OPDP At A Glance: Fiscal Year 2016/17 Snapshot Report

Many Ontarians rely on Ontario's public drug programs to pay most of the cost of their prescription drugs. The aim is to:

- provide Ontario residents with better access to today's best proven drug treatments
- get better prices for drugs so that we can re-invest to provide access to new, innovative drug therapies.

For more detailed information, please see the OPDP At A Glance: FY 2016/17 Data Report or visit our website.

The Numbers

Who is covered?*

More than

3 million Ontarians

(1 in 5) received coverage for one or more prescription drugs

Compared to FY 2015/16, this fiscal year:

3.3% more Ontarians 65 years and older received coverage

+

1.3% more Ontarians on social assistance♦ received coverage

How much does it cost?†*

$1.5 billion in markup, dispensing and compounding fees

+

$4.6 billion in drug costs

−

$0.7 billion paid by recipients

The Ontario government funded more than **$5.4 billion** towards prescription drugs for Ontarians

Ontario government paid **89%** of the prescription costs for eligible Ontarians, recipients paid up to **11%**

What is covered?

More than **4,400** drug products listed on the Formulary

2.5 million

pharmacist professional service claims processed for Ontarians

What do we do?

163 million claims processed, 4 million more claims than last FY 2015/16

89,756

total responses to EAP applications, 0.3% more than FY 2015/16

150,577

households enrolled in Trillium Drug Program, 1% more than 2015/16 benefit year

NOTES: *Numbers only reflect the Ontario Drug Benefit (ODB) Program and excludes other programs funded by OPDP (e.g., Special Drugs Program). ♦Only includes recipients of Ontario Works and Ontario Disability Support Program who are eligible for drug benefits under ODB. †Excludes cost for Pharmacist Professional Services. Expenditures based on the publicly available list prices and may not reflect actual prices paid by the ministry under Product Listing Agreements (PLAs) with manufacturers. Costs paid by recipients include co-payments and deductibles. **Source:** Health Network System (HNS)

Ontario

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Topical Spotlights

In FY 2016/17 several regulatory and policy changes were implemented to improve access to drugs for Ontarians and better health outcomes. Below is a brief description of some of these achievements.

Opioid Strategy

- Funded Naloxone (a drug used to treat opioid overdoses) in pharmacies across Ontario.
- Implemented Patch for Patch Program to place stricter controls on the prescribing and dispensing of fentanyl patches, and require patients to return patches to their pharmacy before more can be dispensed.
- Increased access to clinically and cost-effective drug therapies for opioid dependence (e.g., buprenorphine and naloxone).
- Delisted high-strength long-acting opioids from the Formulary.

As of March 31, 2017

220
Pharmacies dispensed Naloxone kits

1100
Cities/Towns with Naloxone Kits

Hepatitis C Drugs

- Increased access to effective hepatitis C drugs on February 28, 2017. Seven specific hepatitis C drugs were funded as LU for eligible ODB recipients.
- This is anticipated to help many Ontarians receive treatment and potentially a cure for hepatitis C.

Drug Submissions- Streamlining the Process

- In order to better align with national processes, all drug products reviewed by CDR and pCODR no longer require a routine review by CED.
- The review of all generic products that receive NOC with a Declaration of Equivalence from Health Canada has been streamlined and no longer requires review by the ministry.

Medical Assistance in Dying (MAID) Kits

Ontario is committed to providing quality, compassionate care through the varying stages of the end of life. In August 2016, the government started providing public funding of drugs used for MAID at no cost to all Ontarians through participating pharmacies.

As of March 31, 2017

25
Cities/ Towns with MAID Kits

44
Pharmacies dispensed MAID kits

Seniors Co-Payment (SCP) Program Threshold

Increased the eligibility threshold for low income seniors, resulting in more than 40,000 additional households qualifying to have the deductible waived and only pay up to $2 per prescription.

GLOSSARY

Benefit Year: Based on August 1 to July 31 of the following year. For data related to the Trillium Drug Program (TDP) which contains threshold calculations that rely on recipients' annual income.

CDR: Common Drug Review

CED: Committee to Evaluate Drugs

Compounding Fee: The total value/ amount allowed as a compounding charge. Compounding is the practice of creating a preparation of a drug to meet the need of an individual patient when a commercially available drug does not meet those needs.

Dispensing Fee: Fees pharmacists receive for filling your prescription(s). This fee covers services such as: talking about your treatment with you, maintaining and checking your medication records etc.

EAP: Exceptional Access Program. Component of the ODB program that reviews, on a case-by-case basis, individual requests for coverage of drug products not listed in the Formulary

Formulary: The 'list' of drugs that are eligible for drug coverage under a drug plan

FY: Fiscal Year. Based on April 1 to March 31 of the following year.

LU: Limited Use. Reimbursement for certain drugs is dependent on specific clinical criteria.

Markup: The total value/amount added to the price of a drug product to cover acquisition cost for pharmacies. Effective October 1, 2015 the maximum markup is 8% for claims <$1000; 6% for claims ≥ $1000.

NOC: Notice of Compliance

ODB: Ontario Drug Benefit

pCODR: pan-Canadian Oncology Drug Review

For More Information

Please email us at opdpreports@ontario.ca. If you are a member of the media, call Communications and Marketing Division at 416-314-6197 or visit Newsroom.