

alPHa's members are
the public health units
in Ontario.

alPHa Sections:

Boards of Health
Section

Council of Ontario
Medical Officers of
Health (COMOH)

**Affiliate
Organizations:**

Association of Ontario
Public Health Business
Administrators

Association of
Public Health
Epidemiologists
in Ontario

Association of
Supervisors of Public
Health Inspectors of
Ontario

Health Promotion
Ontario

Ontario Association of
Public Health Dentistry

Ontario Association of
Public Health Nursing
Leaders

Ontario Dietitians in
Public Health

July 6, 2018

Dara McLeod,
Deputy Executive Director,
Engagement Secretariat,
Advisory Council on the Implementation of National Pharmacare
VIA E-MAIL

Dear Ms. McLeod,

Re: Towards National Pharmacare

On behalf of the Association of Local Public Health Agencies (alPHa) and its Council of Ontario Medical Officers of Health Section, Boards of Health Section, and Affiliate Organizations, I am writing today to express our support for a national pharmacare program.

Our members passed a resolution in June 2015 (attached) 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.

We look forward to doing our part to support and advise on the development of an equitable, affordable and effective program to ensure that all Canadians have access to the medicines that they need, which will result in both a healthier population and a healthier economy.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Kyle', with a vertical line extending downwards from the end of the signature.

Dr. Robert Kyle
aPHa President

COPY: Hon. Ginette Petitpas Taylor, Minister of Health (Canada)
Dr. Theresa Tam, Chief Public Health Officer of Canada
Dr. David Williams, Chief Medical Officer of Health (Ontario)
Roselle Martino, ADM, Population and Public Health Division (Health and Long-Term Care)

TITLE: National Universal Pharmacare Program

SPONSOR: Haliburton Kawartha Pine Ridge District Health Unit

WHEREAS the World Health Organization's Right to Health, which includes essential drugs in the core content of minimum rights and the state is obligated to fulfill the rights; and

WHEREAS in 1964 a national universal pharmacare program to cover the costs of outpatient prescription medications was recommended be included in the national Medicare system by the Royal Commission on Health Services; in 1997 the National Forum on Health recommended a universal first dollar pharmacare program; and in 2002 the Romanow Commission recommended catastrophic drug coverage as a first step towards a pharmacare program and still the Government of Canada has not included pharmacare under the *Canada Health Act*; and

WHEREAS Canada is the only Organization for Economic Co-operation and Development (OECD) country with a universal public health care system that does not provide coverage for prescription medications; and

WHEREAS Canadians pay among the highest per capita spending on prescription drugs of the OECD countries; and

WHEREAS the ability to fill a prescription for medication depends on whether and to what extent a person has access to either a private or public insurance plan or if an individual is able to pay out of pocket if a person has no insurance plan; and

WHEREAS 1 in 10 Canadians are unable to fill a prescription because of cost, which in turn compromises the ability to reach optimal level of health and can drive up health care costs in other areas including more physician visits and hospitalizations; and

WHEREAS the current system is a combination of private and public insurance plans that are expensive, not sustainable and inequitable; and

WHEREAS the Government of Canada has a responsibility under the *Canada Health Act* to protect, promote and restore physical and mental well-being of persons and enable reasonable access to health care services without causing barriers, including financial barriers; and

WHEREAS a national, universal pharmacare program would enable all Canadians access to quality, safe and cost effective medications, improve health outcomes and generate cost savings;

continued

NOW THEREFORE BE IT RESOLVED that the Association of Local Public Health Agencies (alPHa) urges the Government of Canada and the Province of Ontario to move forward with the development and implementation of a national, universal pharmacare program;

AND FURTHER that the Association of Local Public Health Agencies (alPHa) advises the Prime Minister of Canada of this resolution and copies the Ministers of Finance Canada and Health Canada, the Chief Public Health Officer, Leader of the Opposition, Leader of the Liberal Party, Premier of Ontario, Ministers of Finance and Health and Long-Term Care and the Chief Medical Officer of Health and the Council of the Federation;

AND FURTHER that the following organizations be copied and asked for their support: Canadian Medical Association, Canadian Nurses Association, Canadian Pharmacists Association, Canadian Life and Health Insurance Association, Ontario Medical Association, and the Registered Nurses Association of Ontario.

ACTION FROM CONFERENCE:

Resolution CARRIED AS AMENDED