

## Pharmacare

**RNAO believes that a national pharmacare program covering all medically necessary drugs, without means testing, user-fees and/or co-payments is the way to go. Do you agree with RNAO?**

Canada is the only developed country with a universal health-care system that lacks pharmacare.<sup>1</sup> Canadians are hit by a double whammy: not only do most people not have access to public drug coverage, but the absence of the common purchasing of pharmacare means that they face among the highest drug prices in the Organization for Economic Co-operation and Development (OECD) - about 35 per cent higher than the OECD median.<sup>2</sup> Canada has the highest per capita drug expenditure in the OECD after the US.<sup>3</sup> The burden falls disproportionately on those who need prescription drugs.

In the absence of a national pharmacare program, some Canadians rely on by a patchwork of existing drug plans,<sup>4</sup> while the rest have to pay out of pocket or obtain private insurance. Currently, the Ontario Drug Benefit Program covers senior citizens and those receiving social assistance, while the Trillium Drug Program subsidizes those whose costs are high relative to their income.<sup>5 6</sup> In 2015, 40.8 per cent of Ontario prescription expenditures were covered by the provincial government, with the federal government covering 1.1 per cent and the Workplace Safety and Insurance Board paying 0.6 per cent. The rest is paid for privately - 57.5 per cent.<sup>7</sup> Confidentiality considerations make the breakdown of provincial figures unavailable, but nationally 35.0 per cent of prescription drug expenditures are paid by private insurers while 21.8 per cent are out-of-pocket.<sup>8</sup> Public drug spending in Ontario also consumes nine per cent of the health budget - up from 1.2 per cent in 1975.<sup>9</sup> The province has an interest in pharmacare and this is evident through the Minister of Health and Long-Term Care, Dr. Eric Hoskins, who has written op-eds calling for a national pharmacare program,<sup>10 11</sup> and who has been working with health counterparts to that same end.<sup>12</sup>

A commentary written for the C.D. Howe Institute neatly summarizes the case for pharmacare in Canada:<sup>13 14</sup> It would deliver equitable access to medicines; it would protect the ill from exorbitant costs for drugs; and it would result in a net saving of money. The savings come from: reduced administrative, marketing and regulatory costs (due to a single-payer system); from pooling of risk over larger populations; from value-for-money testing; from use of purchasing power to reduce drug prices; and from more rational use of health system resources (Uninsured services tend to be underused because of affordability concerns and this leads to an increased risk of costly health complications).

In a related study, the same authors make the case against means testing and co-payments for pharmacare.<sup>15</sup> A 2010 study quantified the potential savings of a comprehensive first-dollar pharmacare programs for Canadians at up to \$10.7 billion annually (or 42.8 per cent of total spending on pharmaceuticals).<sup>16</sup> A 2015 Canadian Medical Association Journal article provided a range of estimates

of saving: \$7.3 billion expected, with savings ranging from \$4.2 billion to \$9.4 billion (worst-case scenario to best-case scenario). Expected savings to the private sector would be \$8.2 billion, with net costs to government rising by about \$1.0 billion.<sup>17</sup>

An important component of a national pharmacare program would be a national or nation-wide<sup>18</sup> evidence-based formulary and guidance on optimal prescribing.<sup>19</sup> <sup>20</sup>A national/nation-wide formulary helps to pool information on safety, effectiveness and cost, which is particularly important when it comes to dealing with growing pool of drugs targeted at rare diseases, where the evidence is based on very small samples and where manufacturers supply the studies while exerting strong lobbying pressure for coverage of very expensive drugs.<sup>21</sup>

