



Access to Medications, Devices and Supplies

Issue: The Canadian Diabetes Association (CDA) urges the Government of Ontario to address gaps in access to medications, devices and supplies required for effective diabetes management by reducing deductibles associated with publicly funded programs (e.g. Trillium Drug Program).

The Province has committed to introducing a redesigned public drug program by 2019.

- The 2016 Ontario Budget states that “the new program will improve long-term sustainability while ensuring access to drugs for people who need them.”¹
- People with diabetes need timely and affordable access to prescribed medications, devices and supplies to optimally manage their disease and avoid serious and costly complications.
 - To keep blood glucose under control and prevent or manage complications, many people with diabetes take multiple medications: 32% reported taking three to four medications, 40% reported taking five to nine, and 12% reported taking 10 medications or more.²
- Ontario has taken important steps to improve access to supports, such as expanding coverage for insulin pumps and supplies to all eligible residents with type 1 diabetes in 2008. However, despite the progress in accessibility of needed diabetes supports, many people still struggle with the out-of-pocket costs of managing their disease.
- Coverage for these supports depends on income, and Ontarians under 65 with diabetes can experience severe financial constraints from high deductibles. For example, for most people who qualify, the deductible for the Trillium Drug Program equals about 3 to 4% of the household income after taxes.³ People then pay up to \$2 per drug per person.
- The CDA urges the Government to eliminate barriers to diabetes management by reducing the amounts people need to pay to access financial assistance for their diabetes needs.

Drug therapy must be accessible to ensure proper diabetes management.

- In Ontario, public coverage for drug therapy to treat diabetes varies based on a person’s income level and prescribed therapy—the level of coverage impacts out-of-pocket costs. The CDA estimates out-of-pocket costs based on composite case studies.
- For people with type 1 diabetes who meet medical criteria for insulin pump therapy and choose to use an insulin pump, some of their expenses would be covered under Ontario’s insulin pump program, although they may still need to pay \$500–\$1,700 a year out of pocket.
- People with type 2 diabetes living in Ontario have very limited assistance from the government.

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- A 55-year old individual with type 2 diabetes earning an average or higher income may need to pay the full cost for prescribed treatment at an estimated \$1,900 per year. At a lower income (e.g. \$20,000), Ontarians with type 2 diabetes may still need to pay over 80 per cent of the expenses.
- When people with type 2 diabetes reach 65 years of age, most expenses are covered by the public plan based on criteria of the provincial plan due to broader eligibility criteria for the program.
 - The annual deductible for the Ontario Drug Benefit Program is \$100 for single seniors with an annual income of slightly above \$19,300 or senior couples with an annual income of just above \$32,300. The co-payments are currently \$6.11 per drug.
 - The 2016 Ontario Budget initially raised the deductibles and co-payments, but the Government decided to pause the planned increases and continue consulting on new income thresholds for the program.

¹ 2016 Ontario Budget, 118.

² Statistics Canada. 2011 Survey on Living with Chronic Disease in Canada. Custom data request.

³ Government of Ontario. *Get Help with Prescription Drug Costs*. <https://www.ontario.ca/page/get-help-high-prescription-drug-costs#section-4>