# **ARTHRITIS SOCIETY**

## **NEWFOUNDLAND & LABRADOR 2021 BUDGET SUBMISSION**

April 30, 2021



#### INTRODUCTION

We appreciate the opportunity to contribute to the Government of Newfoundland & Labrador 2021 budget consultation and to share our recommendations that could help modernize government.

The Arthritis Society is a national health charity that gives voice to the 6 million Canadians with arthritis, 1 in 5 of us, and one in two seniors, and there is no cure. In Newfoundland & Labrador, 120,000 people live with arthritis, more than 1 in 4, the highest prevalence in Canada. Arthritis is a collection of conditions affecting joints and other tissues, and it can cause excruciating pain, limit the ability to walk and move, interrupt sleep, and significantly diminish quality of life for patients.

Arthritis is the most common chronic health condition in Newfoundland & Labrador and is also a leading cause of long-term disability in the country and can severely impact a person's ability to participate in the labour force.

We applaud the government for launching the NL Health Accord and appreciated the opportunity for our organization to present to the Task Force. The following recommendations for the 2021 Budget complement with our input into the NL Health Accord:

- 1) Develop and implement a coordinated plan to address COVID-related backlog of joint replacement surgeries
- 2) Improve access to care and ensure access to a range of treatment options
- 3) Stop the taxation of medical cannabis and enable its distribution through pharmacies.

1) Develop and implement a coordinated plan to address COVID-related backlog of joint replacement surgeries

As we continue to confront COVID-19, a new health challenge is emerging — an alarming backlog of joint replacement surgeries. Arthritis is the leading cause of joint replacement, including over 99% of knee replacements and over 80% of hip replacements. While Newfoundland & Labrador is performing better than some provinces, we are still not hitting the medically recommended target wait time of six months for joint replacement surgeries. According to the 2019 <u>Canadian Institute for Health Information (</u>CIHI) wait times data, in Newfoundland & Labrador only 72% knee replacements and 76% of hip replacements were completed within the medically recommended target of six months. As well, according to the CIHI data there is inconsistency across the province in meeting the targets, with some regions having a much lower percentage meeting the six-month target.



The COVID-19 pandemic has greatly exacerbated this issue through the delay or cancellation of even more surgeries. While we understand the need to do this, this will unfortunately lead to unnecessary pain and suffering for many Canadians who are prevented from contributing to their families, communities, and workplaces. Surgery delays are not only devastating for individuals but can also lead to significant additional costs for the healthcare system due to the co-morbidities associated with the disease, including weight gain, diabetes, heart and circulatory issues, mental health conditions, and other compounding health challenges.

A typical knee or hip joint replacement surgery costs the health care system roughly \$11,000. With that investment, most patients can return to normal functioning, contributing to their families, communities, and workplaces. The short-term solution is to continue to invest to bring Newfoundland & Labrador up to standard through increasing volumes and supporting triage or assessment clinics that provide quicker patient assessment for joint replacement, especially in challenged regions. In the longer term, the province should seek innovative approaches to reduce the burden of surgery and develop and/or fund alternatives to prevent damage due to arthritis before joint replacement becomes necessary; for example, GLA:D programs, physiotherapy, nutrition and weight management programs.

The Arthritis Society is also advocating federally, asking the Government of Canada to work with provinces and territories to address this urgent health crisis and to provide dedicated funding through an increase in the Canada Health Transfer to expand capacity for joint replacement surgeries. As a high priority for our community, we put together a pan-Canadian Working Group to develop tangible solutions. The Report from this group will be ready in May 2021. We look forward to sharing it and engaging in conversations with the government on how we can work together to address this health crisis.

# (2) Improve access to care and ensure access to a range of treatment options for people living with arthritis

The Arthritis Society supports and encourages multi-disciplinary team-based care delivered in the community for people living with arthritis. The NL Health Accord provides the opportunity to innovate and look at different models of care and the role of virtual care for many chronic conditions, like arthritis. Services that centralize, triage and integrate care can have better patient outcomes, be cost-effective in managing acute flare ups for inflammatory arthritis that may require visits to emergency rooms and delay referrals to specialists for all forms of arthritis. As the consultations and public engagement continues for the NL Health Accord, we look forward to providing further input on different models of care and opportunities for the Arthritis Society to collaborate and work with the government and other stakeholders to help improve access to care and support people living with arthritis manage their condition.



As there is no cure for arthritis, pharmacological treatments play an important role in management of the condition, which typically persists for many years, if not a lifetime. It is vital that there be a range of treatment options available, as people with arthritis respond differently to different treatments. In the case of inflammatory arthritis, for example, treatments are still very much trial and error: what works for one person may not for another; it is about finding the right treatment at the right time. A range of choices and solutions is therefore critical.

As governments look for more cost-effective options for treatments with strong clinical evidence, Arthritis Society believes that <u>biosimilars</u> have a role to play in the care and management of inflammatory arthritis. Biosimilars provide additional choices for those living with inflammatory arthritis and have the potential to lower health care costs and increase access to treatment. Public and prescriber education on biosimilars is important and should be supported by the government.

It is vital that key stakeholders be engaged and involved in the development of or changes to provincial drug programs or policies. The Arthritis Society is ready to work with government to ensure arthritis patients have access to the medicines they need.

## (3) Stop the taxation of medical cannabis and enable its distribution through pharmacies

Many people with arthritis rely on medical cannabis for pain and symptom management; a recent Statistics Canada report showed that many of those cannabis users are seniors. Although cannabis for medical purposes is authorized by healthcare practitioners as a medicine, it is not treated as such in key aspects of policy around access and affordability.

Applying any tax to cannabis for medical purposes is inconsistent with the taxation of prescription drugs and medical necessities. We encourage you to remove the provincial sales tax for medical cannabis.

Expanding access to allow the distribution of medical cannabis through pharmacies will create a clear distinction between medical cannabis and cannabis for other uses. It will also help to ensure that patients receive reliable education on safe and effective use from trained healthcare professionals. This will also help facilitate reimbursement by health insurance plans.

### CLOSING

In closing, we urge the Newfoundland & Labrador Government to consider our three key recommendations that can help keep people with arthritis moving and healthy – reducing the cost to the healthcare system today and tomorrow. We would welcome the opportunity to elaborate on these recommendations by providing oral testimony before the Legislature and/or finance committee.

