



Written Brief in context of HESA Committee
Study on Bill C-64, An Act respecting
pharmacare

May 24, 2024



On behalf of Arthritis Society Canada, we appreciate the opportunity to provide input to the House of Commons Standing Committee on Health (HESA) as part of its review of Bill C-64, An Act respecting pharmacare. This submission aligns with that of the Health Charities Coalition of Canada (HCCC), of which we are a member. We also support the recommendations put forward by the Best Medicine Coalition.

Arthritis Society Canada is a national health charity that gives voice to the six million living with arthritis – that’s one in five - in Canada and the millions more who are impacted or at risk. Arthritis is a collection of conditions affecting joints and other tissues. It causes pain, restricts mobility, and diminishes quality of life, which can take a heavy emotional toll on arthritis patients as well as lead to a significant drain on health system resources and the economy through lost productivity and work absenteeism.

As there is no cure for most forms of arthritis, access to prescription medications plays a crucial role in managing symptoms and slowing disease progression. However, many people with arthritis face significant challenges accessing and affording the medicines they need due to gaps and inconsistencies in coverage. Bill C-64 presents an important opportunity to establish a national pharmacare program that addresses these issues.

In this regard, we are pleased to provide the following general recommendations/ considerations, which we hope can contribute to the development of an effective national pharmacare program that can meet the needs of the people in Canada with arthritis.

- 1) Involve patients:** Patients need to be involved whenever and wherever healthcare-related decisions are being made – decisions that are ultimately intended to benefit them. After all, if it is not being developed for patients, then who else could it possibly be for? For this reason, there must be patient representation and input on the planned Committee of Experts that will be tasked with making “recommendations respecting options for the operation and financing of national, universal, single-payer pharmacare,” as well as the development of the future national formulary. Given Arthritis Society Canada’s expertise and direct connection to the patient community, we would welcome the opportunity to share our knowledge and expertise in this process.
- 2) Ensure comprehensive access to treatments:** The future national formulary must strive to provide comprehensive access to a wide range of medicines. Having a variety of treatment options is important for all patients, but especially those with arthritis as finding the right treatment is often a process of trial and error – what helps one person might not help another. Importantly, no one should experience more barriers or reduced access to medicines under a national pharmacare program. It is therefore critical the national formulary does not limit the number of arthritis medications on the formulary and ensures patients have access to their prescribed medication. We strongly align with HCCC’s position that a national pharmacare program needs to ensure patients can access all drugs



approved by Health Canada – if not on the national formulary, then via private insurance plans or through separately adjudicated access programs that consider a patient’s specific circumstances. Reducing access that citizens currently have to prescription medicines is counterproductive and creates uncertainty for all people in Canada.

3) Address inequities related to affordability and access: Bill C-64 must lead to the development of a national pharmacare program that removes the inequities that exist in the current system. These inequities include:

- a. Discrepancies in public and private coverage for specific drugs, within and across provinces (private plans tend to provide much more comprehensive coverage than public plans)
- b. Process or administrative barriers patients and caregivers face in getting coverage (enrolment) and in accessing medications, even when the needed treatment is on the formulary
- c. Out-of-pocket costs that patients and caregivers experience (the full cost of the drug if not on the formulary or, if it is, partial costs from co-pays and deductibles)

Collectively, these challenges create a postal code lottery situation where access to medically necessary treatments depends largely on where a person lives. To effectively address these inequities, Bill C-64 should aim to standardize drug coverage across all provinces, simplify existing enrolment and medication access processes, and reduce or eliminate out-of-pocket expenses for patients. By doing so, the national pharmacare program will ensure that no one is disadvantaged by their geographical location or economic circumstances. As stated in Best Medicine Coalition’s brief the focus must be on building an efficient and streamlined infrastructure aimed at improving patient care by delivering equity at a high level with a comprehensive range of medicines available to all based on medical need and provided in a timely manner.

4) Be ambitious: We should be ambitious in developing a national pharmacare program that not only meets today’s needs but is sustainable and scalable to meet those of the future when the need for medications will be even greater due to the aging of the population and new medical technologies. With such an important undertaking, it is vital to have a more holistic, long-term, vision for what we are trying to achieve. A national pharmacare program should be constructed with the vision of it being part of an overall expanded program of healthcare – with public and private components – that makes available a broad range of products and services. These should be developed so that patients and caregivers will be able to choose affordable options for what is best for them, not solely what is best for the system. This bigger basket of services should include home and community care outside of hospitals, as well as extensive prevention programs to avoid or delay the onset – and expense – of chronic diseases.



Arthritis Society Canada, on behalf of the millions of people in Canada living with arthritis, greatly appreciates this opportunity to provide input on this important study on national pharmacare. Thank you for your consideration.

About Arthritis Society Canada

Arthritis Society Canada is dedicated to extinguishing arthritis. We represent the six million people in Canada living with arthritis today, and the millions more who are impacted or at risk.

Fueled by the trust and support of our donors and volunteers, Arthritis Society Canada is fighting the fire of arthritis with research, advocacy, innovation, information and support. We are Canada's largest charitable funder of cutting-edge arthritis research. We will not give up our efforts until everyone is free of the scorching pain of arthritis.