



GENERIC AND BIOSIMILAR PRICING POLICIES FOR CANADIAN PUBLIC DRUG

This reference document summarizes (a) provincial generic pricing policies implemented since 2010 and (b) the pan-Canadian Pharmaceutical Alliance policies on generics and biosimilars. The tables are updated annually in January.

Table 1. Provincial generic pricing policies, generic prices as a percentage of the brand-name price

	2010	2011	2012	2013	2014	2015	2016
British Columbia	October 15: 50% existing generics 42% new generics	July 4: 40% all generics	April 2: 35% all generics	April 1: 25% most generics	April 1: 20% most generics All other generic non-oral solid forms are priced at 35% of the brand-name list price since April 1, 2014.	--	--

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	2010	2011	2012	2013	2014	2015	2016
Alberta	<p>April 1: 56% existing generics 45% new generics</p>		<p>July 1: 35% all generics</p>	<p>May 1: 18%</p>	<p>April 1: Lowest available price for existing generics; tiered pricing for new generics: 70% one generic 50% two generics 25% three generics 18% four or more generics</p>	--	--

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Ontario	July 1: 25%* public 50% private & out-of- pocket	April 1: 25%* public 35% private & out-of-pocket	April 1: 25%* public, private & out- of-pocket			May 15: Tiered pricing for generics†	--
Quebec	Quebec requires that generic manufacturers provide the province with the lowest price available in other provinces.						
New Brunswick			June 1: 40% December 1: 35%	June 1: 25%	--	--	--

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	2010	2011	2012	2013	2014	2015	2016
Nova Scotia		July 1: 45%	January 1: 40% July 1: 35%		November 12: 25%	--	--
Prince Edward Island			July 1: 35%	December 1: 25%		--	--
Newfoundland & Labrador			April 1: 45% October 1: 40%	April 1: 35% July 1: 25%	--	--	--

*Generic pricing policies apply to oral solid forms; all others are 35%.

†Changes to regulations applicable to generics listed on the Ontario Drug Benefit (ODB) Formulary on or after April 1, 2013.

Table 2. pan-Canadian Pharmaceutical Alliance initiatives

	2010	2011	2012	2013	2014	2015	2016	2017
Molecules reduced to 18% of brand reference price*				April 1: 6 of the most common generic drugs included	April 1: 10 of the most common generic drugs included	April 1: 14 of the most common generic drugs included	April 1: 18 of the most common generic drugs included	April 1: One-year bridging period during which the price 6 molecules† will be further to 15% of the brand reference price
Tiered Pricing Framework					<ul style="list-style-type: none"> • Tier 1 (single source) – one generic: 85% of brand reference price if a Product Listing Agreement (PLA) does not exist for the brand product; 75% if there is a PLA • Tier 2 (dual source) – two generics: 50% of brand reference price • Tier 3 (multi source) – three or more generics: 25% of brand reference price for oral solids; 35% for non-oral solids 			

Table 2. pan-Canadian Pharmaceutical Alliance initiatives

	2010	2011	2012	2013	2014	2015	2016	2017
Biosimilars							April 1: Issued the <i>First Principles for Subsequent Entry Biologics</i> to guide negotiations	

Note: After April 1, 2013, the general provincial generic pricing policies no longer apply to the drugs subject to the 18% pricing policy as per the Council of the Federation. Quebec did not participate in the pCPA for generic drugs at this time, but benefited from it because of the lowest price policy. <http://www.pmprovincesterritoires.ca/en/initiatives/358-pan-canadian-pharmaceutical-alliance>

***Molecules** under the 18% rule by date of implementation:

- April 1, 2013: atorvastatin, ramipril, venlafaxine, amlodipine, omeprazole and rabeprazole.
- April 1, 2014: rosuvastatin, pantoprazole, citalopram, and simvastatin.
- April 1, 2015: clopidogrel, gabapentin, metformin, and olanzapine.
- April 1, 2016: donepezil HCl, ezetimibe, quetiapine, and zopiclone.

†Molecules further reduced to 15%

- April 1, 2017: atorvastatin, amlodipine, simvastatin, pantoprazole, ramipril, clopidogrel