An impressive list of health and other organizations is calling for a national pharmacare program: RNAO,<sup>22</sup> <sup>23</sup>Canadian Federation of Nurses Unions,<sup>24</sup> <sup>25</sup> <sup>26</sup> Canadian Nurses Association,<sup>27</sup> Canadian Medical Association,<sup>28</sup> <sup>29</sup> Standing Senate Committee on Social Affairs, Science and Technology,<sup>30</sup> Canadian Health Coalition,<sup>31</sup> <sup>32</sup> Canadian Association of Retired Persons,<sup>33</sup> <sup>34</sup> Canadian Doctors for Medicare,<sup>35</sup> <sup>36</sup> Union des consommateurs,<sup>37</sup> the Nurse Practitioners' Association of Ontario, the Canadian Association of Community Health Centres, the Association of Ontario Health Centres, the Association of Family Health Teams of Ontario, Unifor, the College of Family Physicians of Canada, Health Providers Against Poverty, the United Steelworkers, the Canadian Diabetes Association, the Phoenix Centre for Families and Children, the National Council of Women Canada, The Canadian Treatment Action Council, the Council of Canadians, the Canadian AIDS Society, the Association of Local Public Health Agencies, the National Union of Public and General Employees, the Canadian Union of Public Employees, 25 in 5: Network for Poverty Reduction, Planned Parenthood Toronto, the Human Development Council, the Child Poverty Action network, Alternatives North, and the Centre for Social Justice.<sup>38</sup> There are very active campaigns for a national pharmacare program, including the Campaign for National Drug Coverage of which RNAO is a founding member (and which has a long list of endorsing organizations,<sup>39</sup> only some of whom are listed above),<sup>40</sup> and the Campaign for a National Drug Plan.<sup>41</sup> Newspapers such as the Toronto Star have also called for a national pharmacare program, and not just some national bulk buying arrangement.<sup>42</sup>

Members of the public agree. According to a May 22, 2013 poll by EKOS, 78 per cent of Canadian respondents supported a universal public drug plan for all necessary prescription drugs.<sup>43</sup> Support was even stronger in a July 2015 Angus Reid poll in which 91 per cent of those polled supported the concept of pharmacare in Canada, and 87 per cent supported adding prescription drugs to the universal health coverage of Medicare. One reason for the overwhelming support is the fact that 23 per cent of respondents were in households that had one or more members who were not taking medicines as prescribed because of the cost.<sup>44</sup> <sup>45</sup>

With the October 2015 election, the federal context has changed and pharmacare advocates are now looking to Ottawa for leadership on this issue given the interest across the country. On January 20 and 21, federal and provincial/territorial health ministers met in Vancouver to lay the groundwork for a new Health Accord, and they promised to work together on drug policy.<sup>46</sup> The federal House of Commons

Standing Committee on Health has been holding hearings on the development of a national pharmacare program,<sup>47</sup> and this represents a good current opportunity to implement a pharmacare program that would provide universal access to essential medications, without means testing, user fees and/or co-payments.

## References:

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<sup>1</sup> Morgan, S.G., Daw, J.R., and Law, M.R. (2013). *Rethinking Pharmacare in Canada*. C.D. Howe Institute, pp. 1, 3. Retrieved September 15, 2016 at

[https://www.cdhowe.org/sites/default/files/attachments/research\\_papers/mixed/Commentary\\_384\\_0.pdf](https://www.cdhowe.org/sites/default/files/attachments/research_papers/mixed/Commentary_384_0.pdf) .

<sup>2</sup> Gagnon, M-A. (2016). *Further Information Regarding the Implementation of a National Pharmacare Program*. Submitted to the House of Commons Standing Committee on Health. April 18. Retrieved September 15, 2016 at <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8201423/br-external/CarletonUniversity-Gagnon-9341046-2016-04-18-e.pdf>.

<sup>3</sup> Ibid.

<sup>4</sup> Canada Online. (2014). *Provincial Prescription Drugs Insurance Programs*. Retrieved September 15, 2016 at <http://canadaonline.about.com/od/prescriptiondrugsprograms/>.

<sup>5</sup> Ontario. (2013). *A Guide to Understanding Ontario's Drug Programs*. Retrieved September 15, 2016 at [http://www.forms.ssb.gov.on.ca/mbs/ssb/forms/ssbforms.nsf/GetFileAttach/014-S46850E-87~15/\\$File/014-S46850E-87.pdf](http://www.forms.ssb.gov.on.ca/mbs/ssb/forms/ssbforms.nsf/GetFileAttach/014-S46850E-87~15/$File/014-S46850E-87.pdf).

<sup>6</sup> Advocating for a Poverty Free Ontario. (2013) *Pharmacare: What is Publicly Funded in Ontario*. August 13. Retrieved September 15, 2016 at <http://povertyfreeontario.blogspot.ca/2013/08/pharmacare-what-is-publicly-funded-in.html>.

