



Wait times for public reimbursement of cancer medicines need to improve

CANADIAN PATIENTS EXPERIENCE SIGNIFICANT DELAYS IN PUBLIC REIMBURSEMENT OF INNOVATIVE CANCER MEDICINES.

Reasons for increasing time to listing in Canada include



Unlike other countries, Canadian review processes are sequential and multi-layered.



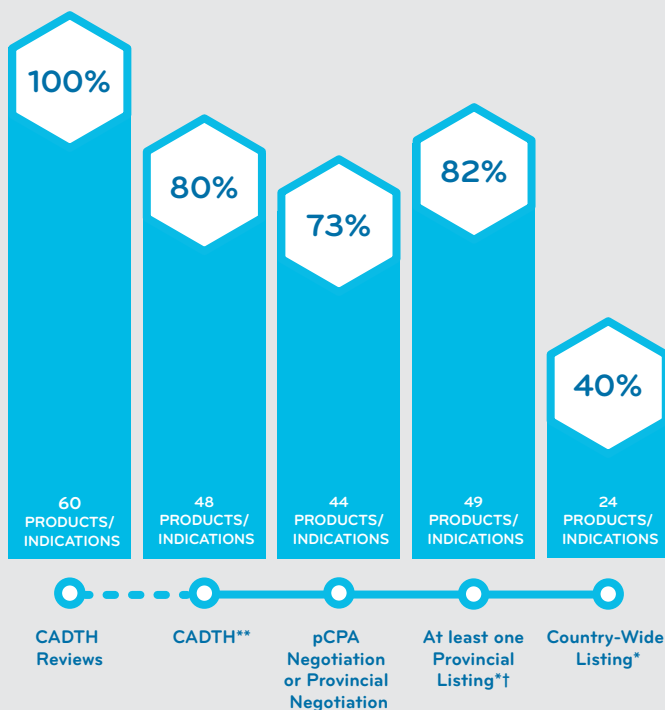
Longer post-pCODR timelines add time to listing decisions.



Some provinces take more time to list due to budget limitations.

60% of cancer medicines do not make it to all publicly-covered Canadian patients.

SEQUENTIAL PROCESS AND ITS EFFECT, CANCER MEDICINES



Wait times have increased for cancer medicines.

CANCER MEDICINES TIME TO LISTING, 2015-2016 VS. 2013-2014



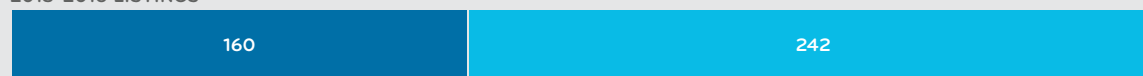
Increasing post-pCODR timelines for cancer medicines.

CONTRIBUTION TO TIME TO FIRST PROVINCIAL LISTING*, FOR CANCER PRODUCTS, CADTH vs PCPA & PROVINCIAL LISTING***

2013-2014 LISTINGS



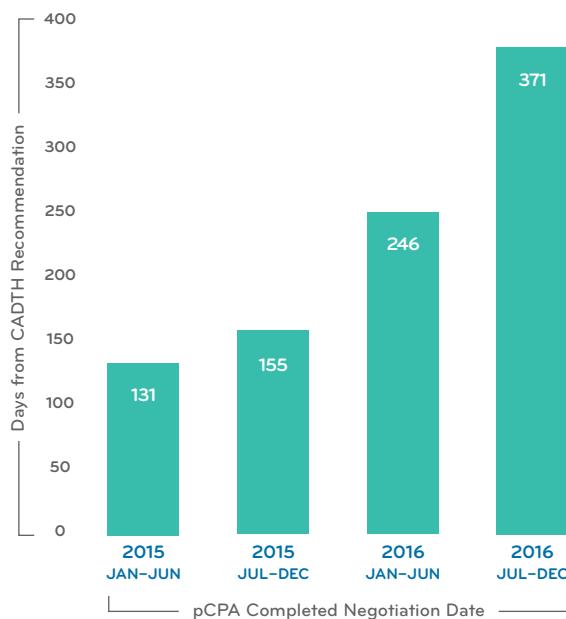
2015-2016 LISTINGS



● NOC to CADTH RECOMMENDATION TIME ● pCPA and PROVINCIAL LISTING TIME

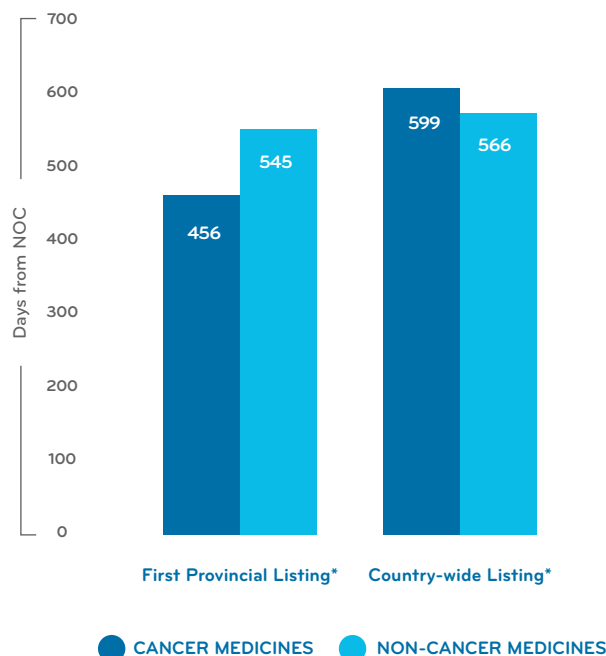
pCPA Negotiation Timelines for Cancer Medicines

CANCER TOTAL pCPA TIME



Cancer medicines are now taking longer to reach all publicly-covered patients than non-cancer medicines.

CANCER VS NON-CANCER MEDICINES TIMELINES, 2015-2016



pCODR drug recommendations, 2012-2016. pCPA-negotiated cancer products, 2015-2016 (n=18). pCPA completed a total of 40 negotiations for cancer products by December 2016 (of which 18 were closed between 2015-2016). Country-wide Listing defined as at least 80% of beneficiaries covered by public plans excluding Quebec. *Excludes Quebec (Quebec does not participate in the pCODR process). ** Positive or conditional recommendations, pCODR reviews cut off at 2015 to allow sufficient time to go through additional processes. † Six products were listed despite negative CADTH recommendation or pCPA 'Do not Negotiate'. *** Excludes resubmissions. Source: Analysis by Innovative Medicines Canada. Data collected by IQVIA via Health Canada NOC Database, CADTH website, pCPA website, and IQVIA's iMAM and FAME database (sourced from provincial drug plan websites).