Interview: Pamela C. Fralick – President, Innovative Medicines Canada (IMC)



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Pamela C. Fralick, President of Innovative Medicines Canada (IMC), the innovative pharma association in Canada, looks back on her first half year in position, the challenges of navigating Canada's complex and multifaceted health ecosystem, and her goal of bringing together all healthcare stakeholders in much-needed dialogue on how to improve healthcare provision and efficiency.

Having a long and distinguished career on the other side of the table having led patient groups, what made you decide to assume the position of president of Innovative Medicines Canada, the innovative pharma industry association, in December 2016?

I always ask myself, what skills, experiences do I have to contribute to an organization, what does this organization seek to achieve, what do we need to do to get there. When this opportunity was presented to me, I had the chance to talk to the people here and I was very impressed with what they had to say in terms of where they want to go as an association and as an industry. I believed I had something to contribute to the organization by virtue of my background.

I have had extensive experience in various parts of the health sector through my leadership of several organizations like the Canadian Cancer Society, Canada Healthcare Association, Canadian Physiotherapy Association and Canadian Centre on Substance Abuse, to name just a few.

When we are talking about addressing issues within the wider health systems, I believe all stakeholders need to be involved, and that includes industry. I am pleased to say that I have a track record of seeking ways to work with industry to meet the needs of the body I represent. With the Canadian Centre on Substance Abuse (recently renamed 'Canadian Centre on Substance Use and Addiction'), for instance, we worked with Canada's Brewers Association which funded a fetal alcohol information helpline. Similarly, when I worked at the Canadian Cancer Society, we worked at developing partnerships with pharma companies like Merck and Sanofi-Pasteur. While acknowledging there can be tensions between health organizations and the private sector, it is key to find areas where both sectors are comfortable with the partnership.

I believe my reputation speaks to the fact that first and foremost, I am a collaborator – I believe in the power of multiple views informing a process or issue. I firmly believe that collaboration brings about better outcomes; it may take longer because you must hear, respect and align many views, but ultimately, you arrive at better outcomes. That has been – and remains – a guiding principle of my career.

As a relative newcomer to the industry, what have been your first impressions in the past eight months?

The multiple parts/jurisdictions of our Canadian health systems enhance the complexity of an already tremendously complicated industry. Our industry's mandate is to bring medicines as quickly as possible to benefit patients in Canada. In terms of market access, there have been many delays and hurdles, and it now takes an average of more than 14 months to get a drug approved for sale in Canada. This is longer than either the European Medicines Agency (EMA) or the United States Food and Drug Administration (FDA). After the federal regulatory approval process is completed, companies then negotiate with the pan-Canadian Pharmaceutical Alliance, which represents the public-funded drug programs for the federal, provincial and territorial governments to arrive a price and the terms of use for the drug. Once that process is completed, the company negotiates with each jurisdiction's drug programs before the drug is reimbursed for a patient. Typically, this means that it takes around 18 months before the first jurisdiction will reimburse the product for a patient, following the Health Canada approval process. There does seem to be a recognition of this timeline challenge, but regrettably, there is no structure or 'table' where key leaders can have the tough conversations that could lead to mutually agreeable solutions.

As the voice of the industry, what role is IMC playing to promote better outcomes within this fragmented landscape?

There has always been some tension between payers and industry when it comes to the financing of healthcare, and likely always will be, but it seems to be that tensions have risen to a pitch in recent years that have made it difficult for meaningful dialogue to take place. For instance, while the federal government has offered a formal consultation process regarding recently proposed regulatory changes – to which the industry has responded – we do feel that the collaborative dialogue required for positive outcomes has not yet occurred. As an industry, we are very keen to be able to sit down with the government to have that frank and open conversation, share new ideas and data with them, earn a measure of trust, and work towards better solutions for all, especially patients.

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What are some of these creative solutions or preliminary initiatives IMC is considering?

We know that a concern for most governments is the fact that there are still some vulnerable populations not able to access necessary medications, for a variety of reasons. Ontario is taking steps with its Ontario Health Insurance Plan (OHIP) Plus to improve drug coverage for young people, but gaps still exist. Both provincially and federally, we have reached out to health authorities to ask if there is space for industry to proffer assistance. We do not assume to know better or to have the silver bullet, but we are keen to collaborate.

Most governments, and particularly the federal government, have also made innovation a top priority. Without being prescriptive, we want to make clear our willingness to support them in achieving their innovation agenda. Real world data analysis is an area that we can also help with.

Another very important opportunity is with performance-based pricing models, which some governments have already suggested that they would be interested in working on. Our members are certainly very interested in exploring new pricing models. These are the sort of discussions we are already beginning to have, and would like to further encourage.

We have also looked at examples from across the European Union to identify promising approaches we can learn from. Belgium’s Pact for the Future 2015 on how to foster pharma innovation is very inspiring, for instance. We also supported a full-day meeting convened by the Conference Board of Canada, which explored four case studies of value-based pricing initiatives from across Canada and one from Spain. With a collaborative framework, such pricing agreements offer a win-win solution for all stakeholders – and also some stability for a period of time, which meets everyone’s needs. This is good for all of us but, most importantly, for patients.

This is certainly a very exciting industry to be in right now, and the critical challenge is getting all the right people to the right table to have the right conversations.

Your counterpart in the US, The Pharmaceutical Research and Manufacturers of America (PhRMA), recently launched a new campaign, “GO BOLDLY”, the lobbying group’s first national effort in recent years. Might a similar initiative be relevant north of the border here in Canada?

This industry has a tremendous value proposition, but also some significant strikes against it. As with any sector, there are outliers that exhibit very dubious behavior, and this can taint all of our members – unfairly. Egregious actions of non-member drug companies that do not follow our Code of Ethics, or events that take place in the United States that could not happen here due to the safeguards of the Patented Medicine Prices Review Board (PMPRB) will have a huge impact on the industry’s reputation in Canada. Canadians do not necessarily differentiate between events and industries in the two countries. It will not matter in the court of public opinion. I would say public perception of the industry in Canada could definitely be improved.

Over the last six months, IMC put a bit of a pause on immediate reactions to negative media coverage of the industry. Our sense is that if a negative story breaks, any response may come across as defensive rather than credible, as public opinion of the industry is already skeptical. In late-April and May, I began to speak publicly at conferences and events to present the new tone we would like to set as well as the new approach we are taking when it comes to stakeholder relationships.

In the coming months, our goal is to start being more proactive in telling ’our’ story. The industry has achieved so many incredible discoveries throughout its history and provides such value to our health today – everyone has been positively impacted in some way through pharmaceutical products. Frankly, I have observed that even our worst critics understand the immense value of the industry. I do not believe we are sharing these inspirational stories in a fitting way at the moment so we will be proactively doing so, moving forward. There is much to be proud of, and these stories must be told.

Looking forward, what are you personally most excited about in your current role?

My paramount focus now is on making this association as strong as it can be for its members and for patients. I firmly believe that it will benefit all stakeholders – industry, government and patients – if the association’s members are aligned on key issues and speak strongly as a unified voice.

We are also coming to the end of our current strategic plan, so it is an exciting time to envision the next three-years, and what can be accomplished. Despite the many challenges facing the health systems in Canada generally, and this industry in particular, I feel great optimism for innovative solutions and am proud to be part of this evolving industry.

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