

July 20, 2010

Open letter to all MLAs:

At the July 9, 2010 BC Government announcement of a new policy on reduced generic medication pricing and a Long Term Pharmacy Agreement, the Better Pharmacare Coalition (BPC) was encouraged by Minister of Health Services, Kevin Falcon's comments that part of the PharmaCare savings from the announced changes will be redirected to cover the costs of new medication on the public formulary and providing greater therapeutic choices for doctors and their patients. 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.

The BPC is concerned about the implementation timeframe. The Coalition maintains that if Government wants to truly put patients first and achieve significant levels of total PharmaCare savings, then it must reduce the price of generic medications, immediately on July 28, 2010, not phased-in over the next two years.

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.

However, 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. As you are aware, 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. The BPC believes if Ontario can reach 25 per cent and completely eliminate "professional allowances, so can British Columbia.

The reduction of generic medication pricing and the Long Term Pharmacy Agreement were also 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, representing BC's two million patients, was not included in the negotiation process that led to the July 9th announcement and our members their families and friends are demanding that patient interests must 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. 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.

The Better Pharmacare Coalition has consulted on the Pharmaceutical Task Force recommendations implementation for more than two years and we are now measuring the Government’s commitment to make patients a ‘paramount priority’ by actions, not words. As a next step after the July 9th 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.

We will continue to monitor the implementation of the PTF recommendations and encourage you to review the PTF Tracking Tool that we have developed and included with this letter.

Sincerely,

A handwritten signature in black ink, appearing to read "Cheryl Koehn". The signature is fluid and cursive, with the first name "Cheryl" and last name "Koehn" clearly distinguishable.

Cheryl Koehn
Chair, Better Pharmacare Coalition

cc: Better Pharmacare Coalition member organizations:
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.