

1. Do you agree that arthritis is a serious health condition with tremendous social and economic consequences, requiring the immediate attention of the next government of BC?

The BC Liberal government recognizes that arthritis is one of the leading causes of disability in BC and can have a large impact on quality of life. We are committed to ensuring the best treatment options and care for individuals living with arthritis and ensuring that British Columbians have access to information about early warning signs, diagnosis and treatment.

2. Do you agree that a program of treatment and care for inflammatory arthritis should be a priority for BC?

Treatment and care for inflammatory arthritis is a priority in BC. The BC Liberal government has supported a number of arthritis initiatives, including new clinical practice guidelines for physicians on rheumatoid arthritis diagnosis and treatment, issued in May 2006; patient surveys to capture the patient experience and priorities for the system of care (rheumatoid arthritis in 2004 and osteoarthritis in 2007); and a \$1 million grant to the Arthritis Society, BC and Yukon Division in 2005, to benefit people coping with arthritis. Additionally, we have full coverage for non-steroidal anti-inflammatory drugs and disease-modifying anti-rheumatic drugs, and special authority coverage for ankylosing spondylitis.

3. Do you believe that the BC Government is currently living up to its responsibilities and care for inflammatory arthritis should be a priority for BC?

The BC Liberal government is currently working with stakeholders to find new ways to be responsive to the needs of British Columbians with arthritis. We are spending tens of millions of dollars each year on arthritis drugs – last year we spent \$27.4 million on Humira, Enbrel and Remicade. We are also working to support physicians in providing care and sharing in the funding costs for the Arthritis Self-Management program which provides people throughout communities in BC with knowledge and skills to help them manage their arthritis.

4. If your party forms government, will you work with the BC arthritis community, including family physicians, rheumatologists and patient stakeholders, to create a comprehensive model of care for arthritis in BC?

We are committed to working with our stakeholders to continue developing the model of care for arthritis. There are new opportunities that can be pursued through the Integrated Health Networks (IHNs). In November 2008, we launched 25 IHNs - a new model of care in BC that will improve access to health services for people with chronic health conditions through a collaborative, team-based approach - and look forward to expanding the networks throughout the coming years. With an initial operating budget of \$12 million, the IHNs are key element of BC's Primary Health Care Charter. There is an opportunity to support people with arthritis through the IHNs as we expand the program.

5. Moving forward, do you agree that all people with inflammatory arthritis in BC should be able to fill the prescriptions their doctors write for them regardless of ability to pay?

The BC Liberal government has demonstrated our commitment to funding drugs for arthritis and we have some of the most comprehensive coverage in the country. The Fair Pharmacare program focuses resources on those most in need. 300,000 more families receive support than under the former NDP Pharmacare program in 2001. For example, prior to Fair Pharmacare, a family earning \$14,000 paid an \$800 annual deductible before receiving benefits. Now under Fair Pharmacare, the same family pays no deductible at all. We've increased the Pharmacare budget by over 60% since 2001, from \$654 million to over \$1 billion this year.

British Columbia has a rigorous review process for prescription drug coverage ensuring patients are able to access high-quality medication and we have been working to improve our time to listing decisions. In response to the Pharmaceutical Task Force, our government committed to reduce duplication with the Common Drug Review Process and move our timelines to being comparable with other jurisdictions. Furthermore, we are committed to improving the accountability, transparency and opportunity for expert input in the drug review process.