



## **BC Patients Respond to Government's Drug Policy Reform**

**Vancouver, BC – July 9, 2010** – The Better Pharmacare Coalition (BPC), representing two million BC patients, responded today to the BC Government announcement of a new policy on generic medication pricing and a Long Term Pharmacy Agreement.

“If Government wants to truly put patients first and achieve significant levels of total PharmaCare savings, then it must further reduce the price of generic medications, immediately on July 28, 2010, not phased-in over the next two years,” says Cheryl Koehn, Chair, Better Pharmacare Coalition. “The BPC has consistently recommended Government reinvest the savings from generic medication price reductions into additional Health Canada-approved brand name medications listings on the provincial formulary and into compensation for pharmacists to deliver expanded professional services, including patient consultations and immunizations – to the benefit of BC’s two million patients.”

Canadian patients and drug plans pay the second highest prices for off-brand or generic medications among developed countries after the United States. Currently, patients in BC pay some of the highest prices for generic medications in Canada. Under the current system, generic medication manufacturers also make significant profits without investing in research for new medications. The BC Government’s announcement is an explicit acknowledgement of this problem.

The BPC had recommended to Government that the new cost of generic medications be no more than 30 per cent of brand name medication costs to benefit British Columbians living with acute and chronic diseases. In April 2010, the BPC position was reinforced when the Ontario Government announced it would reduce the rising cost proportion of generic medications in the total Ontario Drug Benefit plan by banning the practice whereby generic medication manufacturers pay “professional allowances” to pharmacies to stock and sell their products. Ontario has been paying 50 per cent of the brand name price for generics but wants to reduce that amount to 25 per cent.

“If Ontario can reach 25 per cent and completely eliminate “professional allowances,” so can BC,” states Koehn.

Koehn continues: “The reduction of generic medication pricing and the Long Term Pharmacy Agreement are another significant test of the BC Government’s commitment to ensure that patients are a ‘paramount priority’ as stated in the May 2008 Pharmaceutical Task Force recommendations. Unfortunately, the Government did not fully deliver on its commitment to a collaborative and transparent process. The BPC was not included in the negotiation process that led to today’s announcement.

BC patients, their families and friends are demanding that the interests of patients be the Government’s key guiding focus as it continues its overhaul of the BC PharmaCare drug review process.”

The BPC has also consistently recommended to the BC Government that the business model that allows for “professional allowances” or rebates generic medication manufacturers pay to pharmacies should be completely abolished.

These “professional allowances” lead to a perceived or actual conflict of interest when remuneration is based solely on adapting prescriptions or making a therapeutic substitution. In that case, rather than making treatment decisions based on strictly physicians’ assessments and the individual needs of patients, pharmacists may have an added incentive to switch or adapt patients’ medications so they can be financially remunerated.

Rennie Hoffman, BPC steering committee member and Executive Director of the Mood Disorders Association of BC, states: “Working in the mental illness field, we recognize that pharmacists are an important member of a patient’s healthcare team, but they are not physicians and do not have clinical knowledge about an individual patient’s detailed health history to determine whether a prescription should be changed.”

Koehn concludes: “After two years of consulting on the Pharmaceutical Task Force recommendations implementation, the BPC is now measuring the Government’s commitment to make patients a ‘paramount priority’ by actions, not words. As a next step after today’s announcement, we expect the next step for Government will be to implement a new patient review module reflective of the exhaustive input they have received from the BPC, and other patient organizations, in parallel with the other elements of the new drug review process as promised by the BC Ministry of Health Services.”

**About Better Pharmacare Coalition:** The Better Pharmacare Coalition is comprised of ten health organizations and consumer interest groups from across BC representing the interests of more than two million constituents across the province. The coalition was formed in 1997 in response to BC PharmaCare policy development being not reflective of current medical literature, best clinical practices and the needs of patients in BC. The coalition works together to call for appropriate access to evidence-based medicines that are proved effective and needed by patients in BC. The member organizations include: Arthritis Consumer Experts; The Arthritis Society, BC & Yukon Division; BC Lung Association; BC Schizophrenia Society; Canadian Association for Retired Persons; The Kidney Foundation of Canada, BC Branch; Mood Disorders Association of British Columbia; MS Society of Canada, BC Division; Parkinson Society British Columbia. More information is available online at [www.betterpharmacare.org](http://www.betterpharmacare.org).

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