

Input for the Pre-Budget Consultations in Advance of the Upcoming Federal Budget



August 1, 2025

Summary of Recommendations:

- 1. Pharmaceutical policy reform, program development and funding, including regarding national pharmacare, to address inequities and improve timely access to drugs and related treatments.
- 2. Effective drug supply management, shortage mitigation and manufacturing capacity improvement to ensure consistent and reliable access to medicines.
- 3. Strengthening the patient voice to inform health policy development and decision making, incorporating patient values in all related initiatives.

Introduction:

The Best Medicines Coalition (BMC), a national alliance of 32 patient organizations, welcomes the opportunity to provide input for consideration in the development of the upcoming Federal Budget. This submission was informed by current BMC position documents developed in consultation with BMC's member organizations. Statements and recommendations expressed here reflect areas of consensus among the member organizations listed here.

As its mission, 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 related 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 policies, programs, legislation and regulations related to pharmaceutical care for patients in Canada, including regarding broad pharmaceutical care reform, pharmaceutical review, assessment and pricing, strategies to support patients with rare diseases and drug supply initiatives.

BMC Recommendations:

1. Pharmaceutical policy reform including pharmacare

Policy reform and the establishment of effective frameworks for how pharmaceuticals are managed and delivered must address the most critical disparities and inequities and ensure a comprehensive range of medicines are available to all, no matter where they live. Working with provinces and territories to address inequities must be a fundamental objective, whether the federal government advances pharmacare or not. The current "postal code lottery" of highly variable levels of access to medicines depending on where one lives must be addressed.

In addition, wait times for patients to get the drugs and related treatments they need must be addressed. The current drug health technology assessment, price negotiation and listing process in most cases takes too long to deliver new drugs to patients, a critical issue especially for those with unmet needs. Any reforms must not add barriers to timely access but rather must deliver efficiency and modernization.

Importantly, the government must move to streamline infrastructure and processes related to Canada's Drug Agency, and the role and contribution of the CDA must be clearly articulated and focused on improving patient care and outcomes and funded accordingly.

2. Drug supply management, mitigation and manufacturing capacity

Supply disruptions to drugs and related treatments as well as vaccines, including intermittent and ongoing shortages and discontinuations, have critical implications for patient care and outcomes. Concerns in this area are heightened due to ongoing tensions with the United States with ongoing uncertainty and direct implications of potential tariffs and other trade measures.

Tangible actions to support Canada's biomanufacturing capacity and other measures related to drug shortages must be funded, including initiatives to enable improved management and shortage mitigation. We urge the federal government to move expeditiously to bring these reforms to fruition.

In addition, the goal of improved communication is extremely important to patients, including broad understanding of the nature of shortages as well as notification on specific shortages. Improved communication at all levels including at community pharmacies so that shortage situations can be proactively addressed and effectively managed must be incorporated.

3. Strengthening the patient voice

We ask that the government direct resources to strengthening the patient voice in health policy, including in arears related to the management and provision of drugs and related treatments. Moving forward, we urge a more fulsome approach to engagement of the patient community to inform frameworks and practices, including embedding a diverse range of voices in policy setting, direction and decision making.

Options for consideration could include the appointment of a Chief Patient Officer to ensure that patient expertise, values, voices and outcomes are recognized and drive reform, decision making and ongoing work. This officer would be required to interact with relevant agencies with which Health Canada is directly engaged regarding regulatory review, health technology assessment and formulary listings of drugs including review, approval and evaluation. A Patient Ombudsman to report independently to Parliament on any issues in contravention of the Pharmacare Act or the Canada Health Act, with defined intervention and enforcement powers is an additional option.

About the Best Medicines Coalition

The Best Medicines Coalition is a national alliance of 32 patient organizations (<u>listed here</u>). 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 include issue education, consensus-based position development, 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 and operates under the direction of a Board of Directors comprised of representatives of member organizations and elected annually.