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Congress of Union Retirees of Canada (CURC)

Submission on the PMPRB Draft Guidelines June 2020

August 4, 2020

by Keith Newman, member of CURC

Introduction

CURC represents thousands of retired union members across Canada through provincial Federations, local Area Councils, and individual membership. CURC advocates and lobbies on issues relevant to retired union members and their spouses.

CURC is a strong supporter of a universal public pharmacare program as it will ensure lower costs, fair access to the medicines Canadians need and more appropriate prescribing by doctors.

Comments on the June 2020 Guidelines

Canada has among the highest prescription drug prices in the world. This fact has been demonstrated in PMPRB studies as well as other sources over many years. The higher prices have achieved nothing for Canada. Investment in research and development by the pharmaceutical industry is very low when compared to other similar countries, and high prices have not meant drugs have been more accessible. Consequently CURC strongly supports the plans by the PMPRB to bring Canadian prices to lower, more acceptable levels. The PMPRB November 2019 draft guidelines were a good start at achieving this goal.

Unfortunately industry pressure has resulted in the June 2020 draft guidelines making unjustifiable concessions to the pharmaceutical industry that has been overcharging us year after year, for decades.

Major Concession 1: Fewer Patented Medicines Classified as Category I

Medicines listed under "Category 1" are subject to stronger price controls than other drugs. More information and studies must be produced to justify their proposed prices to the PMPRB. Unfortunately the June 2020 version of the guidelines will broaden the existing exemptions for new patented medicines from these stronger controls.

This is a concession to the pharmaceutical drug industry and the patient groups they subsidise. CURC urges the PMPRB to revert back to its November guidelines on this issue.

Major Concession 2: Grandfathered patented medicines

The November 2019 Draft Guidelines proposed that for grandfathered medicines the Maximum List Price (MLP) allowed by the PMPRB be set by the lower of the Median International Price for the PMPRB11 comparator countries and other factors. This provision ensures that (list) prices in Canada align with international norms. Unfortunately the revised guidelines allow for the median price to be replaced by the Highest International Price thus allowing for higher prices.

The PMPRB Backgrounder 2020 describes this change as a "concession" to the drug industry. CURC does not agree with this change and urges the PMPRB to revert to its prior position of using the Median International Price.

Major Concession 3: "Biosimilars" and Generic Medicines

In the November 2019 draft guidelines producers of "biosimilars" (the generic equivalent of biologic drugs) would be required to file price information with the PMPRB. The 2020 version weakens that provision by requiring producers of biosimilars to file this information only in the event of an official complaint. This lowering of requirements was also extended to patented generic drugs. Unfortunately this weakening of requirements does not take into account the possibility of the biosimilar or generic drug being the only drug available if the original patent holder has withdrawn its drug from the Canadian market.

In the event that a biosimilar or patented generic drug is the only one available in Canada, CURC urges the PMPRB to require full scrutiny by the PMPRB, as is the case for other patented drugs.

Conclusion

CURC urges the PMPRB to resist pressure by the pharmaceutical industry and its associated lobbyists. We urgently need to join every other developed country (except the United States) in adopting a universal public pharmacare program. The PMPRB has an important role to play in making that possible.