

# CANCERTAINTY COALITION WELCOMES NOVA SCOTIA MINISTRY OF HEALTH'S COMMITMENT TO IMPROVING CANCER CARE IN THE PROVINCE

Health Minister Meets with Cancer Patient Groups, Oncologists and Patients to address gaps in coverage with Take-Home Cancer Medications

Halifax, Nova Scotia, December 9, 2016 – Members of the CanCertainty Coalition, the united voice of more than 35 Canadian cancer organizations, along with local oncologists and cancer patients, met with the Honourable Leo Glavine, Minister of Health, on Thursday to readdress the urgent health issues cancer patients in Nova Scotia face related to take-home cancer medications: the highest out-of-pocket costs in Canada and delays in starting critical, life-saving treatments.

In the meeting, Minister Glavine committed to immediately look at the cumbersome process of getting cancer patients their treatments and bringing together all Atlantic Provinces to find a regional solution that improves patient access to take-home cancer medications.

"This new commitment by the Minister is a welcome first step for cancer patients, their families and the health care teams that look after them. Every Nova Scotian – and every Canadian – needs a cancer system that lets patients focus first on their treatment and recovery and puts the burdens of funding, access, and administration into the background" says Deb Maskens, kidney cancer patient and cofounder of CanCertainty.

"We look forward to working with the Minister to ensure these commitments translate into practical and equitable solutions for cancer patients in Nova Scotia."

Canada's Western provinces all treat take-home cancer drugs and hospital-administered cancer drugs on an equal basis, regardless of cancer type, age, or income. This is not the case in Nova Scotia where a prescription for take-home cancer medication can result in significant financial hardship.

Oncologists agree it's time to address this growing problem. "Cancer patients often require chemotherapy, and whether it is pills taken by mouth or intravenous should not matter. Many provinces recognize this and oncologists in these provinces can focus on the patient. We do not want to have to spend that time trying to figure out what drug plan they have, how much co-pay there is and if there is a program to help them afford it," says Dr. Bruce Colwell, Medical Oncologist at QEII Health Science Centre.

"There are savings that can be made when we place all cancer medicines under the same program and infrastructure."

#### The Evolution of Cancer Treatment

Traditionally cancer treatments were administered to patients by an IV in the hospital. Over the past 10 years, an increasing number of effective cancer treatments can be taken at home by pill or injection. Take-home cancer medications are now a fundamental part of today's cancer treatments and should be recognized equally within our health care systems.



Patients requiring an intravenous treatment can start that medication as soon as needed and don't face any financial or administrative burdens provided the drug is included on the provincial formulary.

However, when take-home cancer medications are prescribed, patients in Nova Scotia who are under 65 have to apply to a variety of funding assistance programs and ultimately pay a significant deductible or co-pay from their personal savings. In some cases, the cost to the patient might be as high as \$23,400 annually, based upon Nova Scotia's Family Pharmacare Program. To qualify for assistance programs, patients and their families have to submit significant amounts of personal and financial information and often face weeks of stressful delay in starting their cancer treatment until the paperwork and approvals are resolved.

Even for Nova Scotians with private drug insurance, the reality is that many face significant co-pays, deductibles or annual/ lifetime caps. For example, some private insurance plans have a cap of \$2,000 for prescription drugs for the entire year. The majority of take-home cancer drugs cost more than \$20,000 per year.

"You hear 'cancer' and you think that's all you can bear, but then soon realize that there is so much else to deal with," said Maria Concha Dugas, a breast cancer patient who attended the meeting with the Health Minister. "Right after I was diagnosed, my oncologist's nurse started the conversation with the words – now we have to talk about money."

#### Nova Scotia-Based Survey Underscores Gaps

A recent survey of over 1,600 Nova Scotians, commissioned by the CanCertainty Coalition, demonstrates that drug coverage for cancer patients is a serious and growing problem. Highlights include:

- Sixty-four percent of people in Nova Scotia believe their cancer treatment to be better than or the same as other Atlantic Provinces, *yet* cancer patients in Nova Scotia who are under 65 face the highest out-of-pocket costs for take-home cancer medications of anywhere in Canada.
- More than half (57 percent) of Nova Scotians expect the provincial health care system will pay
  for take-home cancer medications. In reality, patients will ultimately pay a significant deductible
  or co-pay from their personal funds.
- Three out of five people in Nova Scotia (60 percent) said they would consider leaving the
  province if faced with having to pay for their cancer drugs. Only seven percent could afford
  monthly drug costs of over \$200.

Two in five Canadian will face a cancer diagnosis in their lifetime and Nova Scotia has the second highest rate of cancer mortality when compared to other provinces.

#### **About the CanCertainty Coalition**

The CanCertainty Coalition is the united voice of 35 Canadian patient groups, cancer health charities, and caregiver organizations from across the country, joining together with oncologists and cancer care professionals to significantly improve the affordability and accessibility of cancer treatment. For more information and to view our list of members, visit www.CanCertainty.com.



## **About the Survey**

Between October 25 and 28, 2016, Strategic Directions conducted a survey of 1,691 randomly selected residents of Nova Scotia to study public awareness and opinions regarding access to cancer medication. Results have been weighted to accurately reflect actual Nova Scotian age and gender demographics and can be considered to be accurate +/- 2.5 percent, 19 out of 20 times.

### For more information or to set up and interview, please contact:

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http://www.cancer.ca/~/media/cancer.ca/CW/cancer%20information/cancer%20101/Canadian%20cancer%20stat istics/Canadian-Cancer-Statistics-2016-EN.pdf?la=en. Accessed on November 16, 2016.

<sup>&</sup>lt;sup>1</sup> Canadian Cancer Society Statistics, 2016