**Appendix 3**

Dear Member,

Health care in Canada is complex and multifaceted. At Confederation the provision of Health was determined to be, primarily, a provincial/territorial responsibility with some exceptions.

The federal government is involved in health protection and regulation (eg pharmaceuticals, medical devices). It provides funding, guidelines, recommendations and some degree of control through the Canada Health Act and Bilateral Health accords (details by province/territory provided at AGM 2019 for Member use in monitoring and accountability).

Provinces/territories manage, organize and deliver health care services. They make decisions on how to spend the federal health dollars in combination with provincial/territorial dollars and priorities. In addition to Medicare provisions for all, individuals have options through a variety of health insurance plans. The consequence is a lack of standardization on a national level.

ACER-CART has policies on Health Care (posted on the website and currently under review) and has passed health related resolutions at AGM’s.

The purpose of this letter is to seek your input on three matters arising from AGM resolutions – vaccines specific to seniors, breaches of the Canada Health Act, and pharmaceutical company kickbacks to pharmacies.

**Vaccines:** Health Canada recommends Influenza annually. There are two types of influenza vaccine – standard and high dose. Health Canada also recommends shingles and pneumonia vaccines as well as a Diphtheria/Tetanus booster every 10 years.

**Canada Health Act:** Core principles of this act, portions of which are regularly revised, are universality, access, comprehensiveness, portability and public administration. However, reports of “pay for service” in various jurisdictions would appear to be contrary to the act.

**Pharmaceutical Company Kickbacks:** Federal legislation preventing kickbacks does not seem to exist and provincial/territorial legislation, for the most part, cannot be found. Member Association representatives have raised concern kickbacks do, in fact, exist. While indications are they are not as prevalent today as in the past, we do want to determine your knowledge on this matter.

Your completing the enclosed and returning it by February 15th, 2021 would be appreciated. The Health Services Committee will review your input, share it at the March Executive Meeting and report to Members.

Thank you

Margaret Urquhart

East Coast Representative, Health Services Committee Chair

**Member Association:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Completed By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please return by:** February 15th, 2021  **Return to:** Margaret Urquhart

 127 Mountain View Dr.

 Saint John, N.B., E2J 3A3

 Or by email: kimlin@nbnet.nb.ca

1. **Which of the following vaccines are provided by your province/territory as part of Medicare?** (please circle)

Influenza (standard) Shingles Tetanus/Diphtheria booster Pneumonia

1. **a) Which vaccines are available through a group health/drug plan?** (please circle)

 Influenza (standard) Shingles Tetanus/Diphtheria booster Pneumonia

 **b) Is the cost fully covered or a co-pay? If a co-pay, what is the cost to the individual for each?**

**3. A high dose Influenza vaccine is not readily available, at no cost to seniors, in most provinces/territories. What is the situation in your province/territory? If it is available to those who wish to purchase it, what is the cost?**

1. **To provide a more comprehensive picture of Canada Health Act contraventions please provide examples from your province/territory?** (These might include but not be limited to MRI’s, abortion, hip replacements)
2. **Does your province/territory have legislation regarding pharmaceutical company kickbacks to pharmacies? Are you aware of any kickbacks? If so, please provide details.**

**Thank You!!**