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Alternatively, you can submit feedback in the text box below.

pCPA Response to PMPRB Scoping Paper on Board Guidelines Please accept the present document as the pan-Canadian Pharmaceutical Alliance's (pCPA) response to the Patented Medicine Prices Review Board's (PMPRB) November 2023 Scoping Paper for the consultations on the Board's Guidelines ("Scoping Paper"). The pCPA commends the PMPRB for publishing the Scoping Paper and seeking stakeholder feedback on its contents. We believe in working collaboratively and constructively with all participants in the pharmaceutical ecosystem to advance our shared interest in a sustainable publicly funded health system that improves the health of all Canadians. The pCPA was established in 2010 by provincial and territorial governments to achieve greater value for their publicly funded drug programs by jointly negotiating drug prices. As of April 1, 2023, the pCPA has realized overall annual government savings of $3.14 billion for brand name drugs and $750 million for generic drugs totaling $3.89 billion. We recognize that the PMPRB does not set prices for patented medicines. However, to the extent that its guidelines encourage rights holders to price within the band of the 11 countries Canada compares itself to, this can have a national impact on both public and private payers. List prices serve as an important point of reference for public payers. On average public payers reimburse 88 percent of the total expenditure on drugs eligible for reimbursement (with the remainder paid out of pocket or through a private insurer) accounting for 44 percent of total spending on prescription drugs in Canada. The remaining 56 percent of the market is accounted for by private insurers and the uninsured, who are more likely to pay list prices, and thus stand to benefit even more from PMPRB's oversight role. As a second point of emphasis, in these challenging times for drug plan sustainability, we believe the PMPRB should continue monitor increases in list prices to ensure they are not excessive. As noted in the Scoping Paper, Canadian prices are slightly increasing over time while international prices in the PMPRB 11 decrease. In response to the question regarding potential efficiencies between different actors in the Canadian pharmaceutical ecosystem, while we believe that this is a laudable objective, we note that each of the cited organizations has a distinct role and mandate, with differing inputs and outputs. Given that the timing of these inputs is often outside the control of the organizations, it would be difficult to coordinate timelines. That being said, we look forward to hearing from other participants in the system on this question and for greater detail to be forthcoming as the PMPRB pursues its consultation initiative. As a final note, the pCPA is concerned with the open-ended nature of the current Interim Guidance given the limited oversight it contemplates over the prices of patented therapies which are newly launched in Canada. We respect the PMPRB's desire to consult its stakeholders in a meaningful and comprehensive fashion but encourage you to implement functioning standards as soon as practicable to resolve this period of uncertain price standards and enforcement. Thank you for your consideration. The pCPA will be monitoring ongoing consultations with great interest and looks forward to seeing new PMPRB guidance operationalized in 2024. Douglas Clark Chief Executive Officer pan-Canadian Pharmaceutical Alliance