February 3, 2020

Hon. Rod Phillips, Minister of Finance
Frost Building South
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Medtech Canada 2020 Budget Submission

Dear Minister Phillips,

Medical technologies diagnose and treat patients with varying health needs. These devices can range from simple technologies, such as basic thermometers, to very complex ones, such as a laser surgical devices or implantable pacemakers. Medical technologies contribute to improved patient outcomes every day. They save lives, improve productivity to keep Ontarians at work and add to quality of life for patients and families.

The Ontario health care system invests billions of tax dollars each year, but we continue to lack the health care system we need to have optimal patient outcomes. While there’s much to be optimistic about since your government took office—such as Ontario Health Teams and the Ontario Digital Health Strategy—there are significant other opportunities presented by the use of medical technologies to address issues such hallway medicine and reduce wait times, while creating efficiencies in our health care system and improving patient experiences.

At the same time, we need to grow the economy in Ontario and focus on the industries of the future - not the jobs of the past. In a province where companies like GM are closing manufacturing plants, we need to change the momentum and figure out how to replace those manufacturing jobs with the advanced manufacturing jobs of the future and provide other diverse job opportunities in areas like research & development, distribution, supply chain, engineering, and many other areas that the medical technology industry offers (see attached document - “Medtech Canada Manufacturing Presence Ontario”).

The Doug Ford government has identified the following key areas of focus:

- Open for Business
- Reducing Red Tape
- Ending Hallway Medicine
- Patient-Centred Health Care

There are many opportunities to work with the medical technology industry to advance those priorities for the benefit of Ontarians and we have identified the following eight key recommendations.
Medtech Canada Recommendations

A. Open for Business

1. Develop a strategy for the AdvaMed 2020 Medtech Conference being held in Toronto - The Ontario Government should develop a strategy for a strong presence at The Medtech Conference 2020, powered by AdvaMed and located in Toronto on October 4-7, 2020. We should work together to ensure that Premier Ford attends, meets with global medical technology executives and has a speaking role at the conference.

B. Reducing Red Tape

2. Streamlining medical imaging regulations - The Ontario Government should work with Medtech Canada to streamline and update the now outdated Healing Arts Radiation Protection (HARP) Act to ensure that new innovative medical imaging technologies can be used effectively in the Ontario health care system.

3. Ensuring that OHIP billing codes are reviewed, updated and/or new codes are created that better align with technological advancements to generate faster adoption of innovative technologies - The Ontario Government should ensure that the OHIP billing coding structure facilitates the introduction of technological advancements that benefit patients and the health care system through a process that reviews OHIP billing codes that need adjustments or creating billing codes that don't exist due to new, innovative medical technologies that are currently not supported or improperly supported due to lack of (or misalignment) OHIP billing codes.

C. Ending Hallway Medicine

4. Ensuring the implementation of a robust digital health and data strategy for Ontario - The Ontario Government should work with Medtech Canada through our Hospital to Community Collaborative, to ensure the implementation of a robust and effective data and digital health strategy.

D. Patient-Centred Health Care

5. Work with the medtech industry to implement value-based procurement in health care - In conjunction with the Ontario Government Supply Chain Modernization Strategy, the government should work with the medtech industry to implement the use of value-based procurement for clinical products in health care.

6. Supporting the work of the Ontario Health Technology Assessment Committee (OHTAC) through Ontario Health (and formerly Health Quality Ontario) - The Ontario Government should continue to support the work of the Ontario Health Technology Assessment Committee (OHTAC) and ensure the implementation and funding of OHTAC recommendations.

7. Improving wait times for cataracts surgeries - The number of Quality-Based Procedures (QBPs) for cataract day surgery should be increased by an additional 6000 procedures per year to improve access and reduce wait times until we achieve guidelines as per pan-Canadian benchmark agreed to by Ontario.

8. Begin a data collection program for precision medicine testing, in an effort to ensure that Ontario isn’t lagging in adoption and usage - The Ontario government should mandate the collection of data on the volume and types of precision medicine tests conducted in Ontario laboratories, in an effort to better understand whether or not Ontario is lagging behind other leading jurisdictions on the appropriate adoption and usage of precision medicine for the benefit of Ontario patients – especially given the rapid advancements in this area.
RATIONALE AND BACKGROUND FOR RECOMMENDATIONS

Recommendation #1:

The Ontario Government should develop a strategy for a strong presence at The Medtech Conference 2020, powered by AdvaMed and located in Toronto on October 4-7, 2020. We should work together to ensure that Premier Ford attends, meets with global medical technology executives and has a speaking role at the conference.

