

**Award Winners**

**Undergraduate category**

Not awarded in 2021

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**Master's category**

**Name:** Winnie Ma, University of Regina

**Essay Title:** Improving Accessibility to Outpatient Prescription Drugs: Reforming Pharmaceutical Policy Post-Pandemic

**Abstract:**

Accessibility is a core principle of the Canada Health Act, an underpinning value of Canadian public healthcare. Outpatient prescription drugs remain outside of the medicare basket of “medically necessary” services in Canada, resulting in cost barriers impeding accessibility to essential medicines. Universal drug coverage has been a longstanding issue of debate, and the coronavirus disease 2019 (COVID-19) pandemic has highlighted the need for universal and equitable access to medications. Pre-pandemic, the Advisory Council on National Pharmacare recommended a universal, single-payer public plan; however, this model may be less politically feasible in the current climate given the financial strain and competing public health priorities resulting from the pandemic. Sustainability of any national drug plan requires a strategy to address escalating drug costs, regardless of the model chosen. Strong federal leadership in three key areas of pharmaceutical reform are necessary to lay the foundation for sustainable, accessible universal prescription drug coverage: strengthening the *Patented Medicines Regulations*, increasing utilization of biosimilars, and establishing a Canadian drug agency. Modernization of the *Patented Medicine Regulations* are forecasted to save \$6.2 billion over the next decade, improving accessibility by lowering prices. Biologic medications account for over a quarter of annual drug expenditures, presenting significant opportunity costs as lower-cost biosimilar alternatives are underutilized. Establishing a national drug agency to oversee price negotiations and building on the successes of the pan-Canadian Pharmaceutical Alliance will increase purchasing power. Addressing escalating drug costs through policy reform in concert with ongoing national pharmacare discussions will improve accessibility to outpatient prescription drugs.

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**Doctoral category**

**Name:** Daniel Tingskou, McMaster University

**Essay Title:** Income Splitting, Interprovincial Physician Migration in Canada, and Health Care Accessibility

**Abstract:**

In 2005 the Ontario provincial government introduced a new tax policy that enabled physicians to split income earned from privately owned physician corporations with their family members. This effectively increased the after-tax income of physician households in Ontario that were able to take advantage of the new tax policy. This paper estimates the effect of the 2005 policy change on the interprovincial migration of physicians in Canada. There are two major findings from this study: the interprovincial migration of physicians to Ontario increased after the policy change; and the interprovincial migration of physicians to Nova Scotia decreased simultaneously. These results were most significant for the migration of family doctors. The departure of so many physicians from Nova Scotia between 2005 – 2018 directly threatened the accessibility of health care services provided therein.