

Coverage of new medicines in Federal-Provincial public drug plans in Canada 2008-2017

Description

This study compares the coverage of new medicines in Federal-Provincial public drug plans in Canada 2008-2017. Coverage is defined by: the rate (percentage) of new drugs covered; the wait in days for new drugs to be covered; and the scope of coverage, categorized as either: Full Benefit or Special Authorization (includes other statuses, such as: Exception Drug, Conditional Listing, Exception Access, Limited Use, and EM). Data included all New Drug Submissions that received a Notice of Compliance from Health Canada between 2008 and 2017. Over-the-counter (OTC) drugs were excluded so that the study included only prescription drugs. The public drug plan coverage analysis used all available data from IQVIA on new formulary listings in public drug plans in Canada. All provincial public drug plans were included in addition to the federal Non-Insured Health Benefits Plan (NIHB). Territorial plans were excluded.

Consecutive EN/FR sections in one paper.