<sup>7</sup> Canadian Institute for Health Information. (2015). *National Health Expenditure Trends, 1975 to 2015*. Table G.6.1: Expenditure on Drugs by Type, by Source of Finance, Ontario, 1985 to 2015. Percentage calculated by RNAO. CIHI suppresses provincial-level data on private insurance payments, so we don't know the breakdown between out-of-pocket expenses and private insurance.

<sup>8</sup> Canadian Institute for Health Information. (2015). Op. Cit. Table G.14.1: Expenditure on Drugs by Type, by Source of Finance, Canada, 1985 to 2015. Percentage calculated by RNAO.

<sup>9</sup> Canadian Institute for Health Information. (2015). Op. Cit. Table D.4.6.2: Provincial Government Health Expenditure, by Use of Funds, Ontario, 1975 to 2015 -- Current Dollars.

<sup>10</sup> Hoskins, E. (2014). Eric Hoskins: The time for national pharmacare has come. Dec. 15. *Toronto Star*. Retrieved September 15, 2016 at [http://www.thestar.com/opinion/commentary/2014/12/15/eric\\_hoskins\\_the\\_time\\_for\\_national\\_pharmacare\\_has\\_come.html](http://www.thestar.com/opinion/commentary/2014/12/15/eric_hoskins_the_time_for_national_pharmacare_has_come.html).

<sup>11</sup> Hoskins, E. (2014). Why Canada needs a national pharmacare program. *Globe and Mail*. October 14. Retrieved September 15, 2016 at <http://www.theglobeandmail.com/globe-debate/why-canada-needs-a-national-pharmacare-program/article21086014/>.

<sup>12</sup> Hepburn, B. (2016). *Eric Hoskins' quiet campaign for pharmacare: Hepburn*. April 23. Retrieved September 15, 2016 from <https://www.thestar.com/opinion/commentary/2016/04/23/eric-hoskins-quiet-campaign-for-pharmacare-hepburn.html>.

<sup>13</sup> Morgan, S.G., Daw, J.R., and Law, M.R. (2013). Op. Cit.

<sup>14</sup> See also Canadian Association of Retired Persons. (2012). *The Case for a National Drug Strategy*. Retrieved September 15, 2016 at <http://www.carp.ca/2012/09/20/the-case-for-a-national-drug-strategy/>.