The United States medtech market is important for Ontario companies. It is the world’s largest medical technology market and it shows no signs of slowing. The US medical technology industry was valued at US$147.7 billion in 2016 and is projected to grow significantly through 2019, when it should increase to US$173 billion. Ontario companies focus on this market.

In the past, Ontario has had a significant presence at the conference. Each year Ontario provides support for Canadian companies to attend the conference via a trade mission.

In addition, in 2017, Ontario was a major sponsor at the conference. That sponsorship included, exhibit space, speaking opportunities, medtech C-suite level meeting opportunities, exclusive niche event sponsorship, several complementary conference registrations, and partnerships with the Quebec and Federal governments to promote the Canadian medtech industry and ecosystem. Several Ontario government investment/economic development staff attended the event. The Ontario investment was approximately $100,000 USD ($130,000 CAD), which included a gold-level sponsorship package.

In fall 2020, the AdvaMed MedTech conference will be held in Toronto (the first time the conference is being held outside of the US). This is the largest medical technology conference in North America and in 2018, this 3-day event hosted more than 1,000 medtech companies, 3,000 thought leaders and entrepreneurs and 730 exhibitors from the health care/medtech industry from 35 countries. Through this event, Ontario has an unparalleled opportunity to showcase the Ontario-based medtech industry, research capabilities and medtech ecosystem to the global industry.


Recommendation #2:

The Ontario Government should work with Medtech Canada to streamline and update the now outdated Healing Arts Radiation Protection (HARP) Act to ensure that new innovative medical imaging technologies can be used effectively in the Ontario health care system.

The Healing Arts Radiation Protection (HARP) Act was passed by the Ontario legislature in 1990 - 30 years ago. Since that time, there have been many new and innovative medical imaging technologies that didn’t exist when the legislation was written. There are also several prohibitive regulations within the legislation that limit the ability for health care providers to maximize the use of these technologies.

Medtech Canada is currently in the process of developing a submission to reduce red tape for medical imaging equipment in Ontario. Once completed, we recommend that the government work with the medical imaging industry—through Medtech Canada—to make much needed updates to the legislation and accompanying regulations.
Recommendation #3:

The Ontario Government should ensure that the OHIP billing coding structure facilitates the introduction of technological advancements that benefit patients and the healthcare system through a process that reviews OHIP billing codes that need adjustments or creating billing codes that don’t exist due to new, innovative medical technologies that are currently not supported or improperly supported due to lack of or misalignment of OHIP billing codes.

While there are many barriers in Ontario (and in Canada) to the adoption of new medical technologies, one of the most significant ones is the absence of a process to advance physician billing codes to support new innovative technologies and procedures. Some of the challenges include:

1) Lack of a fee code for a clinician to be able to perform a new procedure
2) Challenges in the interpretation of existing fee codes
3) Disincentives embedded in the schedule preventing the adoption of technologies or procedures
4) Technical Fee Codes that don’t exist to support certain technologies and/or do not support the use of better technologies (for discussion/informational purposes only – there is not currently a process to introduce or adjust technical fee codes through the OMA)

Some examples include:

Digital Health and Virtual Care
- The current schedule does not incentivize physicians to manage patients based on data collected via peripherals (specially for chronic diseases) which can empower the provider-patient relationship and help to keep patients healthier and out of hospitals. Additionally, access to virtual care is very limited by the absence of fee codes.

Remote Monitoring of Patients with Implantable Cardiac Devices (ICDs) or Home Dialysis
- Remote patient monitoring for patients with ICDs or remote patient monitoring for patients doing home dialysis, is better for the system and for patients, and has been in use for more than a decade, yet there is no physician reimbursement to perform this monitoring in Ontario.

Balloon Sinuplasty and Access to Other New Procedures
- Patients don’t currently have access to treatment options such as balloon sinuplasty (a treatment for blocked sinuses) in Ontario. It has been available to patients in other countries for years, provides a less invasive approach than current treatment options and may allow the treatment of these patients to a less expensive health care setting.

Point-of-Care Ultrasound
- Physicians in private practices are not supported through a technical fee or otherwise to make an investment in point-of-care ultrasound despite mounting evidence that appropriate use of this technology can improve care and increase health care system efficiencies.

Innovation in technologies and procedures enables better patient outcomes, can reduce wait times, supports patients and families in the community and reduces cost in the healthcare system. One way to take advantage of these opportunities is to provide a more flexible approach to adjust billing codes.

Medtech Canada recommends that the Ontario government ensures there is a process—specifically related to medical technology advancements—to review current billing code challenges and address these issues.
**Recommendation #4:**

The Ontario Government should work with Medtech Canada through our Hospital to Community Collaborative, to ensure the implementation of a robust and effective data and digital health strategy.

