



Creating Synergy

HEALTH COALITION OF ALBERTA

2013 Fall Forum

***Alberta's Pharmaceutical Strategy and Programs
Policy Recommendations***

November 26, 2013

Position Paper

- Developing this position paper was one of Creating Synergy's goals for 2013
- Title: "Alberta's Pharmaceutical Strategy and Programs: Policy Recommendations"

The Issue

- Creating Synergy (CS) Members are concerned about the state of pharmaceutical care in Alberta
- Albertans need strategies and programs that:
 - provide greater access to the drugs they need
 - improve prescribing processes
- CS believes these can only be achieved through meaningful stakeholder, patient and consumer engagement

Issue #1: Access to drugs

- Number of new drugs approved and available in Alberta's drug benefit programs is too low
- Over half the CADTH recommendations on cost effective products have not been accepted as benefits in Alberta
- Alberta's current benefits program does not list cost effective products that prevent disease consequences or secondary complications.
- **Result:** *more* suffering and *more* government spending on doctors', ER, and hospital visits

Issue #2: Prescribing of Drugs

- Currently, there is a lack of
 - government direction
 - monitoring of independent professional drug prescription behaviours
- 27% of Albertans who regularly take two or more different medications have not consulted with their pharmacist or doctor in the past year
- 41% do not have a list of the medications they take
- PCNs, AHS and pharmacists have the resources to deliver patient-centered, team-based healthcare.
- However, there is little to no performance monitoring, and patient monitoring is not coordinated

Issue #3: Stakeholder/Patient/Consumer Engagement

- Transparency and accountability on the pharmaceutical strategy is lacking
- The GOA agreed to engage patients/consumers on strategies, decisions and changes in pharmaceutical programming (*Putting People First Recommendations, 2010*).
- However, this has not been happening

Background

- Prescribed and used properly, drugs can be the most cost-effective form of healthcare delivery
- However, provincial models for prescription drug financing have policy shortcomings
 - e.g., patient charges, multiple payers
- Result: access barriers, poor financial protection, excessive costs (Morgan, Daw & Law, 2013)
- Innovative drugs are more expensive but provide better health outcomes (i.e., less hospital visits and surgical interventions)

The Numbers

- Health care = 40% of provincial gov't spending
 - <16% is attributed to public and private spending on prescription drugs (CB&C 2012)
- In Canada, only 44% of prescription drugs costs are publicly funded vs. 90% of hospital costs and 99% of medical costs (CIHI 2012)
- ~18% of prescription drug expenditures is financed “out-of-pocket” by patients (CIHI 2011)
- Biologics accounted for 12.3% (\$2B) of total prescription drug spending in 2010/11 (Greenshield)

Recommendation #1: Drug Review Changes

- CS recommends the GOA develop **two advisory bodies**:
 - 1) Citizen Advisory Council
 - 2) Advisory Committee of stakeholders/experts to council Expert Committee evaluating drugs
- The decisions about access to new drugs should be based on:
 - Best practices (evidence-based guidelines)
 - Fair and transparent evaluation of drug expenditures vis-à-vis other healthcare costs

Recommendation #2:

Programming to address prescribing issues

- CS recommends the GOA implement:
 - An academic detailing program to manage prescribing behaviours and emerging issues
 - Incentives for innovative medications use and coordinated healthcare team approaches
 - Monitoring of drug use for quality assurance
 - Educational or assist programs at PCNs, pharmacies or community care to help people (especially seniors, caregivers) to self-monitor drug utilization

Recommendation #3: Universal Drug Program

- CS recommends the GOA consider a universal drug program
 - e.g., with more patient payment, it would be appropriate to have all drugs included as a benefit since half the patients will be paying virtually full price under the deductible system

Next Steps

- Creating Synergy requests the GOA collaborate with our membership and other stakeholders to:
 - 1) Develop an engagement schedule to discuss our issues and recommendations
 - 2) Develop proposals/plans to manage the issues and address the burden of costs to patients/Albertans.

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