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- <sup>15</sup> Morgan, S.G., Daw, J.R., and Law, M.R. (2014). *Are Income-Based Public Drug Benefit Programs Fit for an Aging Population?* IRPP. No. 50, Dec. Retrieved September 15, 2016 at <http://irpp.org/wp-content/uploads/2014/12/study-no50.pdf>.
- <sup>16</sup> Gagnon, M. and Hébert, G. (2010). *The Economic Case for Universal Pharmacare*. Canadian Centre for Policy Alternatives and Institute de recherché et d'informations socio-économiques. P. 10. Retrieved September 15, 2016 at [https://s3.amazonaws.com/policyalternatives.ca/sites/default/files/uploads/publications/National%20Office/2010/09/Universal\\_Pharmacare.pdf](https://s3.amazonaws.com/policyalternatives.ca/sites/default/files/uploads/publications/National%20Office/2010/09/Universal_Pharmacare.pdf).
- <sup>17</sup> Morgan, S.G., Law, M., Daw, J.R., Abraham, L., and Marin, D. (2015). Estimated cost of universal public coverage of prescription drugs in Canada. *Canadian Medical Association Journal*, April 21, 187(7), p. 401. Retrieved September 15, 2016 from <http://www.cmaj.ca/content/187/7/491.full.pdf>.
- <sup>18</sup> A nation-wide formulary would maximize the benefits of formularies, but it need not be owned federally. Boothe, K. (2016). *Brief to the House of Commons Standing Committee on health: National Pharmacare Program*. April 10. P. 2. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8215558/br-external/McMasterUniversity-Boothe-2016-04-20-e.pdf>.
- <sup>19</sup> The CMA defines optimal prescribing as “the prescription of a medication that is: the most clinically appropriate for the patient’s condition; safe and effective; part of a comprehensive treatment plan; and the most cost-effective available to best meet the patient’s needs.” Canadian Medical Association. (2016). *National Pharmacare in Canada: Getting There from Here: Submission to the House of Commons Standing Committee on Health*. June 1. P. 9. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8354361/br-external/CanadianMedicalAssociation-e.pdf>
- <sup>20</sup> Health Quality Ontario notes: “A good pharmacare plan would focus not just on providing coverage to the entire population but also on improving the quality of prescribing. The development of a good pharmacare program would require ongoing evaluation and refinement.” Health Quality Ontario. (2016). *To the Members of the Standing Committee on Health*. April 20. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8214743/br-external/HealthQualityOntario-Dhalla-2016-04-20-e.pdf>.
- <sup>21</sup> Herder, M. (2016). *House of Commons’ Standing Committee on Health: Development of a National Pharmacare Program*. May 4. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8254292/br-external/DalhousieUniversity-Herder-2016-05-04-e.pdf>.
- <sup>22</sup> Registered Nurses’ Association of Ontario. (2010). *RNAO says economic analysis shows Canada can't afford not to have pharmacare*. Retrieved September 15, 2016 at <http://rnao.ca/news/media-releases/RNAO-says-economic-analysis-shows-Canada-cant-afford-not-to-have-pharmacare>.
- <sup>23</sup> RNAO. (2016). *Nurses Call for a National Pharmacare Program: RNAO Submission to the Standing Committee on Health*. June 24. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8401611/br-external/RegisteredNursesAssociationOfOntarioRNAO-e.pdf>.
- <sup>24</sup> Canadian Federation of Nurses Unions. (2011). *A National Pharmacare Strategy*. November. Retrieved September 15, 2016 from <http://nursesunions.ca/sites/default/files/2011.backgrounder.pharmacare.e.pdf>.
- <sup>25</sup> White, J. (n.d.). *Speaking out for public pharmacare*. Retrieved September 15, 2016 at [http://nursesunions.ca/sites/default/files/speaking\\_out\\_for\\_PHARMACARE-en.pdf](http://nursesunions.ca/sites/default/files/speaking_out_for_PHARMACARE-en.pdf).
- <sup>26</sup> Silas, L. (2016). *Submission from the Canadian Federation of Nurses Unions to the House of Commons Standing Committee on Health regarding The Development of a national Pharmacare Program*. June 24. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8400664/br-external/CanadianFederationOfNursesUnions-e.pdf>.
- <sup>27</sup> Canadian Nurses Association. (2016). *Pan-Canadian Pharmaceutical Strategy: Recommendations to Improve Access to Affordable Prescription Medications: Brief prepared for the House of Commons Standing Committee on Health*. May. Retrieved September 15, 2016 from

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<http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8289787/br-external/CanadianNursesAssociation-e.pdf>.

<sup>28</sup> Canadian Medical Association. (2013). Healthier Generations for a Prosperous Economy: Canadian Medical Association 2013-2014 pre-budget consultation submission to the Standing Committee on Finance. November 6. P. 4. "Recommendation # 7: The CMA recommends that the federal government, in consultation with the provincial and territorial governments, health care providers, the life and health insurance industry and the public, establish a program of comprehensive prescription drug coverage to be administered through reimbursement of provincial/territorial and private prescription drug plans to ensure that all Canadians have access to medically necessary drug therapies " Retrieved September 15, 2016 from [https://www.cma.ca/Assets/assets-library/document/en/advocacy/Pre-Budget-Submission-2013-2014\\_en.pdf](https://www.cma.ca/Assets/assets-library/document/en/advocacy/Pre-Budget-Submission-2013-2014_en.pdf).

<sup>29</sup> Canadian Medical Association. (2016). Op. Cit.

<sup>30</sup> Standing Senate Committee on Social Affairs, Science and Technology. (2012). *Time for Transformative Change: A Review of the 2004 Health Accord*. P. xviii. Retrieved September 15, 2016 from <http://www.parl.gc.ca/content/sen/committee/411/soci/rep/rep07mar12-e.pdf>. "Recommendation 28: That the federal government work with the provinces and territories to develop a national pharmacare program based on the principles of universal and equitable access for all Canadians; improved safety and appropriate use; cost controls to ensure value for money and sustainability; including a national catastrophic drug-coverage program and a national formulary."

<sup>31</sup> Canadian Health Coalition. (n.d.). *The Case for Pharmacare*. Retrieved September 15, 2016 from <http://healthcoalition.ca/wp-content/uploads/2012/11/9e.pdf>.

