
Canadian Rheumatology Association Position Statement on National Pharmacare

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Drug shortages and limited medication access due to cost have direct impacts on effective pharmacologic management of rheumatic diseases. The CRA emphasizes the following principles in the implementation of a national pharmacare program to ensure patient-centred care:

1. **Equity, diversity and inclusion:** The creation of a universal plan needs to be inclusive of all individuals within Canada and acknowledge the diversity of people, their impacted communities and their illness. It is crucial to avoid creating barriers to access based on geographic, socioeconomic, health literacy or other factors.
2. **Principle of choice:** Due to the diversity of patients and their illness, it is critical that medication choice is made through shared decision-making processes between patients and their healthcare providers rather than third parties.
3. **Access:** The requirements for reimbursement should be harmonized to minimize administrative burden for patients and providers to allow for streamlined medical care in both adult and pediatric populations. This would include but not be limited to: recognizing the differences in the research evidence and disease management of adult and pediatric patients; also eligibility criteria across public, private, and NIHB reimbursement plans.
4. **Transferability:** The transferability of plans for patients who relocate between provinces is important to ensure that patients have uninterrupted access to effective therapies for ongoing management of their rheumatic diseases.