**ACER-CART Health Committee Report**

**September 2018 Executive Conference Call**

At the June AGM two individuals agreed to serve on this committee – Rosalie Bornn and Joanne Hoyak from Manitoba. As well, Gordon Cumming suggested ARTA Executive Director Daniel Mulloy as a source of information and support.

**Pharmacare:** (Overviews of the April report of the Standing Committee on Health and June Discussion Paper of the Advisory Council on the Implementation of National Pharmacare are at the end of this report.)

Monitoring developments in the implementation of a national pharmacare program has included forwarding information to provincial directors regarding the opportunity for individual input to the “Advisory Council” (Thanks Roger).

An online questionnaire provides a finish date of September 28th. (A summary of topics/questions was forwarded to the Executive.) September 28th is also the deadline for written submissions.

***Recommendation:*** *That ACER-CART make a written submission to the “Advisory Council on the Implementation of National Pharmacare” and copied to appropriate others*

The website inviting participation in the national discussion includes an events calendar. It is monitored weekly. Directors will be contacted should it list public forums in their respective provinces. Gerry Tiede attended the one in British Columbia and provided feedback. Gerry also took part in and provided feedback on a Canadian Labour Congress pharmacare webinar. Gordon Cumming forwarded a recent article by the CLC President. (Thanks to both.)

Both Quebec and New Brunswick have provincial elections this month. They provide retirees an opportunity to express their feelings about a national program.

***Recommendation:*** *That the President send each of the provincial organizations a message requesting they consider encouraging individual members to discuss their feelings about a national pharmacare program with candidates.*

It is noted Quebec has already indicated it will not be part of a national program and that the federal finance minister is talking about, perhaps, filling in the “gaps”.

**Pharmacare Talking Points:** These could be derived from the discussion paper – and other sources – and included with information to member associations for consideration. Possibilities could include the following:

* Significant cost savings through bulk purchases
* Preventive care versus emergency room visits and hospitalization can decrease medical costs over time
* Jurisdictional considerations should be secondary to ensuring all Canadians, from sea to sea to sea, have access to prescription medications essential to maintain health (eg asthma, epilepsy, thyroid abnormalities, diabetes) regardless of their ability to pay
* A formulary of essential prescription medications should be as integral to health care as doctors, nurses and hospitals and other medical services and reviewed on a regular basis
* “Filling the gaps”, bilateral agreements and opting out will maintain current inequities and limit access
* Status quo will lead to more Canadians to choose between filling prescriptions and such essentials as housing and food given the rising costs and introduction of new and specialty medications

It would appear the government plans to implement pharmacare plan prior to the 2019 federal election. The questions are what will it look like and how long will Canadians have to live with it?

**Website:** Ensuring website links are reviewed regularly to ensure they are current and relevant across the country is important. Reviewing them and making suggestions is in process.

**Canadian Pensioners Federation:** A request to consider serving on the Health Committee, and be a representative for the Maritimes was forwarded to the President.

Respectfully submitted

Margaret Urquhart

**Pharmacare Now: Prescription Medicine Coverage for all Canadians**

(Report of the Standing Committee on Health – April 2018)

The full 128 page report can be found at: https://www.ourcommons.ca/DocumentViewer/en/42-1/HESA/report-14/page-ToC

The report Summary notes:

1. Unlike most members of the Organisation for Economic Co-operation and Development Canada does not have a single system of public insurance for prescription drugs, rather a patchwork of public and private plans
2. Critical issues include gaps in coverage and variation among formularies both across the country and between public and private plans
3. Two options were considered
4. A universal single payer public prescription drug coverage program
5. Reform of the existing system of public and private prescription drug coverage through closer collaboration between the public and private sector and targeted efforts to address gaps in coverage
6. A belief that the best way forward is to establish a universal single payer program is to expand the Canada Health Act to include prescription drugs dispensed outside of hospitals as an insured service under the Act.
7. Addressing coverage gaps will not lead to better outcomes or cost control.
8. Moving in this direction will lead to governments assuming a significant cost before potential savings are realized

The report consists of three key parts and appendixes.

1. Background Information and Context
2. Critical Challenges Facing Prescription Drug Coverage in Canada
3. The Way Forward: Issues and Options

Observations and Recommendations conclude the report- starting on page 83. The 18 recommendations fall into 4 categories.

1. Expanding the Canada Health Act to include prescription drugs dispensed outside hospitals
2. Development of a common voluntary national prescription drug formulary
3. Improving drug pricing and reimbursement processes
4. Improved data and information systems

**Towards Implementation of National Pharmacare Discussion Paper**

(June 2018)

The full 21 page report can be found at: <https://www.canada.ca/en/health-canada/corporate/about-health-canada/public-engagement/external-advisory-bodies/implementation-national-pharmacare/discussion-paper.html> The table of contents follows.

**What is Pharmacare?**

**The Case for Pharmacare:** An Overview talks about the access problem: Canada's patchwork of drug coverage leaves too many behind and the cost problem: Canada's spending on prescription drugs is unsustainable

**The Challenge: Building Consensus on How to Move Forward**

**Key Issues to Consider About National Pharmacare** includes: Who will be covered and under what circumstances? Deciding what drugs get covered and Figuring out who pays. For each of these there are questions for discussion.

**Key Perspectives to Consider in the Dialogue on National Pharmacare** lists the importance of considering:

Individual Canadians Provinces and Territories Indigenous governments and Representative

Organizations

Health Care Providers Private Insurers Businesses Labour Pharmaceutical Industry Key Enablers at the National Level

**Engaging Canadians**