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Executive Officer of Ontario Public Drug Programs  
Ministry of Health and Long-Term Care  
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Via Fax: 416-325-6647

**CARP's Submission to the Ministry of Health and Long Term Care, Executive Officer of the Ontario Public Drugs Program**

**Re: Proposed Amendments to Ontario Regulation 201/96 made under the Ontario Drug Benefit Act, O. Reg. 201/96, Ontario Drug Benefit Act**

CARP commends the Provincial Government's stated goal to increase the number of low-income seniors who will not have to pay deductible fees to access formulary drugs. Increasing the income threshold from \$16,018 to \$19,300 for single seniors and from \$24,175 to \$32,300 for senior couples will exempt an additional 170,000 Ontarians from the annual deductible, according to the Ministry of Health and Long Term Care.

However, changes proposed in the amendments call for a dramatic 70% increase in the yearly deductible, from \$100 to \$170 and a 17% increase in the per prescription co-payment, from \$6.11 to \$7.11 for those who do not qualify for a deductible waiver according to income. (i.e. singles with an income of greater than \$19,300 and couples with an income greater than \$32,300 will see these substantial increases.)

In broad terms, many more seniors will pay much more to access the Ontario Drug Benefit under the proposed revisions.

CARP encourages the Provincial Government to reconsider the thresholds at which lower income seniors can access the Ontario Drug Benefit without a deductible fee. A single senior with an annual pretax income of \$20,000, for example, struggles with the cost of living no less than those under the proposed threshold of \$19,300, but would face a substantial annual fee of \$170, plus \$7.11 per prescription. Those costs add up quickly, leaving many vulnerable seniors in that clichéd, but very real, position of choosing between meals or medicine, in many cases.

CARP asks that the Ministry of Health and Long Term care take a closer look at the day-to-day budgets of lower-income seniors in Ontario, including the rising costs of utilities, shelter, property taxes, food, fuel, etc., and increase the threshold at which they can access the ODB without a deductible, ensuring that Ontarians never have question whether they can afford the important and often life-sustaining medicine their doctor has prescribed.

CARP further recommends that the Provincial Government's proposed changes to the annual deductible be phased in over a number of years through smaller incremental increases. Even though the cost of plan administration has risen since the last increase in 1996, (CARP acknowledges this) the sudden, extraordinary increase is punitive to Ontario seniors on fixed incomes who, in most instances, can no longer draw a pay cheque to offset substantially higher annual drug costs.

Canadians across the country are frustrated with the current Pharmacare system since many interact with the program regularly and take more than three prescription drugs at any given time. According to a recent CARP Poll, 10% of CARP members admit to skipping prescription drugs due to the financial burden and associated costs. The C.D. Howe Institute also made a similar observation in British Columbia indicating that patients are less likely to use drugs at higher out-of-pocket costs. When BC's public drug system changed from an age-based approach to an income-based approach, under which drugs became more expensive for some, seniors' access to drugs declined while the use of other healthcare services increased.

CARP continues to advocate for a national drug strategy, calling on the federal and provincial governments to work together to create a robust, universal formulary that takes advantage of bulk buying to provide cost efficient access to all Canadians.

Submitted respectfully on behalf of the members of CARP,



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