

# CAPT 2022 Panel Discussion:

**Let's put Patients at the front of the line...Rapid access for *Project Orbis* drugs could be a start.**

---

## Panelists:

• Sabrina Hanna	• Fred Horne
• Jilda Lazer	• Sang Mi Lee

## Moderator:

- Jon Fears

---

October 18, 2022  
1:15pm-2:30pm



# What are we hoping to achieve today?

- A recommendation towards a framework for rapid access to high-needs drugs, that moves beyond current ad-hoc & sequential approach.



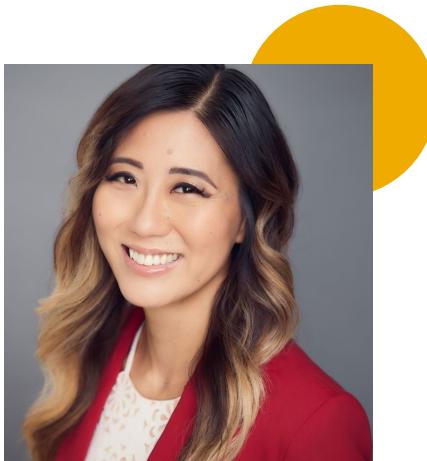
# Who will help us solve this?

## Meet Our Panel Members



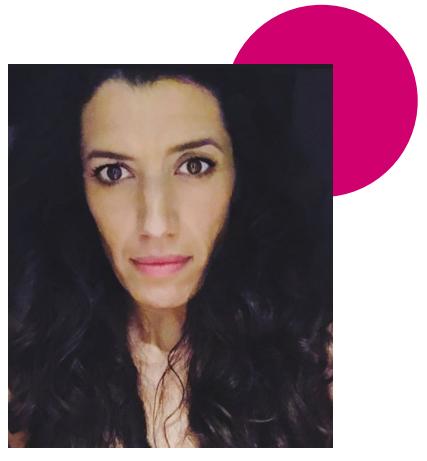
**Jilda Lazer**  
**Reverb Consulting  
Group Inc.**

20+ years of progressive experience in all aspects of strategic communications, including: planning, strategic messaging, stakeholder relations and advocacy



**Sang Mi Lee**  
**MORSE Consulting  
Inc**

Sang Mi is a passionate healthcare leader and pharmacist with Global Executive MBA in Healthcare and Life Sciences. She has over 15 years of unique healthcare experience (public, pharmaceutical industry, consulting, and not-for-profit)



**Sabrina Hanna**  
**Cancer  
Collaborative**

Sabrina Hanna is the founder and managing director of the cancer collaborative [colab], a Canadian not-for-profit and multi-stakeholder platform designed to bridge science, policy and advocacy to meaningfully impact patient outcomes.



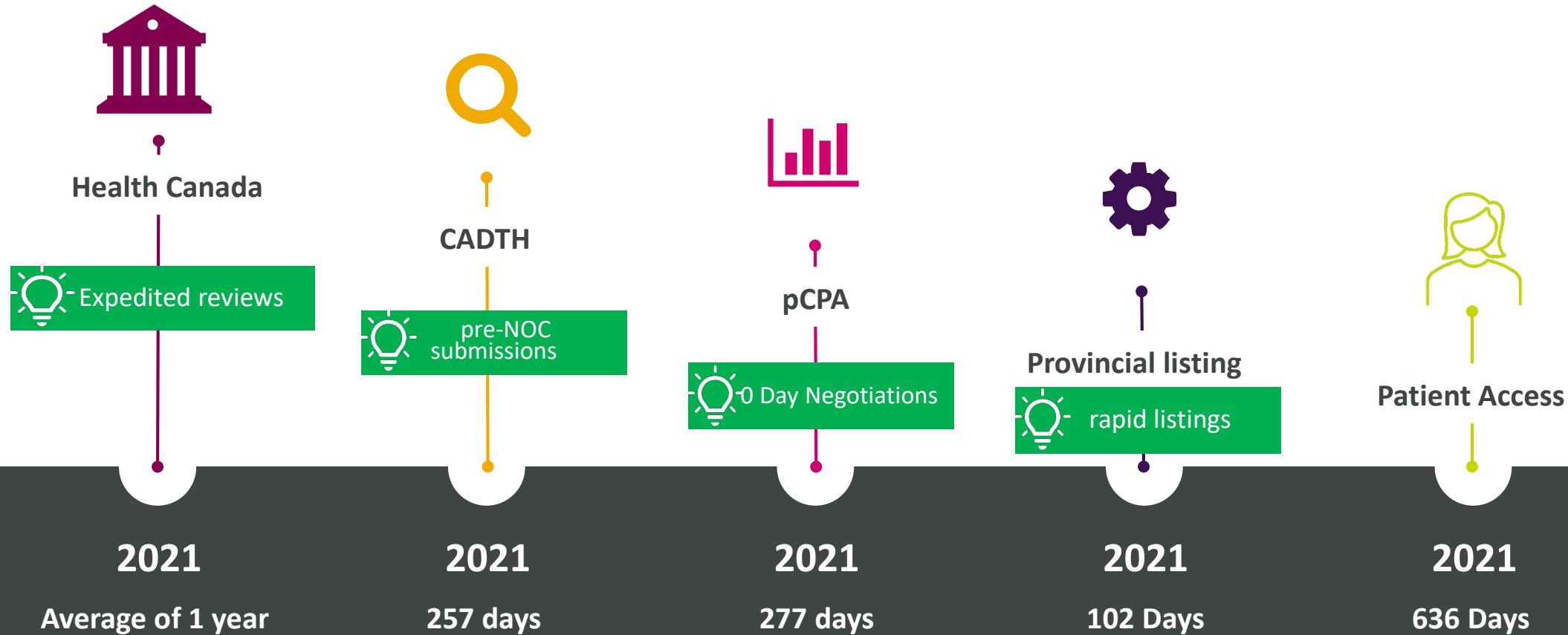
**Fred Horne**  
**3Sixty Public Affairs**

