through Costs 2026-2027	
Cost Area	**Projected Cost**
Ongoing Operations: Medical Consultant, Travel, Prescription Pads, Postage, Board and Committee Fees	$153,500
Plus Costs Related to Strategic Initiatives:	
Initiative	**Projected Cost**
Strategic Planning Work placeholder	Estimated $50,000