

**BRIEFING NOTE**

**Advocacy for a National Universal Pharmacare Program**

**November 21, 2019**

**SUMMARY**

Three of the four federal parties campaigned during the recent federal election to develop a national pharmacare program. A national universal pharmacare program would ensure that the cost of medication is not a barrier to people receiving the treatment they need for health problems. Bulk buying would also reduce the cost of drugs for insurance companies which are passed onto employers.

Recommendation:

- That the Board of Health write to the leader of each Federal Party recommending that the Federal Government make the implementation of a national universal pharmacare program a priority for implementation with a copy of the letter to our federal members of parliament and provincial Minister of Health, Christine Elliott .

**BACKGROUND**

In July 2018, the Association of Local Public Health Agencies sent the following letter to the Federal Advisory Council on the Implementation of National Pharmacare as part of their Consultation Process.

“Our members passed a resolution in June 2015 that calls for a national universal pharmacare program. In so doing, alPHa joined the growing ranks of economists and medical, health & business organizations that are calling for the immediate implementation of public coverage for prescription drugs across Canada.

Indeed, Canada is the only country with a publicly-insured health care system that does not cover the cost of the prescription medications that are critical to treating communicable and chronic diseases alike.

The consequences of Canada’s decision not to include prescription medications in the coverage provisions of the Canada Health Act are far reaching, beginning with the fact that Canadians pay the highest per-capita prices for pharmaceuticals (over 40% higher than the average) of the members of the Organisation for Economic Co-operation and Development (OECD) that have public health care.

Without a coordinated purchasing system, Canada is unable to secure the bulk-buying discounts enjoyed by its OECD counterparts. The burden of this cost is transferred to a patchwork of public and private insurance plans with varying suites of allowable claims, and in an increasing number of cases, to individuals who may not have the ability to pay premiums for their own insurance let alone the direct costs of expensive medications.

Evidence is mounting that this is leading to poorer patient outcomes among individuals who cannot afford their treatment, as well as increasingly burdensome outlays for workplace coverage under negotiated benefits. In other words, there are compelling health and economic reasons to adopt a national strategy.

We are convinced that a national universal pharmacare program would save money, improve health outcomes, and reduce strain on the health care system as a whole. We are equally convinced that the additional initial cost to Government would yield a substantial return on investment in the long run.”

[https://cdn.ymaws.com/www.alphaweb.org/resource/collection/BA2F1405-3D59-4AFB-B1DE-3A7A33D24AE1/alpha\\_Letter\\_Pharmacare\\_Consultation\\_050718.pdf](https://cdn.ymaws.com/www.alphaweb.org/resource/collection/BA2F1405-3D59-4AFB-B1DE-3A7A33D24AE1/alpha_Letter_Pharmacare_Consultation_050718.pdf)

## **COMMENT**

Three of the four federal parties (Liberals, NDP and the Green Parties) campaigned that they would implement a national pharmacare program if elected. The Board of Health can support the alpha position statement by writing to each federal party expressing their strong recommendation that implementation of a national universal pharmacare program be a priority for implementation.

Submitted by:

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