Horne's career in health policy spans over thirty years. Current areas of focus include value-based health care, seniors care, health system governance and pharmaceutical policy.



# Progress is being made, but patients are still at the back of the line

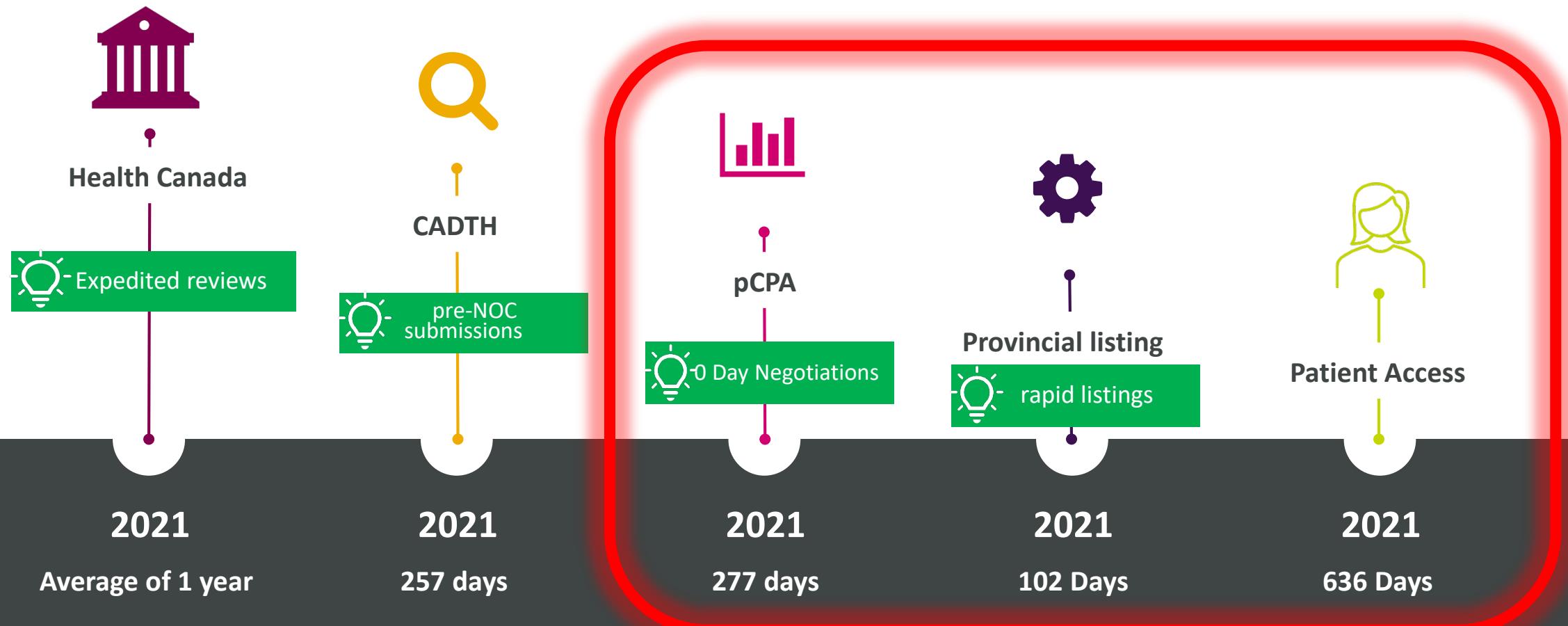
The Canadian patient access pathway ensures patients receive safe and effective treatment that follows predictable sequential steps. Ad-hoc approaches have been used for rapid patient access, but there are opportunities for improvement.



Source: IMC analysis of IQVIA International Reimbursement Comparison data and IQVIA Public Reimbursement data. CADTH and provincial listing timelines are for drugs with a pCPA LOI in the respective year. Provincial Listing is the average time from pCPA completed negotiation to provincial listing dates for drugs with a pCPA LOI. CADTH, pCPA, and provincial listing timelines are arithmetic averages.

