

**Written Submission for the Pre-Budget
Consultations in Advance of the 2020
Budget**

By: The Arthritis Society

List of Recommendations:

- **Recommendation 1:** Implement a national pharmacare program that ensures all Canadians have access to a broad range of medicines
- **Recommendation 2:** Stop the taxation of medical cannabis and enable its distribution through pharmacies
- **Recommendation 3:** Address lengthening wait times for access to health services by increasing the Canada Health Transfer to the level of health system demand growth (5-6% annually)

Dear Sir or Madam,

On behalf of the Arthritis Society, thank you for the opportunity to provide input on the federal government's 2020 budget. Our organization speaks to give voice to the one in five Canadians (and one in two Canadian seniors) who have arthritis – a collection of conditions affecting joints and other tissues that can cause pain, restrict mobility, and diminish quality of life for patients.

In Budget 2020 the federal government has an important opportunity to improve the health and well-being of the millions of Canadians living with arthritis by adopting the following key recommendations:

Recommendation 1: Implement a national pharmacare program that ensures all Canadians have access to a broad range of medicines

There is currently no cure for arthritis, so pharmaceutical treatments play a large role in management of the condition, which can persist over many years. Unfortunately, due to disparities in coverage between the provinces and between public and private drug plans, not all Canadians have equitable access to the medications they need. We can and must do better to provide a more consistent approach to access to medications through a national pharmacare program.

However, correcting these inequities must not be done through a race to the bottom, by making the current deficiencies of our public drug plans – which are slower to fund and cover far fewer medications than private plans – applicable to all. Access to a wide range of treatments is important for all patients but is vital for those with arthritis because they respond differently to different treatments. What works for one patient may not work for another, so a range of choice is critical. That full range is not available now for Canadians on public drug plans but must be under any national pharmacare program.

Recommendation 2: Stop the taxation of medical cannabis and enable its distribution through pharmacies

There are a range of effective treatments that can help patients manage their arthritis pain and lead productive lives, and one of those treatments is medical cannabis. The majority of patients authorized to possess medical cannabis were diagnosed with "severe arthritis."

While we are largely pleased with the Cannabis Act's preservation of a distinct system for medical cannabis, one outstanding issue that remains a concern for the Arthritis community is the ongoing taxation of medical cannabis. The costs associated with the use of cannabis for medical purposes (sometimes upwards of \$500/month) can put an enormous financial strain on many patients. In combination with limited insurance coverage, the taxation of cannabis for medical purposes presents additional access barriers to this effective form of treatment. It is also inconsistent with the taxation of prescription drugs and medical necessities, which are zero-rated under the Excise Tax Act.

To further support patients, pharmacies should also have the authority to retail medical cannabis. This will create a clear distinction between medical cannabis and cannabis for recreational/non-medical use and help ensure that patients receive reliable education on the safe and effective use of medical cannabis from trained health care professionals. This will also help facilitate reimbursement by health insurance plans.

Recommendation 3: Address lengthening wait times for access to health services by increasing the Canada Health Transfer to the level of health system demand growth (5-6% annually)

Arthritis is the leading cause of joint replacement, including over 99% of knee replacements and over 80% of hip replacements. As our population grows older, more and more Canadians will require joint replacement. Unfortunately, many provinces are struggling to provide timely access to joint replacement surgery, due to increased demand and lack of resources. As a result, wait times are getting worse and worse. This leads to unnecessary pain and suffering for many Canadians who are prevented from contributing to their families, communities, and workplaces. The federal government can get ahead of this issue by increasing the Canada Health Transfer to the level of health system demand growth – between 5 and 6 percent annually – to ensure that provinces are able to meet the medically recommended 6-month target for knee and hip replacement surgeries.

Closing comments

The Arthritis Society, on behalf of the millions of Canadians with arthritis, greatly appreciates this opportunity to provide input on the 2020 federal budget. We would welcome the opportunity to elaborate on these recommendations by providing oral testimony in the House of Commons Standing Committee on Finance.

Sincerely,
Janet Yale, CEO,
The Arthritis Society

About the Arthritis Society

The Arthritis Society is Canada's largest charitable source of investment in cutting-edge arthritis research, and a leader in proactive advocacy, education and support towards delivering better health outcomes for people affected by arthritis. Safety and improved care are our top priorities, with our advocacy focused on improving access to care, timeliness of care, and innovative research. The Arthritis Society is accredited under Imagine Canada's Standards Program.