

Variability in Prescription Drug Coverage for Children and Youth Across Canada: A Scoping Review

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Introduction

- Canada includes an estimated 100 public drug plans and 100,000 private insurance plans
- Previous Canadian literature suggests that drug coverage varies across provinces and territories
- Little is known about drug coverage for children and youth (<25) or its impact on their health outcomes
- Scoping reviews are used to identify and report on the nature and extent of evidence available in the literature

Objective

- Undertake a scoping review of recent literature to evaluate the variation in drug coverage for children and youth in various jurisdictions across Canada

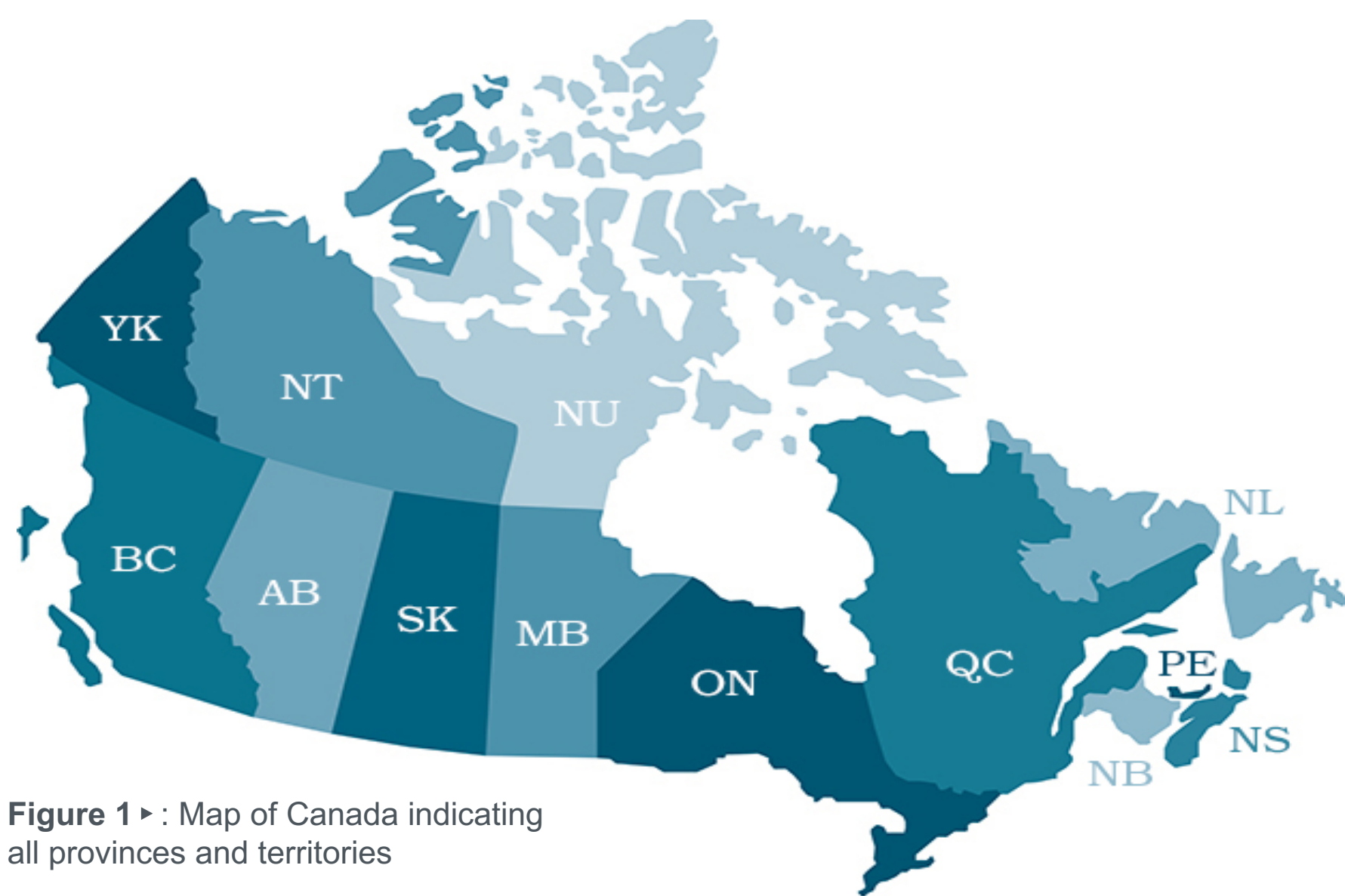


Figure 1 ▶ : Map of Canada indicating all provinces and territories

Subjects and Methods

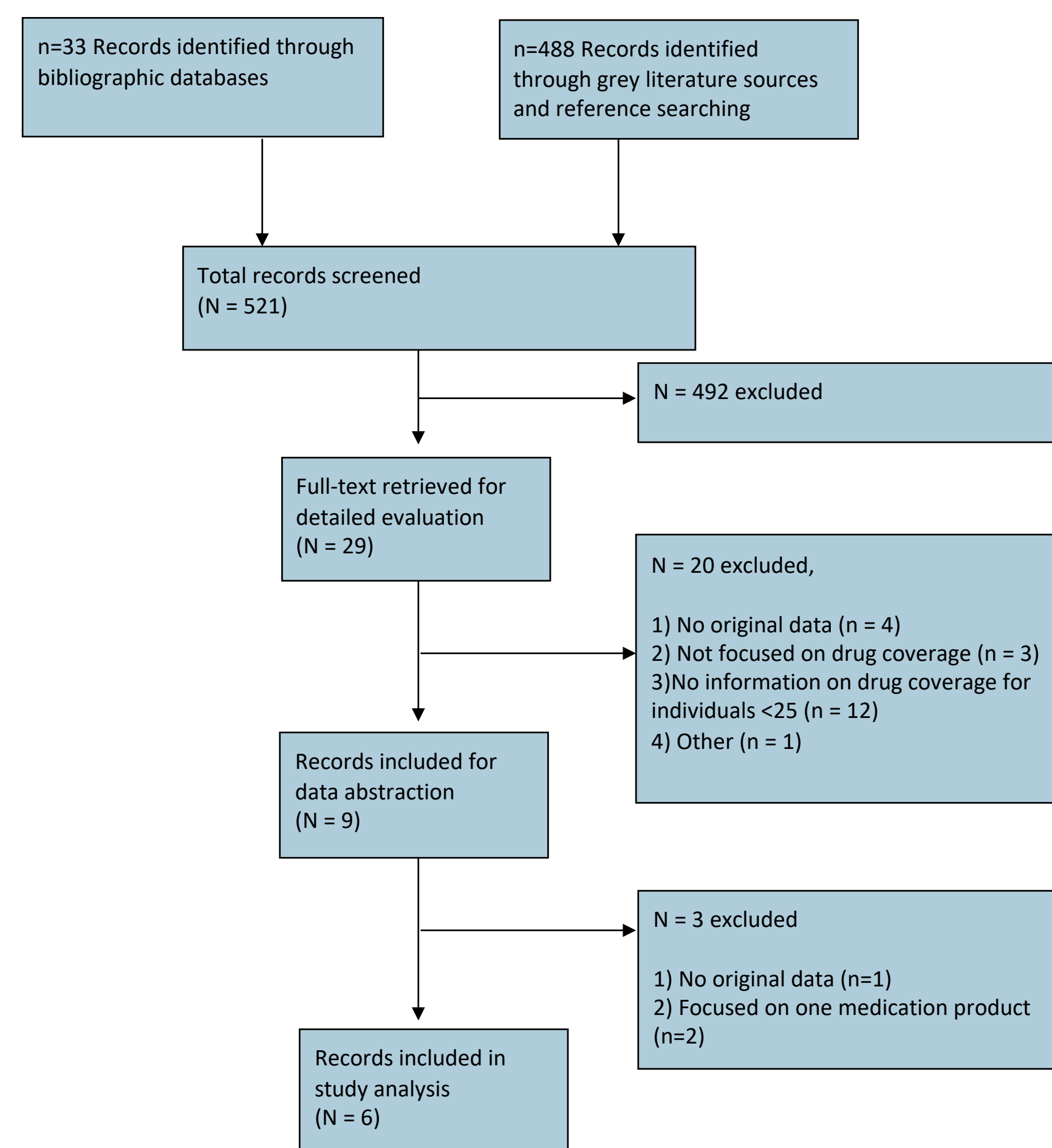
- Peer-reviewed literature was screened from bibliographic databases, gray literature sources, and reference searching
- Search strategy** was based on:
 - ✓ drug coverage
 - ✓ youths and/or children
 - ✓ Canada

Inclusion Criteria	Exclusion Criteria
Contain original data	Published before January 2005
Provide data on drug coverage for an identifiable subgroup of Canadian individuals under 25	Not published in English

- Data was abstracted on who is covered, what is covered, and how much is covered

Results

Figure 2 ▼ : PRISMA diagram of papers reporting on variability of drug coverage for children and youths



- 520 papers were screened, of which 5 were included in the final study analysis
- Information on 14 jurisdictional public drug plans was extracted, including each province, territory, and the Indigenous component of federal coverage
- Minimal information was found on private drug plan coverage

- Who:** 13 of 14 jurisdictions provide consistent coverage through demographic or family income-based public drug plans. 13 of 14 provide additional coverage though disease specific drug plans, but age and disease eligibility criteria vary
- What:** Demographic or family income-based public plans gave individuals under 25 access to jurisdictional formularies. Disease specific plans gave individuals access to additional medications not in the jurisdictional formulary
- How much:** 3 of 14 jurisdictions have no cost sharing for those under 25 meeting certain criteria. The other 11 have varying cost sharing models

Discussion

- Studies on the state of drug funding for children and youth across Canada and its effect on health outcomes, are sparse. These are vital to inform national Pharmacare discussions
- Information on drug coverage in private plans and public plans in NT and NU was especially lacking.
- Variability in age and disease eligibility, and cost sharing models may be barriers in accessing drug coverage, suggesting lack of equity and portability

Conclusion

- Public drug plans have consistent coverage for children requiring social assistance. Variability in cost sharing, age of access and disease-specific criteria may act as barriers for other children and youth

Key References

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