<sup>32</sup> Canadian Health Coalition. (2016). Brief to HESA for the Study of the Development of a National Pharmacare Program: A National Public Drug Plan for All. May 16. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8290924/br-external/CanadianHealthCoalition-2016-05-16-e.pdf>.

<sup>33</sup> Canadian Association of Retired Persons. (2013). *Canada Needs Pharmacare*. Retrieved September 15, 2016 at <http://www.carp.ca/2013/06/28/canada-needs-pharmacare/>.

<sup>34</sup> Canadian Association of Retired Persons. (2010). *CARP Pharmacare Report: October 7 2010*. Retrieved January 2, 2014 at <http://www.carp.ca/o/pdf/pharmacare%20report%20october%208th%202010.pdf>.

<sup>35</sup> Canadian Doctors for Medicare. (2013). *RX: National Pharmacare*. Retrieved September 15, 2016 at [http://www.canadiandoctorsformedicare.ca/images/2013-07-21\\_CoF\\_Pharma\\_.pdf](http://www.canadiandoctorsformedicare.ca/images/2013-07-21_CoF_Pharma_.pdf).

<sup>36</sup> Canadian Doctors for Medicare. (2016). *Statement by Monika Dutt, Chair, Canadian Doctors for Medicare for the House of Commons' Standing Committee on Health (HESA) regarding the Development of a national Pharmacare Program*. June 6. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8362704/br-external/CanadianDoctorsForMedicare-e.pdf>.

<sup>37</sup> Union des consommateurs. (2016). *Development of a National Pharmacare Program*. May 12. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8290926/br-external/UnionDesConsommateurs-9365324-e.pdf>.

<sup>38</sup> Campaign for National Drug Coverage. (2015). *Organizations endorsing the Campaign for National Drug Coverage*. Retrieved September 15, 2015 from <http://campaign4nationaldrugcoverage.ca/who-we-are/supporters/>. This and the earlier unreferenced organizations' names were drawn from the same source.

<sup>39</sup> Campaign for National Drug Coverage. (2016). *Supporters: Organizations endorsing the Campaign for National Drug Coverage*. Retrieved September 15, 2016 at <http://campaign4nationaldrugcoverage.ca/who-we-are/supporters/>.

<sup>40</sup> Campaign for National Drug Coverage. (2015) Retrieved September 15, 2016 from <http://campaign4nationaldrugcoverage.ca/>.

<sup>41</sup> Canadian Health Coalition. (n.d.). Op. Cit.

<sup>42</sup> Toronto Star. (2016). *Bulk-buying is fine but pharmacare should be the real goal: Editorial*. January 18. Retrieved September 15, 2016 at <http://www.thestar.com/opinion/editorials/2016/01/18/bulk-buying-is-fine-but-pharmacare-should-be-the-real-goal-editorial.html>.

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<sup>43</sup> EKOS. (2013). *Canadian Views on Prescription Drug Coverage*. May 22. Retrieved September 15, 2016 at [http://www.ekospolitics.com/wp-content/uploads/press\\_release\\_may\\_22\\_2013.pdf](http://www.ekospolitics.com/wp-content/uploads/press_release_may_22_2013.pdf).

<sup>44</sup> Angus Reid Institute. (2015). *Prescription drug access and affordability an issue for nearly a quarter of all Canadian households*. Retrieved September 15, 2016 from <http://angusreid.org/prescription-drugs-canada/>.

<sup>45</sup> Kurl, S. (2016). *Briefing Note to: House of Commons' Standing Committee on Health: Canadian Public Opinion Regarding a National Pharmacare Program*. Angus Reid Institute. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Content/HOC/Committee/421/HESA/Brief/BR8352162/br-external/AngusReidInstitute-e.pdf>.

<sup>46</sup> BC Gov News. (2016). *Statement of the Federal-Provincial-Territorial Ministers of Health*. Retrieved September 15, 2016 at <https://news.gov.bc.ca/releases/2016HLTH0004-000070>.

<sup>47</sup> Parliament of Canada Standing Committee on Health. (2016). *Development of a National Pharmacare Program*. Retrieved September 15, 2016 from <http://www.parl.gc.ca/Committees/en/HESA/StudyActivity?studyActivityId=8837577>.