

# CANADIAN CANCER SOCIETY PATENTED MEDICINES PRICES REVIEW BOARD RETHINKING THE GUIDELINES CONSULTATION

OCTOBER 2016

Patented Medicine Prices Review Board (Rethinking the Guidelines) Box L40, 333 Laurier Avenue West, Suite 1400 Ottawa, Ontario K1P 1C1

RE: Consultation on PMPRB Guidelines Modernization - Discussion Paper

The Canadian Cancer Society (the Society) thanks the PMPRB for the opportunity to participate in the Guidelines Review though this submission. While we will not be addressing all questions asked in the discussion paper, we do want our submission to inform the Board about the specific challenges cancer patients face. We believe guidelines and policy changes should be assessed through the lens of patients with the objective of improving access to treatments.

## About us

Powered by 140,000 volunteers and a network of nationwide staff, and supported by millions of Canadians, the Canadian Cancer Society is Canada's largest national health charity. Our mission is to eradicate cancer and enhance the quality of life of Canadians living with and beyond cancer. Throughout our 77-year history, the Society has been a champion of healthcare improvements and innovation. We are dedicated to finding new and better ways to protect the health of Canadians, shrink cancer rates and reduce cancer's toll on our country.

The Society strongly supports federal and provincial efforts that help to ensure that Canadians have timely, equitable and affordable access to safe and effective medicines. In her mandate letter, the federal Health Minister was tasked by the Prime Minister to "improve access to necessary prescription medications. This will include joining with provincial and territorial governments to buy drugs in bulk, reducing the cost Canadian governments pay for these drugs, making them more affordable for Canadians, and exploring the need for a national formulary". The current review of the PMPRB guidelines is an important part of these efforts.

### Context

As Canada's leading cause of death, cancer is the very definition of a nationwide health issue. About 2 in 5 Canadians will develop cancer in their lifetime, and about 1 in 4 Canadians will die of the disease. With Canada facing a 40% projected increase in the number of new cancer cases by 2030¹, cancer is the single most serious health challenge facing our aging society. This challenge require attention and action from all governments on multiple fronts: prevention, screening, diagnostics and treatments, and greater support for people living with cancer. Access to drugs is a key pillar in helping people with cancer.

<sup>&</sup>lt;sup>1</sup> Canadian Cancer Society's Advisory Committee on Cancer Statistics. Canadian Cancer Statistics 2015. Toronto, ON: Canadian Cancer Society, 2015.

The drug pricing landscape is complex and has evolved in Canada over the last 15 years with new initiatives and bodies in place. In addition to PMBRB, the Canadian Agency for Drugs and Technologies in Health (CADTH) and its cancer-specific body, the pan-Canadian Oncology Drug Review (pCODR) and the pan-Canadian Pharmaceutical Alliance (pCPA) all have a role to play in reviewing and assessing drug pricing. Canada's pharmaceutical system becomes even more complex with the involvement of pharmaceutical companies, private and public payers, health professionals who prescribe, monitor and inform patients about options and side effects, patients and relatives and associations which support and represent them.

The rising cost of cancer medications is a concern for public and private payers but also for patients and the groups that represent them. With the projected rise in cancer cases, the Canadian Cancer Society is working alongside numerous stakeholders in insuring Canadians will have a sustainable access to prescribed medications.

# Drug access: cancer patient challenges

Today there are over 800,000 Canadians living with cancer in Canada. These Canadians face multiple challenges from unnecessary pain, physical and psychological suffering, to financial hardship. With regards to drug access, Canadians with cancer may face some of the following challenges:

- The best therapeutic option recommended by the oncologist is not listed on the formulary of the province of residence;
- The best therapeutic option recommended by the oncologist is a take-home medication and the person resides in Atlantic Canada or in Ontario where there is no specific program in place to cover the cost of these medications. The person with cancer has to figure out how to access these drugs. Even with private insurance, some patients in this situation will end up having to pay thousands of dollars.<sup>2</sup>
- The best therapeutic option recommended by the oncologist is in the process of being reviewed by one of the bodies involved in the drug approval process (Health Canada, pCODR, pCPA, provincial drug plans, and private drug plans).

The Canadian Cancer Society strongly believes Canadians should have timely, equitable and affordable access to safe, effective and sustainable cancer treatment and care without financial hardship, no matter where they live in the country and where the treatment is given, at home or in the hospital.

<sup>&</sup>lt;sup>2</sup> D. Wayne Taylor, *The Institutionalized Discrimination of Cancer Patients – Not what Tommy Douglas Intended: A Business Case for the Universal Coverage of Oral Cancer Medicines in Ontario and Atlantic Canada,* Cambridge ON: The Cameron Institute, 2014.

# Points for the PMBRB to consider

The Canadian Cancer Society strongly supports the PMPRB role in protecting consumers and from excessive pricing. From a patient point of view, pharmaceuticals are different from many other common goods and they therefore require unique oversight, rebalancing the uneven forces in the drug marketplace. The PMPRB is important for rebalancing uneven forces in the drug marketplace, in ensuring more equitable access across the country and in helping create a more sustainable healthcare system.

Make no mistake, the cost of a drug plays an important role in whether or not patients have access. When it comes to recommending cancer drugs for formulary listings, 65% of pCODR recommendations are conditional, with most of the conditions being on the cost-effectiveness being improved to an acceptable level.<sup>3</sup> These conditions can result in delays in access as governments negotiate prices with manufacturers and in some instances can lead to certain provinces choosing not to fund a drug. Price setting and negotiation can also lead to different funding decisions among payers – public, private or patient.

As the Board mentions in its discussion paper, assessing the therapeutic benefit of a drug also falls under the prerogative of CADTH, pCODR or Québec's Institut national d'excellence en santé et services sociaux (INESSS). As PMPRB reviews the factors on which it relies to assess excessive pricing, it should aim for better complementarity between institutions instead of potential duplication. It will be essential that the timing of the reviews not add additional time to the funding decision process. Early cooperation between Health Canada, CADTH, INESS and PMPRB is essential.

There is a definite need to review drug prices and ceilings over time. These reviews would provide the opportunity to consider the real-world evidence and impact of a drug outside of the clinical setting, including indication expansion.

The Canadian Cancer Society thanks you for the opportunity to provide comment and look forward to participating in any additional phases of the consultation.

<sup>&</sup>lt;sup>3</sup> CADTH pCODR Operational and Performance Metrics Report, Updated march 31, 2016. Available at: <a href="https://www.cadth.ca/sites/default/files/pcodr/pCODR-Performance-Metrics-Report-2016.pdf">https://www.cadth.ca/sites/default/files/pcodr/pCODR-Performance-Metrics-Report-2016.pdf</a>