



CLOSING THE COVERAGE GAP

Pan-Canadian Pharmacare



CANADIAN
PHARMACISTS
ASSOCIATION

ASSOCIATION DES
PHARMACIENS
DU CANADA

Prescription drug coverage for all Canadians

While the vast majority of Canadians have access to prescription drugs, some Canadians can't afford their medications. Studies suggest that one in ten Canadians either don't have drug coverage or don't have enough coverage to access the treatments they need.¹

The status quo is not acceptable — this gap in our healthcare system must be addressed. As the health care professionals closest to this issue, Canadian pharmacists are committed to ensuring that all patients can access medically necessary medication, regardless of income.

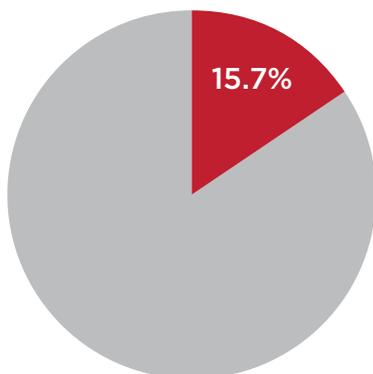
But how should the system change to meet this need? The Canadian Pharmacists Association, which represents over 40,000 pharmacists across the country, has gathered a range of evidence to help inform the conversation, including:

- key principles and priorities to guide pharmacare reform;
- stakeholder consultations and a national survey, and;
- research and analysis of proposals to improve access to medication.

There are many options on the table which could bridge the gap and provide Canadians with the coverage they need. Some models could be implemented relatively quickly, while others (like as a national, single-payer program) would require significant reforms. In the short term, Canada could build on public and private pharmacare programs already in place in order to close coverage gaps while protecting patients' existing access to medications.

Regardless of policymakers' chosen approach, CPhA is committed to ensuring that Canadians receive the best possible care. Any pharmacare model (be it revolutionary or evolutionary) should be designed to provide best possible access to medications and services, not simply the lowest price.

DRUG SPENDING — ONE PIECE OF THE PUZZLE



- ✓ **Drugs represent less than 15.7% of total health spending in Canada.²**
- ✓ **When used appropriately, drugs are a low-cost way to improve health outcomes because they can help limit spending on surgery and emergency care.**

Pharmacists are leading

Pharmacists are trusted and accessible health care providers who play a vital role on the patient care team. Trained and experienced pharmacists in nearly 10,000 locations across Canada help improve patient outcomes and save our health care system money by managing chronic conditions, monitoring drug interactions, counseling lower cost options, promoting medication adherence, and de-prescribing unnecessary medication. Pharmacists' scope of practice is growing. This gives pharmacists a key role to play in supporting safe and appropriate medication use as part of any pharmacare system.

Pharmacists' Scope of Practice in Canada

Scope of Practice ¹		Province/Territory												
		BC	AB	SK	MB	ON	QC	NB	NS	PEI	NL	NWT	YT	NU
Prescriptive Authority (Schedule 1 Drugs) ¹	Independently, for any Schedule 1 drug	X	✓ ⁵	X	X	X	X	X	X	X	X	X	X	X
	In a collaborative practice setting/agreement	X	✓ ⁵	✓ ⁵	✓ ⁵	X	X	✓	✓	X	X	X	X	X
	Initiate ²													
	For minor ailments/conditions	X	✓	✓	✓ ⁵	X	✓	✓	✓	✓ ⁵	✓	X	X	X
	For smoking/tobacco cessation	X	✓	P	✓ ⁵	✓	✓	✓	✓	✓ ⁵	✓	X	X	X
In an emergency	X	✓	✓	✓	X	X	✓	✓	✓	X	X	X	X	
Adapt ^{3/} Manage	Independently, for any Schedule 1 drug ⁴	X	✓ ⁵	X	X	X	X	X	X	X	X	X	X	
	Independently, in a collaborative practice ⁴	X	✓ ⁵	✓ ⁵	✓ ⁵	X	X	✓	✓	X	X	X	X	
	Make therapeutic substitution	✓	✓	✓	X	X	X	✓	✓	✓	✓	X	X	X
	Change drug dosage, formulation, regimen, etc.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	X	X	X
	Renew/extend prescription for continuity of care	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	X	X
Injection Authority (SC or IM) ^{1,5}	Any drug or vaccine	X	✓	✓	✓	X ⁷	X ⁷	✓	X	✓	✓	X	X	X
	Vaccines ⁶	✓	✓	✓	✓	X	X	✓	✓	✓	✓	X	X	X
	Travel vaccines ⁶	✓	✓	✓	✓	P	X	✓	✓	✓	✓	X	X	X
	Influenza vaccine	✓	✓	✓	✓	✓	X	✓	✓	✓	✓	X	X	X
Labs	Order and interpret lab tests	X	✓	P ⁸	✓ ⁹	X	✓	P	✓	P	X	X	X	X
Techs	Regulated pharmacy technicians	✓	✓	✓	✓ ¹⁰	✓	X	✓	✓	✓	✓	X	X	X

