



# BEST MEDICINES COALITION

## COALITION POUR DE MEILLEURS MÉDICAMENTS

### Priorities for the 2023-24 Federal Budget

#### Best Medicines Coalition



February 10, 2023

## **Key Recommendations:**

1. **Drugs for Rare Diseases:** The federal government must move expeditiously to flow planned funding for the National Strategy for Drugs for Rare Diseases, moving forward on the national strategy as well as funding commitments made in 2019. Funding must ensure the effective implementation of the government's vision to improve access to effective drugs and better health outcomes.
2. **Pharmacare:** The government must both clearly articulate its objectives for pharmacare, specifically how the patient experience and health outcomes will improve and allocate long-term and permanent federal dollars in this upcoming budget to support these objectives.
3. **Pharmaceutical Supply:** The Government of Canada must pursue and adopt effective and proactive approaches to address drug and vaccine supply challenges, including investments in helping rebuild domestic manufacturing looking beyond the COVID-19 pandemic, preparing for the next unknown pandemic as well as addressing existing and anticipated supply pressures.

## **Introduction:**

The Best Medicines Coalition (BMC), a national alliance of patient organizations together representing millions of patients, welcomes the opportunity to provide input to the pre-budget consultation. This submission was informed by position documents developed in consultation with BMC's member organizations. Statements and recommendations expressed here reflect areas of consensus among the organizations listed at the end of this document.

## **Positions and Discussion:**

The BMC seeks timely access to a comprehensive range of medically necessary, safe, and effective drugs and related treatments, informed by patient-driven evidence and values, and delivered equitably and affordably to all patients in Canada. In its advocacy on ongoing national issues, the BMC seeks policies and frameworks which recognize and embody patient-driven principles while valuing and investing in both incremental and breakthrough advancements in care. Related to this, the BMC seeks improved pathways to timely access to all medically necessary drugs and related treatments, and systems which are efficient, streamlined, transparent, and accountable.

In its ongoing work, the BMC provides recommendations on selected issues within the context of regulation and programs related to pharmaceutical care for Canadians, including strategies to support patients with rare diseases, drug supply initiatives, and broad pharmaceutical care reform.

### **1. National Strategy for Drugs for Rare Disease**

- A comprehensive and effective National Strategy for Drugs for Rare Diseases must first and foremost focus on saving and transforming patients' lives. The national strategy must have at its heart a mandate of helping patients and seek to address health system sustainability from this starting point of improving patient outcomes. Gaining access to necessary treatments is critical and a national strategy, and enabling funding allocations, must reflect this reality.
- Since the initial Federal commitment, the process for developing and implementing the strategy appears to have stalled and this must be addressed. Federal Budget 2019 committed \$1 billion over two years with up to \$500 million per year ongoing for Canadians to access treatment for rare conditions, starting in 2022-2023. Funding has not flowed and the opportunity to have a positive impact for patients in 2022 has been lost and with no clarity on plans for 2023.

- Efforts must be made to expedite the release of the strategy and flow funding immediately to positively impact patients.
- For the government to achieve its vision to improve access to effective drugs and better health outcomes, the strategy must ensure effective treatments are delivered to patients in a timely manner across Canada. This includes ensuring early diagnosis of rare diseases, data and real-world evidence driven decisions, and incorporation of patient and clinician voices. In addition, drug access and reimbursement systems must be improved to better encourage developers to bring new drugs to Canada which treat unmet needs, including therapies for rare disorders.
- Importantly, the federal government must dedicate sufficient financial support to ensure meaningful and sustained gains to improving patient care in a meaningful and sustainable manner. An effective rare disease strategy must be sufficiently resourced, and all efforts must be focussed on understanding the scope of patients' and caregivers' needs, the full extent of necessary financial support and then allocating funds as appropriate, in partnership and consultation with patients and other stakeholders.

## **2. National Pharmacare and Related Reforms**

- Policy reform regarding how pharmaceuticals are managed and delivered must move forward to address the most critical disparities and inequities and ensure a comprehensive range of medicines are available to all, no matter where they live. The government must both clearly articulate its objectives for pharmacare, specifically how the patient experience and health outcomes will improve and allocate long-term and permanent federal dollars in this upcoming budget to support these objectives.
- Every patient, without exception, needs a path to access medicines and reform in this area must address out of pocket costs, reported to be more than 20 per cent of total drug expenditures.
- The government must move to streamline infrastructure and processes, potentially through the proposed Canadian Drug Agency (CDA). The current drug approval and listing process in most cases takes too long to deliver a new drug for a patient in medical need. If a national formulary is developed, it must look to eliminate waste and redundancy and reduce wait times for patient access to new therapies.
- The CDA must not be an additional layer, but a modernization, with appropriate governance including patient representation, established by statutory law and subject to accountability, transparency, and Parliamentary oversight, unlike many parts of the status quo which are too protracted and fragmented to meet patient needs.
- We are encouraged by the government's commitment to develop a legislative framework to support pharmacare, and further recommend that the government clearly articulate its objectives for pharmacare, and how it will work with Provincial & Territorial governments.

## **3. Drug and vaccine supply and shortages**

- While drug shortages which disrupt patient care have been an ongoing issue, the pandemic further exposed significant weaknesses including weaknesses around vaccines and therapeutics. The Government of Canada's Biomanufacturing Strategy provides an appropriate starting framework, and we look forward to tangible actions and outcomes.
- The Government of Canada needs to pursue and adopt effective and proactive approaches to address drug and vaccine supply challenges, including rebuilding domestic manufacturing looking beyond the pandemic, preparing for the next unknown pandemic, as well as addressing existing and anticipated global supply pressures.



**About the Best Medicines Coalition**

The Best Medicines Coalition is a national alliance of patient organizations, together representing millions of patients. The BMC seeks timely access to a comprehensive range of medically necessary, safe, and effective drugs and related treatments, informed by patient-driven evidence and values, and delivered equitably and affordably to all patients in Canada. The BMC’s areas of interest include drug approval, assessment, and reimbursement, as well as patient safety and supply issues. As an important aspect of its work, the BMC strives to ensure that Canadian patients have a voice and are meaningful participants in health policy development, specifically regarding pharmaceutical care. The BMC’s core activities involve issue education, consensus building, planning and advocacy, making certain that patient-driven positions are communicated to decision makers and other stakeholders. The BMC was formed in 2002 as a grassroots alliance of patient advocates. In 2012, the BMC was registered under the federal Not-for-profit Corporations Act.



Alliance for Access to Psychiatric Medications  
 Asthma Canada  
 Brain Tumour Foundation of Canada  
 Canadian Arthritis Patient Alliance  
 Canadian Association of Psoriasis Patients  
 Canadian Breast Cancer Network  
 Canadian Cancer Survivor Network  
 Canadian Council of the Blind  
 Canadian Cystic Fibrosis Treatment Society  
 Canadian Epilepsy Alliance  
 Canadian Hemophilia Society  
 Canadian PKU & Allied Disorders  
 Canadian Psoriasis Network  
 Canadian Skin Patient Alliance  
 Canadian Spondylitis Association

CanCertainty  
 Crohn’s and Colitis Canada  
 Cystic Fibrosis Canada  
 Fighting Blindness Canada  
 Health Coalition of Alberta  
 Huntington Society of Canada  
 Kidney Cancer Canada  
 Lymphoma Canada  
 Medical Cannabis Canada  
 Medicines Access Coalition – BC  
 Migraine Canada  
 Millions Missing Canada  
 Ovarian Cancer Canada  
 Parkinson Canada