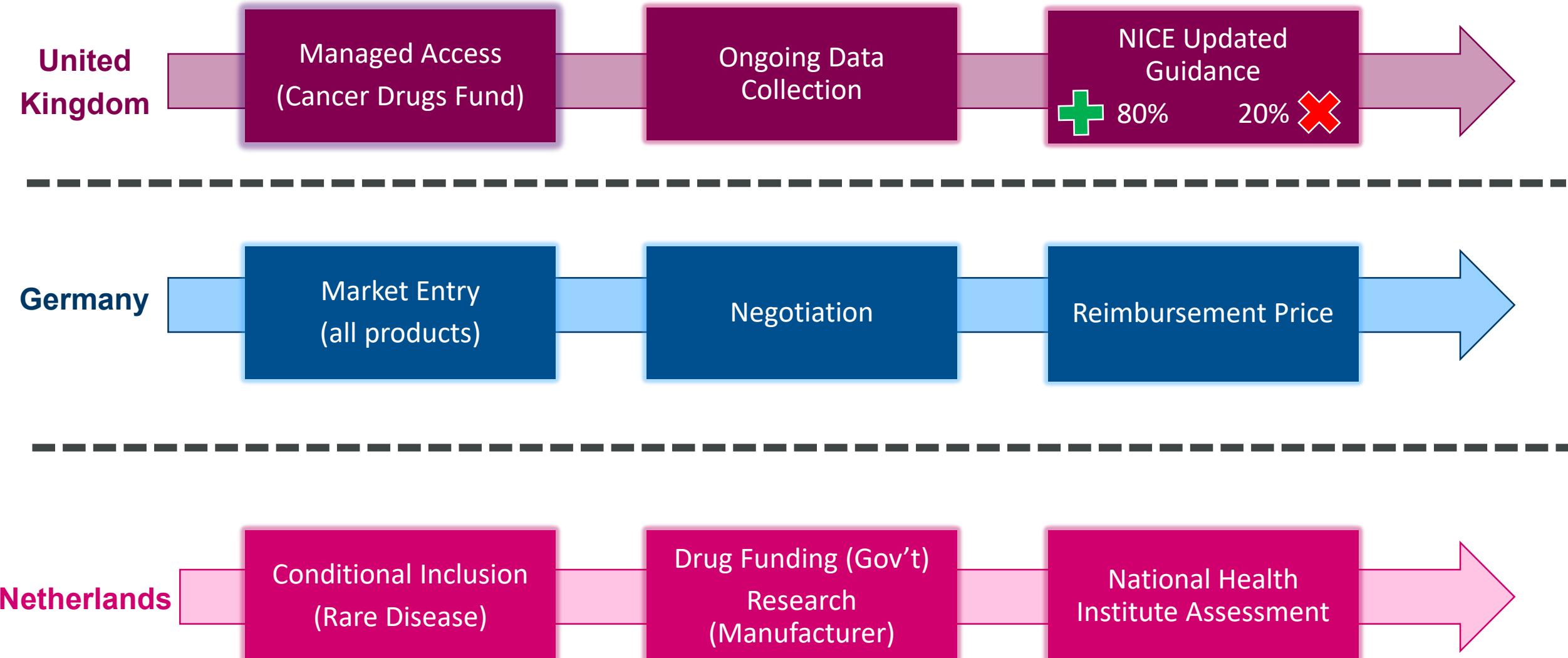
# Progress is being made, but patients are still at the back of the line

The Canadian patient access pathway ensures patients receive safe and effective treatment that follows predictable sequential steps. Ad-hoc approaches have been used for rapid patient access, but there are opportunities for improvement.



Source: IMC analysis of IQVIA International Reimbursement Comparison data and IQVIA Public Reimbursement data. CADTH and provincial listing timelines are for drugs with a pCPA LOI in the respective year. Provincial Listing is the average time from pCPA completed negotiation to provincial listing dates for drugs with a pCPA LOI. CADTH, pCPA, and provincial listing timelines are arithmetic averages.

# “Policy Innovation” is happening in peer countries – why not in Canada?



# Project Orbis as a potential neutral starting point...

## Project Orbis

Provides a framework for concurrent submission and review of oncology products among international partners. All drugs are deemed high-needs by the regulator

## Type A Designation

Allows for maximal international regulatory collaboration during the review phase. Approx. 14

Type A drugs have undergone this review since

2019



## Canadian Context

The regulatory files that were reviewed/approved under Project Orbis have received a final positive recommendation from CADTH (where an HTA submission was filed)

Rapid Patient  
Access for  
Project Orbis  
drugs:  
*Why Wouldn't  
We Do This...?*



**Next steps on a rapid  
access framework:**  
*What advice would you  
give Health Ministers?  
What can each of us  
do?*