In the winter of 2019, The Ministry of Health and Long-term Care extended an invaluable offer to Medtech Canada and its Hospital to Community Collaborative (H2C): the chance to share its thoughts on the challenges and opportunities that virtual care represents to the future of Ontario health care.

Looking to Medtech Canada and its members as key players in the medical technology industry—and as stakeholders that have direct firsthand experience in the development and adoption of innovative technologies—the Ministry was looking to better understand the current landscape, and also to identify areas of future focus.

Medtech Canada is committed to supporting Ontario as it moves to embrace a digital health future. We support the recently released Ontario “Digital First for Health” strategy and we look forward to identifying tangible collaboration opportunities that build on our excellent track record of meaningful collaboration, to ensure the successful implementation of that strategy.

The Medtech Canada “Hospital to Community Collaborative” is a unique, multi-stakeholder coalition dedicated to ensuring that Ontario patients receive the highest quality care in their own homes and in their community. It brings together representatives from small and medium-sized enterprises, multinational companies, hospitals, regional health clusters and innovation advocates.

As such, we recommend that the Ontario Government work with the Medtech Canada Hospital to Community Collaborative to implement the recommendation in our report “Optimizing the Role of Digital Health for Ontario’s Future: Insights and Advice from Medtech Canada Members” (document attached and can be found here):


**Recommendation #5**

In conjunction with the Ontario Government Supply Chain Modernization Strategy, the government should work with the medtech industry to implement the use of value-based procurement for clinical products in health care.

Medtech Canada is a strong supporter of the Ontario Government Supply Chain Modernization Strategy. We applaud the government for having the vision and courage to streamline supply chain across government and the broader public sector, and to capitalize on the opportunity to modernize an ineffective system.

Currently there is no consistent approach for procurement across Canada, nor a consistent set of procurement rules or practices. The landscape is different in each province and is often different within regions or specific providers (e.g. community care, long-term care or hospitals). This has resulted in a complex procurement landscape in health care in Canada, which does not optimize the taxpayer dollar spend, ensure the best patient outcomes or create an ideal business climate.

A critical component of an effective and modern supply chain is the utilization of value-based procurement for clinical products in health care.

We all know as consumers that the cheapest car on the market does not necessarily provide the best “value”. If that were true – wouldn’t we all buy the cheapest car? When we go to buy a car, we consider many “value” factors such as fuel efficiency, number of passengers, cargo capacity,
safety features, manufacturer reliability and quality, and the list goes on. In fact, there are a significant number of data points of evaluation, and then we align those data points by priority for our needs, before we decide which car is the right one to purchase.

Why wouldn’t we do the same in health care? More importantly, how could we NOT do the same when it comes to technologies that impact both our personal health and the quality and sustainability of our publicly funded health care system?

The majority of RFPs issued in health care in Canada today, are primarily scored or given the highest weighted component of the score based on price alone. It would be beneficial if the procurement system would accurately assess the current and future market, evaluate proven or potential differences in products to establish value other than merely the quoted “price to buy”.

A more expensive device may be a higher price and cost but may save on drug expense, staffing, time required in ICU, or other costs. Some products will reduce the length of stay or patient recovery time or allow patients to return to work sooner. Some technologies reduce the risk of infections, pain, or scar tissue for a patient. Some products or solutions may not even be considered in our current system because they are alternatives to the current offering and are unknown.

The impact of technologies and solutions on patient care and on the health care system are critically important in a publicly funded system and, by assessing the scenarios and using value-based procurement techniques and expertise, greater results, both fiscally and clinically, could be attained.

To that end, we recommend that health care products or solutions should be conducted through an approach which maximizes the value received from the use of public funds. Ideally, procurement should employ different tactics and approaches to allow for clinical choice and the varied impact of medical technologies to the clinician and the overall system. Value-based methodologies should be considered when the products affect short and long-term patient outcomes, patient or caregiver experiences or health care system costs.

This recommendation – alongside 5 other key recommendation related to the provincial supply chain centralized – are address in our recently released position paper “Provincial Transformation and Centralization of Procurement: Medical Technology Industry Perspective” (document attached and found here):

https://cdn.vmaws.com/medtechcanada.org/resource/resmgr/position_papers/positionpaper-perspective_ce.pdf)

Recommendation #6:

The Ontario Government should continue to support the work of the Ontario Health Technology Assessment Committee (OHTAC) and ensure the implementation and funding of OHTAC recommendations.

Health Quality Ontario (HQO) makes evidence-based recommendations to the Minister of Health on which health care services and devices should be publicly funded.

