#### Drug Access Navigators in Canada

By Alan Birch

## Overview

- Cancer drug spending
- An expensive future
- Opportunity for change

## Why we need navigators

- Drug access has become a very complicated. There can be many forms for patients to complete, different sources of drug funding and various programs to help get additional support.
- For patients who rarely fill a prescription and have been diagnosed with a new and serious disease, the burden can be overwhelming.
- Drug Navigators connect patients with services and programs that alleviate the financial burden of their treatment so they can focus on getting better.

## Oncology Cost Background

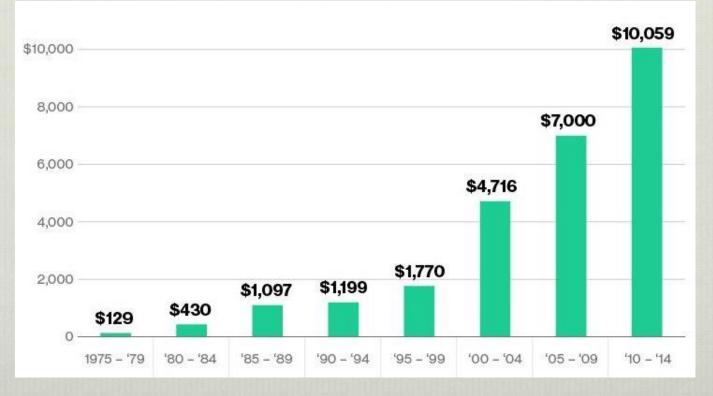
- In oncology, the average price of a new drug is approximately \$10,000 per month.
- Across Canada, we don't have an exact figure of how much is spent on cancer drugs every year.
- Some provinces funding orals and IV drugs from different budgets. Some charge patients deductibles, others don't. Some drugs are paid for by hospitals, others private insurance and some patients pay out-ofpocket.
- The cost is estimated to be at least \$1 billion per year.

# Oncology Support

- As a result of the numerous complexities, wait times and costs faced by patients, Drug Navigators rely on Patient Support Programs (PSP) from the pharmaceutical industry.
- Program features include:
  - Co-pay assistance for private insurance
  - Compassionate drug supply
  - Bridging drug supply while waiting for government approvals
  - Nursing phone support
  - Care kits
  - Home delivery

### The Future

Oncology drug costs have increased dramatically in recent years. Paying out-of-pocket and copays for these agents are impossible for patients for afford on their own.



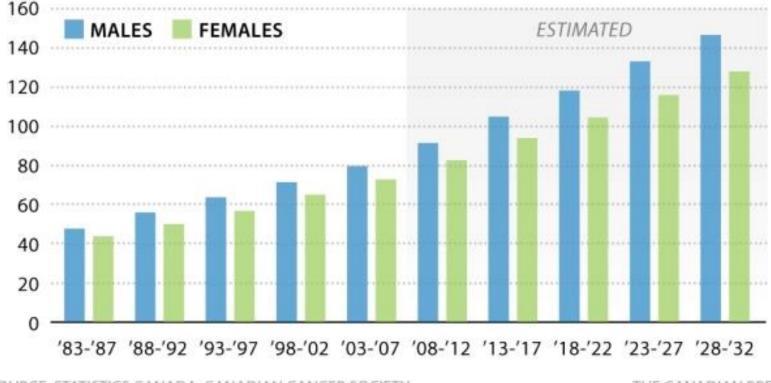
## The Future

- Without changes to our drug funding policies, expensive medications will continue to rise in price and will consume larger portions of provincial budgets.
- Our aging population will result in an increase in the number of Canadians diagnosed with cancer.
- Earlier screening is helping to find more cancers that would have been missed previously.
- New oncology regimens are combining drugs. 2-3 expensive drugs that target cancer in different ways are being combined to increase effectiveness.
- Our public drug funding model not is well equipped to deal with combination therapies involving IV and orals given together or the cost implications.

## The Future

#### **NEW CANCER CASES IN CANADA**

#### AVERAGE ANNUAL NEW CASES (IN THOUSANDS)



SOURCE: STATISTICS CANADA: CANADIAN CANCER SOCIETY

THE CANADIAN PRESS

## Efficiencies and Changes

- National Formulary: Could lower administrative costs and increased purchasing power by having all provinces unite in their formularies and buying as one block.
- Expanded drug coverage offset with copays. For example, \$10 per prescription paid by patients in exchange for universal coverage.
- Tightly controlling formularies: Formularies should be added to and have items removed to be current with the newest data.
- ✤ Watching for physicians prescribing far outside the norm.

## Efficiencies and Changes

- More diagnostic tests built into clinical trials to ensure drugs are only used on those that will get the most benefit.
- Subsequent Entry Biologics (SEBs) also known as biosimilars will allow more competition and drive down costs while also allowing more patients to be treated. SEBs are slowly entering the oncology market right now but will have a greater impact in the coming years.

## What can you do?

- If you're a cancer patient, find out if your hospital has a drug navigator who can help you with your medications.
- As patients, stakeholders and advocates, supporting a national formulary and pushing to unite our systems across Canada will help fix the fragmentation and allow for seamless, efficient patient care.
- Break down silos in government.
- You can write your local political leaders and Health Ministries to bring increased focus to the need for expanded, affordable access to drugs across Canada.



