

## **Alberta Needs a Coherent, Evidence-based, Pharmaceutical Policy**

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Alberta needs a coherent pharmaceutical policy. It was expected that the province's NDP government would follow through on its commitment to a universal drug benefit program and to improve the drug benefits.

Instead, the focus has been on protecting the drug budget even though it put patients at risk and shifted more cost onto patients.

The most recent change in the drug benefit program is the reduction in pharmacists' reimbursement. Pharmacists were shocked that the government, once again, pushed major changes with little meaningful discussion. The government press release states that the government will save \$150 million and some patients may save \$100.

The technical report accompanying the press release lists the changes in the funding framework agreement with pharmacists: reduced professional fees, reduced fees for patient monitoring, reduced fees for influenza injections, reductions in payments for daily or weekly service and a holdback of 10 per cent on reimbursement claims. However, any information on how the savings were calculated or how the changes will affect patient care are not provided.

The changes in the funding framework ignore health status and imply that other than savings to the government, everything else stays the same. Unfortunately, the concept of putting patient first has disappeared and patients are expected to foot the bill personally or face diminished health services. This was not the only choice open for government as there are best practices that improve both health care and also reduce overall health expenditures.

The government focus on drug prices to reduce expenditures is misguided. Drug expenditures are the product of price and quantity (utilization). Price has been at the forefront of discussions around the increasing cost of pharmaceutical care, but the main cost driver is utilization not price. Utilization is also the determinant of quality of care and patient safety. Ignoring these important issues is not a policy that improves health care.

Health programs normally have performance indicators to enable an evaluation of health impact. The auditor general has been critical of Alberta Health and their lack of performance indicators and this includes pharmaceutical programs which do not have performance indicators.

What will the impact of these reimbursement changes be on pharmacy service? The cumulative reductions in fees are significant and the drop in revenue will change pharmacy services and staffing. This comes at a time when pharmacists are moving towards increased monitoring of their patient's medication to ensure that they are safe and appropriate as well as an expanded ability to tailor drug therapy specifically to the individual.

Pharmacists are also spending more time dealing with drug shortages, some of which are due to the lower generic prices imposed by government. Overall, there is a growing problem due to increased patient-care demands that are being overlooked by program changes. Who speaks for the patients?

The growth of pharmacy services has increased expenditures but there has also been a significant positive health impact. There is a need for managing costs in the health-care system, but the current cumbersome, bureaucratic process that focuses on each aspect of the system in a vacuum serves to discourage the provision of care rather than improve it.

There is increasingly a perception that needed changes in health care are ignored and that government is not listening. A first step in combatting these perceptions would be the creation of a coherent pharmaceutical policy based on empirical research.

With this, we can truly put our tax dollars to the most effective use and ensure that Albertan's receive the care they need for years to come.

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