They fulfill this part of their mandate with the support of the Ontario Health Technology Advisory Committee (OHTAC) which reviews the HQO health technology assessments and then, after careful deliberation, makes final recommendations based on the reports.

OHTAC consists of volunteer members from across the province, including health care experts and individuals who can contribute the patient perspective, serving on a renewable two-year term.

With the creation of Ontario Health, and the merging of HQO into Ontario Health, Medtech Canada recommends that the Ontario Government continue to support the work of OHTAC and HQO in
Recommendation #7

The number of Quality-Based Procedures (QBPs) for cataract day surgery should be increased by an additional 6000 procedures per year to improve access and reduce wait times until we achieve guidelines (as per pan-Canadian benchmark agreed by Ontario).

Cataracts affect 2.5 million Canadians every year and are one of the leading causes of blindness and low vision in age-related eye diseases. The only way to restore vision is to undergo cataract lens replacement surgery. As people age, cataracts form naturally and are common among people 55 and older.

A cataract is the clouding of the lens in one’s eye, caused from protein build-up over time. For people who have cataracts, vision becomes increasingly blurry, making it difficult to see. Vision loss can affect a patient’s ability to perform simple daily tasks. Colours become muted, expressions on loved one’s faces become difficult to see and activities like reading and driving become nearly impossible. It’s as if you are seeing everything through a cloud or fog.

The pan-Canadian benchmark is 16 weeks (112 days) for cataract surgery. When the guideline was established in 2014, 81 per cent of Ontarians received surgery within the benchmark. Today, that number has decreased to 70 per cent.

In reality, patients are waiting even longer, since wait times in Ontario for surgeries and procedures are reported as “how long patients waited from a surgeon or specialist, or central intake office, receiving the referral from the patient’s family doctor, to the patient’s first surgical or specialist appointment.” It does not take into consideration how long the patient waited for the referral to the ophthalmologist.

It is estimated that 56,000 Ontarians are on the provincial cataract surgery wait list. This list is expected to continue to grow with the aging population.

Stakeholders such as the Provincial Vision Care Strategy Committee, patient groups and Eye Physicians and Surgeons of Ontario (EPSO) are aligned with this issue and the need for increased funding to manage wait times.

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6 Projecting the growth of cataract surgery during the next 25 years, Hatch, WV Campbell, E, de L Bell, CM, El-Defrawy, SR, and Campbell, RJ. Arch Ophthalmol, 2012; 130: 1479
Recommendation #8

The Ontario government should mandate the collection of data on the volume and types of precision medicine tests conducted in Ontario laboratories, in an effort to better understand whether or not Ontario is lagging behind other leading jurisdictions in the appropriate adoption and usage of precision medicine for the benefit of Ontario patients—especially given the rapid advancements in this area.

Precision Medicine utilizes biomarkers to identify an individual’s risk of developing a disease and its prognosis, as well as the likelihood of patients responding to a particular intervention, including monitoring the clinical response or toxicity to a therapeutic treatment. Currently precision medicine is most often used in oncology to inform patient treatment plans based on mutations associated with a specific cancer. An explanation of precision medicine is included in the attachments.

In addition to the oncology applications, precision medicine has applications in mental health (e.g. major depressive disorder), infectious disease (e.g. antimicrobial resistance), irritable bowel syndrome, and hyperlipidemia to name a few, in order to inform effective treatment plans. These treatment plans are more patient centric and improve outcomes, safety and efficacy. The use of precision medicine also shifts treatment plans from being less than optimal, thus reducing costs, optimizing resource allocation and helping to maintain a focus on sustainability.

Empirically, it appears that Ontario’s adoption of precision medicine lags other jurisdictions. The recommendation to capture data on the amount of testing performed will help the government understand current level of precision medicine testing, as well as lay the foundation for the government to develop future plans to better integrate precision medicine to enhance care and treatment for Ontario patients.

Conclusion

The people of Ontario want sustainable, first-class health care and a growing economy. The Doug Ford government has made clear its commitment to both. We have provided your government with solutions that will contribute to these goals and we are looking forward to working with you and your government to provide better health care for Ontarians, saving money in the system, creating good jobs and growing Ontario’s economy.

Thank you for your consideration of our recommendations. If you have any questions or would like to discuss further, please contact me directly at blewis@medec.org or (416) 641-2750.

Sincerely,

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Attachments:
- About Medtech Canada
- What is a Medical Technology?
- Medtech Canada Manufacturing Presence Ontario
- Medtech Canada Position Paper Centralized Procurement
- Optimizing the Role of Digital Health for Ontario’s Future - Medtech Canada submission to the Ontario Ministry of Health
- Precision Medicine Information