1. Scope of activities, regulations, training requirements and/or limitations differ between jurisdictions. Please refer to the pharmacy regulatory authorities for details.

2. Initiate new prescription drug therapy, not including drugs covered under the *Controlled Drugs and Substances Act*.

3. Alter another prescriber's original/existing/current prescription for drug therapy.

4. Pharmacists independently manage Schedule 1 drug therapy under their own authority, unrestricted by existing/initial prescription(s), drug type, condition, etc.

5. Applies only to pharmacists with additional training, certification and/or authorisation through their regulatory authority.

6. Authority to inject may not be inclusive of all vaccines in this category. Please refer to the jurisdictional regulations.

7. For education/demonstration purposes only.

8. Ordering by community pharmacists pending health system regulations for pharmacist requisitions to labs.

9. Authority is limited to ordering lab tests.

10. Pharmacy technician registration available through the regulatory authority (no official licensing).

- ✓ Implemented in jurisdiction
- P Pending legislation, regulation or policy for implementation
- X Not implemented

As healthcare professionals working on the front lines of our Canadian healthcare system, pharmacists are committed to building consensus support for a sustainable pharmacare model that promotes the best possible health outcomes for Canadian patients.

CPhA's key principles and priorities for Pharmacare

Any future pharmacare model must address four key priorities:



Provide equitable coverage for all Canadians.



Protect Canadians from undue financial hardship.



Ensure patient access to a stable supply of clinically and cost-effective medications.



Provide access to the full range of pharmacy services to achieve better health, better care and better value.

What Canadians think about Pharmacare

Any change to the current system will need the support of Canadians in order to be successful. Based on our national survey, here is what Canadians are saying:

- 79% Canadian's support the idea of a pan-Canadian pharmacare program, but they are concerned about limiting choice, administration and costs.
- Canadians strongly support pharmacists and pharmacy services as part of a pan-Canadian pharmacare program.
- A plurality of Canadians support a pharmacare program that targets those without an existing public or private plan.

Any change to the current system will need the support of Canadians in order to be successful. Based on our national survey, here is what Canadians are saying:

79% of Canadians support the idea of a pan-Canadian pharmacare program. However, they are concerned about limiting choice, administration and costs.



74% of Canadians are concerned about replacing their current private prescription drug plan with a public plan that would have fewer choices



79% of Canadians are concerned about increased cost to governments if patients use more prescription drugs than they do now



85% of Canadians are concerned about the ability of governments to administer the plan efficiently and effectively



79% of Canadians are satisfied with their current prescription drug plan

Canadians strongly support pharmacists and pharmacy services as part of a pan-Canadian pharmacare program.



78% want a pan-Canadian pharmacare program to cover the professional fees and services provided by pharmacists to dispense, monitor and counsel patients on effective drug use



77% want a pan-Canadian pharmacare program to cover other health advice and professional services provided by pharmacists, such as vaccines, smoking cessation services, medication reviews and screening for medical conditions, such as diabetes

A plurality of Canadians support a pan-Canadian pharmacare program that targets those without an existing public or private plan.



