



Written Submission for the Pre-Budget Consultations in Advance of the Federal Budget 2022

Introduction

The COVID-19 crisis has forced many changes in health care in Canada, many of which can continue to yield positive benefits if consolidated for the future.

The need to access high-quality comprehensive, continuous primary care, as provided by family physicians, is more pronounced than ever. Virtual tools that were widely taken up during the pandemic are one of the ways to enhance access to a patient's own family doctor or primary health care team, working within the publicly funded system. Strengthening the primary care system's capacity is an urgent priority as demand for care soars during and following the pandemic.

Canada continues to lag as the only high-income country with a universal health care system not comprehensively covering pharmaceutical medications.

Ongoing health inequities facing Indigenous peoples are put in stark relief by the continuing discoveries of genocide. This budget has a chance to address years of failed promises made to Indigenous people.

Federal Budget 2022 Recommendations Summary

1. Ensure all Canadians have access to primary care teams featuring family doctors.
 - a. Strengthen primary care systems across Canada in alignment with the Patient's Medical Home vision by investing \$2 billion in a new Primary Care Access Fund.
 - b. Invest \$2 million to study the opportunities for interprofessional training of family physicians and other professionals in the delivery of primary care.
 - c. Support the adoption of and transition to blended payment remuneration models that best meet the needs of family physicians and primary care teams.
 - d. Lead the creation of national standards on the use of virtual care in primary care settings.
2. Fully implement universal national pharmacare.
3. Support Indigenous and rural communities in achieving equitable health and social well-being.
 - a. End boil-water advisories in all Indigenous communities.
 - b. Support Indigenous communities recovering from residential school genocide.
 - c. Support adoption of virtual care by investing in appropriate communications technology and education programs.

RECOMMENDATION 1: Ensure all Canadians have access to primary care teams featuring family doctors

Strengthen primary care systems across Canada in alignment with the Patient's Medical Home vision by investing \$2 billion in a new Primary Care Access Fund.

Primary care is the foundation of an effective health care system. The characteristics that make primary care truly effective in maintaining a healthy population are integration with other health care settings and community services, collaborative care, and a focus on the needs of patients. This approach, formalized by the CFPC in its vision of the **Patient's Medical Home (PMH)** (www.patientsmedicalhome.ca), has a broad coalition of support and has informed development of primary care models in several provinces, including Family Health Teams in Ontario, Groupes de médecine de famille in Quebec, and Primary Care Networks in Alberta.

High-functioning practices aligned with the PMH vision reduce use of emergency rooms, drive down long-term system costs, improve management of chronic disease and screening rates, as well as enhance continuity of care and satisfaction of patients and providers.

Access to primary care is emerging as a crucial concern. Despite the best efforts of the overworked primary care workforce, gaps in access are leading patients to rely on for-profit, corporate solutions to access care. Such episodic, disconnected services are a poor substitute for comprehensiveness and continuity provided by a regular family physician who knows his/her patients. These lead to potential duplication, disrupt continuity, and exacerbate inequities. Access to the publicly funded system must be enhanced and the federal government has a key role to play.

Building on joint advocacy work with the Canadian Nurses Association, Canadian Medical Association, and the Canadian Society of Social Workers, the CFPC is calling on the federal government to institute a **\$2 billion Primary Care Access Fund** over four years.

This investment would empower provinces to strengthen primary care and move towards a collaborative, integrated system as described in the Patient's Medical Home vision. This would allow for an effective integration of virtual care as a tool in enhancing access to high quality care.

In addition to meeting the government commitment of everyone in Canada having access to a family physician, this initiative leads to long-term system efficiency. Data from Alberta demonstrated that two clinics aligned with the principles of the Patient's Medical Home saved the system over \$120 million over 10 years through reduced dependency on hospital services.

Investment into strengthening primary care would ensure a more accessible and efficient health care system that would prioritize the needs of patients and continuity of care.

Invest \$2 million to study the opportunities for interprofessional training of family physicians and other professionals in the delivery of primary care.

The CFPC supports the Canadian Medical Association's call for a targeted \$2 million study to identify and assess training needs of family physicians and other health professionals as these apply to practice in interprofessional teams.

This initiative would produce much needed data to further inform the type and amount of training that various primary care team members such as family doctors, nurses, social workers, pharmacists, and many others receive in team-based care learning.

Budget 2022 should invest \$2 million in a study to assess the current status of training in medical school and other health professional degrees pertaining to focus on interprofessional team-based care delivery. This data would serve as an invaluable springboard to update the approach to interprofessional training to meet the evolving needs of Canadian communities.

Support the adoption of and transition to blended payment remuneration models that meet the needs of patients and practice teams.

