

pan-Canadian Pharmaceutical Alliance Office

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Bureau de l'Alliance pancanadienne pharmaceutique

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Suite M2-61  
Toronto ON M7A 2E1

September 26, 2016

Patricia Bacon  
Chair, Action Hepatitis Canada  
1-36 Toronto St.  
Barrie, ON, L4N 1T9

**RE: Treatments for Chronic Hepatitis C Infection**

Dear Ms. Bacon:

The pan-Canadian Pharmaceutical Alliance (pCPA) operates under the authority of the Council of the Federation's Health Care Innovation Working Group (HCIWG), providing participating jurisdictions with a mandate to negotiate collectively to:

- Increase access to clinically effective and cost-appropriate drug treatment options;
- Improve the consistency of drug funding decisions;
- Achieve consistent pricing and lower drug costs; and
- Reduce duplication and improve resource utilization.

The participating pCPA jurisdictions (Newfoundland and Labrador, Nova Scotia, Prince Edward Island, New Brunswick, Québec, Ontario, Manitoba, Saskatchewan, Alberta, British Columbia, Yukon Territory, Non-Insured Health Benefits, Correctional Service of Canada and Veterans Affairs Canada) thank you for your letter written on behalf of Action Hepatitis Canada.

I have been asked by the pCPA jurisdictions to provide you with their collective response to your letter.

The Canadian public drug plans agree that improved access to new, effective hepatitis C treatments is required. The public drug plans would like to manage and eventually eradicate hepatitis C. The drug plans are aware that in May 2016, the Canadian Agency for Drugs and Technologies in Health (CADTH) completed its review of hepatitis C treatments and recommended that all patients should be considered for treatment. However, CADTH's report also acknowledged the potential impact on health system sustainability of treating all patients.

As you are aware, the new drugs are very costly, ranging at list costs between \$45,000 to over \$100,000 per patient depending on the product and the length of treatment. In fiscal year 2015/2016, public drug plans collectively treated about 10,000 hepatitis C patients. In many provincial/territorial jurisdictions, expenditures greatly exceeded budget projections.

Although public drug plans have previously negotiated improved pricing from some hepatitis C drug manufacturers, the costs of treatment are still unsustainable. Therefore, the public drug plans are

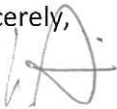
actively exploring feasible opportunities to address the desire to treat more hepatitis C patients and work towards eradication of hepatitis C while also addressing the significant cost pressures, sustainability of public drug funding, and entry of many new innovative and often expensive drugs that also require funding considerations.

The pCPA is currently in active negotiations with the manufacturers of new hepatitis C treatments. All federal, provincial, and territorial public drug plans of the pCPA are participating and working towards finding a creative solution.

I would like to invite you to meet with the pCPA Office and representatives from the pCPA participating drug plans for further discussion.

If you have any questions or wish to arrange a meeting, please contact myself or Sang Mi Lee (416) 326-3309; email: [SangMi.Lee@ontario.ca](mailto:SangMi.Lee@ontario.ca).

Sincerely,

A handwritten signature in black ink, appearing to be 'IA', written over a light grey circular stamp.

Imran Ali  
Senior Manager  
pan-Canadian Pharmaceutical Alliance Office

cc: Participating Federal/Provincial/Territorial Drug Plan Managers