31% of Canadians believe pharmacare should cover all Canadians and replace all existing government and private insurance plans



46% believe pharmacare should only cover those Canadians who are not currently covered through some other existing government or private plan



23% believe pharmacare should only focus on those Canadians facing extreme circumstances (e.g. catastrophic drug coverage; covering expensive drugs for rare diseases)

Made in Canada options to close the coverage gap

CPhA's research has identified three incremental pharmacare options that build on Canada's existing system, and could be implemented more quickly than a national-single payer program. These options could ensure that no Canadian patient is without prescription drug coverage, while also protecting patients' existing access to medications.³ Canadians who are already insured would not be affected.

With these approaches, governments could provide more immediate relief to the estimated 10% of Canadians who can't afford their medications by scaling up existing programs, while taking the time required to consider long-term solutions.

1. Modified Quebec Model

Quebec's pharmacare approach — which obliges all citizens to be enrolled in either a public or private plan — would be extended to all other provinces. Under this model, Canadians who are not eligible for coverage on a private plan would have to enroll in the public drug plan of their province.

This model would be funded through premiums similar to those for private plans of large organizations. The modified Quebec model would cost government approximately \$2.1 billion.

2. PEI Generic Model

Prince Edward Island's approach to funding generic products would be extended to all other provinces. Under this model, uninsured Canadians would be reimbursed by their provincial government for drug costs exceeding \$19.95 per prescription, with access to a formulary that includes generic, multi-source products only.

This model would cost governments and taxpayers an estimated \$93 million more than what they currently fund. While it would provide some form of coverage for all Canadians, a generics-only plan would not provide Canadians with access to newer therapies.

3. Private Payer Variation

This approach is similar to the “Modified Quebec Model”. The key difference, however, is that private plans would be responsible for covering uninsured Canadians. Private insurers would be required to offer all residents a basic prescription drug plan covering all drugs listed on the public provincial formulary. This would be offered at a modest premium because basic coverage removes the risk of only having high cost patients signing up and creates economies of scale.

This option would entail no additional cost to governments and taxpayers. It would impose an additional cost of approximately \$2.3 million to private drug plans.

A ‘National Pharmacare Program’ for Canada?

In our work to identify feasible short-term options to close the coverage gap, we also reviewed a national, single-payer model for pharmacare. Under this approach, Canadians would become beneficiaries of a national, single and publicly funded pharmacare program. This system would replace the existing mix of public and private drug insurance in Canada.

While this model would ensure that all Canadian have access to the same prescription drug insurance, CPhA is concerned about potential for negative impacts on patient care. As policy-makers mull the long-term options, these tradeoffs should be accounted for in the design of any future program:

Inappropriate Drug Therapy

A national pharmacare model could limit Canadians’ access to the most appropriate drug therapy. Under this model, patient choice and clinicians’ autonomy to prescribe the right individual treatment would be curtailed due to fewer medications being covered than the existing mix of public and private plans. Pharmacists know that certain medications don’t work well for everyone. Limiting the range of treatment options is a one-size-fits-all solution that will negatively impact patient health outcomes.

➔ Risk of Drug Shortages

In order to minimize costs to government, a national pharmacare model may rely on bulk purchasing and sole-source drug tendering. These measures are associated with increased risk of drug shortages. They can lead to detrimental health outcomes for patients and lead to significant disruptions in the healthcare system, and should be managed in the design of a national system.