Family physicians in Canada are paid primarily through the fee-for-service model. This structure is outdated as it rewards high-volume care and disincentivizes comprehensiveness and management of complexity. Supporting provincial and territorial governments to adopt blended payment models will allow primary care funding to better support the integration of high-functioning primary care teams.

Currently, most family physicians who work in high-functioning primary care teams must often create ad hoc financial structures to operate an interprofessional primary care team. Being able to rely on an accessible funding model offered by the province would be a significant improvement. Alternative models exist across Canada, but they are applied in a patchwork or on a small scale.

The federal government should use its convening role to bring provinces and territories to the table to collectively adapt funding toward blended payment models, allowing for flexibility to account for individual practice needs. Sufficient program funding should be made available for this initiative.

Support the creation of national standards on the use of virtual care in primary care settings

The COVID-19 pandemic catalyzed the adoption of virtual care in health care delivery. Family physicians report a significant increase in the proportion of overall visits they conduct by virtual means. Virtual care has many benefits. But the pandemic has also revealed great uncertainty and significant inconsistency with what type of care is funded and is appropriate to be delivered – and by whom – depending on the province.

The federal government should lead the drafting of national standards that will normalize the variance in virtual care delivery. It is particularly important that the federal government show leadership in protecting Canada's publicly funded health care system by making clear that virtual care must be used to enhance access to publicly funded care. The role of for-profit corporate health care providers that threaten continuity, introduce potential for duplication of services and exacerbate inequality must be clarified. National standards in this area will ensure that access to care for all people in Canada is protected and enhanced.

National standards will:

- Spell out expectations for types of services covered under virtual care codes.
- Reinforce the foundation of equity enshrined in the *Canada Health Act*, ensuring the best care is not siphoned off for those who have the ability to pay.
- Help save money in the long run by reducing the risk of for-profit providers cherry-picking healthy patients leaving the public system to care for those most in need.
- Save the cost of duplication of services that will result from for-profit providers getting involved in virtual care delivery without the responsibility of a patient panel that allows for continuity of care.

RECOMMENDATION 2. Fully implement universal national pharmacare.

The pandemic put a strain on the pocketbooks of many in Canada, and particularly highlighted the fact that for many people, affording necessary medication remains a challenge. Canada continues to be the only high-income country with a universal health care system that does not also universally cover prescription medication.

The government signaled support for adoption of universal national pharmacare, including supporting the work of the Advisory Council on the Implementation of Pharmacare. However, legislation advancing action to enact the program, (such as the recently defeated Bill C-213) did not receive the government's support. Additionally, the budget allocated towards pharmacare in the current budget falls well below the projected costs of robust implementation.

The government must act to legislate the inclusion of pharmacare under the *Canada Health Act* accompanied by sufficient funding for its full implementation.

RECOMMENDATION 3. Support Indigenous and rural communities in achieving equitable health and social well-being

End boil-water advisories in all Indigenous communities

Despite the government's 2015 commitment to end boil-water advisories within five years, in 2021 many are still in effect. It is unethical and immoral for any community in Canada to live without access to potable water, especially when this has been an enduring health hazard for decades. A commitment to end remaining advisories within three years is necessary and should be enabled with adequate funding.

Support Indigenous communities recovering from residential school genocide

The steps the government has taken to acknowledge and address systemic discrimination are important and must be developed into robust programs with measurable outcomes. As more and more unmarked grave sites at residential schools are discovered, the need to demonstrate tangible action towards reconciliation becomes ever more urgent.

Indigenous communities need support to find, recover and document all the lost children buried in unmarked graves in residential schools across Canada. Indigenous communities are owed the respect of supporting those survivors of residential schools, as well as those families left behind by the children who were taken and never came home.

Support adoption of virtual care by investing in appropriate communications technology, infrastructure and education programs

Virtual modes of care can improve access to care for people living in rural and remote settings. This does not mean exclusively Indigenous communities, but it is nevertheless vital to ensure that these communities have access to the same standard of care as all other Canadians. Effective virtual care depends on equitable access to reliable communications technology to enable video, telephone, and asynchronous text communications with health care providers. To harness the benefits for rural and remote communities the federal government should invest in enhancing the existing infrastructure to ensure that reliable, high-speed internet access is available throughout Canada. Patient education programs to ensure comfort with technology and ability to use it effectively are also required.

About the CFPC

The voice of family medicine in Canada

The College of Family Physicians of Canada (CFPC) is the professional organization that represents more than 40,000 members across the country. The College establishes the standards for and accredits postgraduate family medicine training in Canada's 17 medical schools. It reviews and certifies continuing professional development programs and materials that enable family physicians to meet certification and licensing requirements.

The CFPC provides high-quality services, supports family medicine teaching and research, and advocates on behalf of the specialty of family medicine, family physicians, and the patients they serve.

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