

ARTHRITIS CONSUMER EXPERTS SURVEY

Question 1

Arthritis affects more than 150,000 Saskatchewan residents aged 15 years and above, yet no comprehensive model of arthritis care is available. This is particularly pronounced outside of the Regina and Saskatoon metro regions. Where you live can be more important in determining treatment than how sick or disabled you are. Approximately one in five Saskatchewan residents have doctor-diagnosed arthritis. Two-thirds are under the age of 65. In fact, arthritis is the leading cause of work disability in Saskatchewan and rest of Canada.

What will your government do to bring a high quality, accessible, standardized evidence-based model of arthritis care for all Saskatchewan residents?

We recognize that arthritis is a serious condition affecting a growing number of residents in our province. The Saskatchewan Ministry of Health is working to ensure effective treatment options are available for patients with arthritis and inflammatory arthritis. The Saskatchewan Drug Plan lists a variety of medications used to treat arthritis. New therapies are added to the Saskatchewan Formulary based on the advice received from the national Common Drug Review, the provincial Drug Advisory Committee of Saskatchewan, as well as negotiations through the Pan-Canadian Pharmaceutical Alliance.

Question 2

The Canadian Medical Association released independent survey results this summer, showing that Canadians are embracing virtual care options and would like to see a continuation, improvement and expansion of virtual care after the COVID-19 pandemic subsides. A majority of respondents in the survey believe virtual care could save costs in the health care system and improve access to specialists and timeliness of test results. This is important because many people with inflammatory arthritis live in locations where specialists are scarce and/or have difficulty traveling (due to symptoms like decreased mobility, imbalance or walking issues). Virtual care can address some of these challenges by bringing doctors into patients' homes or nearby clinics.

What will your government do to ensure the continuation, improvement, and expansion of virtual care for all Saskatchewan residents – both patients and health care professionals?

The Saskatchewan Party government took steps to enhance access to health care by providing support for physicians to offer virtual care in March 2020. More recently, in August of 2020, a Saskatchewan Party government entered into an agreement with the Saskatchewan Medical Association to continue to provide virtual care access. A Saskatchewan Party government will continue to look for innovative ways to enhance patient access to health care.

Question 3

ACE's Arthritis Medications Report Card is designed to help Canadians evaluate where their province ranks in terms of providing reimbursement for medications approved for inflammatory arthritis such as rheumatoid arthritis, axial spondylarthritis, psoriatic arthritis and juvenile idiopathic arthritis. Saskatchewan ranks fifth on the Report Card where 15 medications are currently "under review," including nine medications for the treatment of types of inflammatory arthritis.

What will your government do to improve the Province's ranking on the ACE Report Card?

A re-elected Saskatchewan Party Government will continue to add new drug therapies based on the advice of the government's expert committees. The decision on whether to provide coverage will continue to be based on the cost effectiveness and the medical effectiveness of the drug.

Question 4

The Saskatchewan government must take steps to ensure the sustainability of prescription drug plans and the continued affordability of prescription medicines for Saskatchewan residents. Biosimilars represent a potential source of significant cost savings to the health care system. These savings could be reinvested to increase accessibility to new medicines and expand coverage for existing medicines for Saskatchewan residents living with complex chronic disease like inflammatory arthritis.

What will your government do to improve the uptake of biosimilars and will you commit to reinvest those savings to support additional medication listings and improve patient coverage?

At this time, Saskatchewan has not established a policy that would require patients using reference biologic medications to switch to a biosimilar version. A Saskatchewan Party government will continue to monitor the development of policies in other jurisdictions regarding coverage of biologic medications. A Saskatchewan Party government will continue to partner with other jurisdictions through the pan-Canadian Pharmaceutical Alliance to make medications more affordable for all patients.

Question 5

Indigenous peoples in Canada have some of the highest rates of serious or life-threatening arthritis in the world, and are at greater risk for becoming disabled by arthritis. Significant gaps in indigenous arthritis care currently exist in Saskatchewan.

What will your government do to improve the healthcare and lives of Indigenous peoples living with arthritis in Saskatchewan?

The Saskatchewan Party will continue to work with aboriginal groups, healthcare providers, and other stakeholders to ensure that access to medical services, including the treatment of arthritis, will continue to increase under the Saskatchewan Party government. In 2020-21, our Government has provided \$14 million to Northern Medical Services to help physicians and specialists provide care to communities across the north – an increase of 61% since 2007. This allows for full time primary health care support in four communities and visiting clinics in 14 others. Northern Medical Services reported that in 2019-20 it coordinated approximately 250 specialist clinics (e.g., psychiatry, obstetrics, orthopedics, etc.) in northern communities. Additionally, since 2014, the province has provided annual funding of \$500,000 for Remote Presence Technology allowing expert health providers to be virtually present so residents get care closer to home.

Health programs and services must be available to residents throughout our province, and we continually look to adapt for the unique needs of our province's northern and aboriginal communities.

Question 6

Some individuals with severe arthritis require joint replacement surgery in order to achieve better quality of life, less pain and more joint function. According to the Canadian Institute for Health Information (CIHI), the guideline for knee and hip replacement is to receive surgery within 182 days. In Saskatchewan in 2019, only 39% of knee replacements and 47% of hip replacements meet the guideline. This deeply impacts the lives of Saskatchewan residents with arthritis who require these surgeries. The COVID-19 pandemic may have also caused delays in surgery wait times.

Will your government take steps to ensure timely, specialized care for Saskatchewan patients with arthritis, including joint surgery wait times that are within medically recommended guidelines? How will your government manage the backlog of surgical appointments that occurred as a result of the COVID-19 pandemic?

The Saskatchewan Health Authority reported this month that the last 10 per cent of surgeries postponed due to the COVID-19 pandemic have now been scheduled and are due to be completed by the end of November 2020. Over 90 percent of postponed surgeries have now been performed. The pause on non-urgent and elective surgeries was brief and the quick and safe resumption of non-urgent and elective surgeries has been a priority of the Saskatchewan Party government.

The Saskatchewan Party government invested an incremental \$10M to reduce surgical wait times in the 19/20 fiscal year and an additional \$20M in the 20/21 Budget. A Saskatchewan Party government will continue to invest in reducing surgical wait times and the reduction of wait times to a three month target remains a key goal in the 2030 Growth Plan.