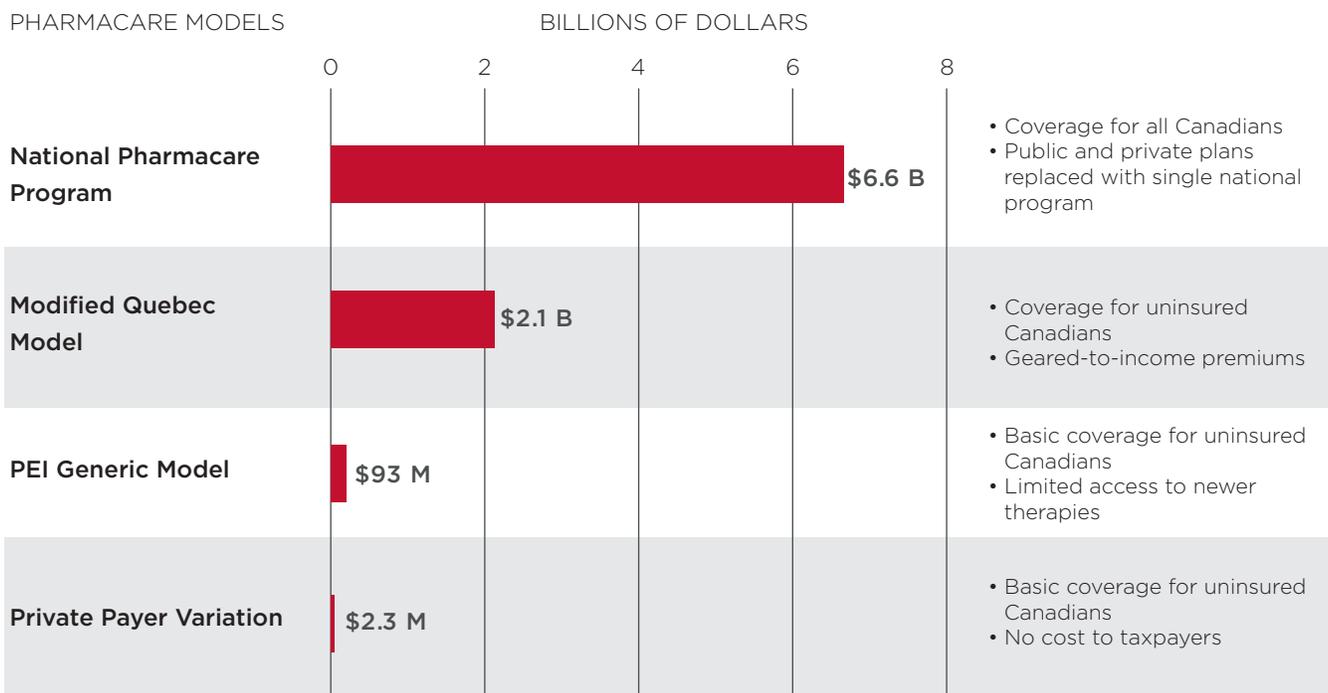
➔ Delayed Access

A national pharmacare model could also mean longer delays to access medicines, as private plans tend to reimburse new medications much more quickly than public plans.³

➔ Value for Health Care Dollars

National pharmacare would introduce high incremental costs to governments and taxpayers to account for the costs that would be shifted from the private sector onto the public sector. Calculations estimate that the additional cost to governments and taxpayers would be close to \$6.6 billion.⁴ While cost should not be the driving factor in health-care decision-making, patient value is an important consideration for policymakers when considering the options to close the coverage gap.

COMPARING PHARMACARE OPTIONS



Conclusion

Spending on prescription drugs is an investment in the health of Canadians. There are incremental options to close the coverage gap for the 10% of Canadians who can't afford their medications, while working toward long-term solutions to provide the best possible pharmaceutical care. CPhA is committed to the development of a pan-Canadian pharmacare plan that puts patients first.



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 2. Canadian Institute for Health Information. National Health Expenditure Trends, 1975 to 2015. Ottawa, ON: CIHI; 2015.
 3. PDCI Market Access Inc., *Pharmacare Costing in Canada, Estimated Costs of Proposed National Pharmacare Programs* (March 2016).
 4. PDCI Market Access Inc., *Pharmacare Costing in Canada, Preliminary Report: Assessment of a National Pharmacare Model Cost Estimate Study* (January 2016)

About CPhA

The Canadian Pharmacists Association (CPhA) is the uniting national voice of pharmacy and the pharmacist profession in Canada. As pharmacists undertake an enhanced role in the delivery of health care services, CPhA ensures that the profession is recognized as a national leader in health care, influencing the policies, programs, budgets and initiatives affecting the profession and the health of Canadians.

More information is available at www.pharmacists.ca.

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