



Patented Medicine
Prices Review Board
Canada

Conseil d'examen du prix
des médicaments brevetés
Canada

Patented Medicine Prices Review Board **2026–27 Departmental Plan**

The Honourable Marjorie Michel

Minister of Health

Canada 

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Patented Medicine Prices Review Board's 2026-27 Departmental Plan

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At a glance

This departmental plan details the Patented Medicine Prices Review Board's (PMPRB) priorities, plans, and associated costs for the upcoming three fiscal years.

These plans align with the priorities outlined in the [Mandate Letter](#), as well as the PMPRB's [Vision, mission, raison d'être and operating context](#).

Key priorities

The PMPRB identified the following key priorities for 2026-27, as highlighted in the PMPRB's [2026–2030 Strategic Plan](#):

- Provide organized and efficient administrative services
- Solidify role as a credible source for analytic information
- Manage change and foster resiliency
- Promote modern and transparent communications

Comprehensive Expenditure Review

The government is committed to restraining the growth of day-to-day operational spending to make investments that will grow the economy and benefit Canadians.

As part of meeting this commitment, the PMPRB is planning the following spending reductions:

- **2026-27:** \$1,247,000
- **2027-28:** \$1,663,000
- **2028-29:** \$2,495,000

It is anticipated that these spending reductions will involve a decrease of approximately five full-time equivalents by 2028-29.

The PMPRB will achieve these reductions by doing the following:

- modernizing hearings by leveraging existing technology, enabling faster and more cost-effective procedural processes;
- finding efficiencies in operational functions for program activities; and
- reducing corresponding salary budgets.

The figures in this departmental plan reflect these reductions.

Highlights for the PMPRB in 2026-27

New PMPRB Guidelines came into effect in January 2026, with the intent to support Staff in the monitoring of patented medicine prices under 2022 amendments to the *Patented Medicine Regulations*. The PMPRB will be dedicated to supporting a smooth and effective implementation of these new Guidelines in 2026-27, in addition to prioritizing relevant, objective, and reliable analytics in its reporting role.

Internally, the PMPRB is committed to the whole-of-government initiative to make efficient and sustainable use of our resources. Communications will be an essential component of this exercise, including the clear and precise communication of the PMPRB's mandate and role in the federal portfolio and broader biopharmaceutical ecosystem.

In 2026-27, total planned spending (including internal services) for the PMPRB is \$17,212,193 and total planned full-time equivalent staff (including internal services) is 81.

Summary of planned results

The following provides a summary of the results the department plans to achieve in 2026-27 under its main areas of activity, called “core responsibilities.”

Core responsibility 1: Monitor Patented Medicine Prices

The PMPRB will be working to support a smooth and sustainable transition to new Guidelines in 2026-27. This work includes prioritizing clear communication with Rights Holders, strengthening internal processes for assessments and recommendations to the PMPRB Chairperson, updating tools to securely and accurately organize data required for reviews, and modernizing hearing procedures.

In parallel, the PMPRB will continue to monitor the pharmaceutical market in Canada and deliver high-quality, timely reporting to the Minister of Health and to Parliament. Along with regular reports and series, publications planned for 2026-27 include reviving a series on the market for generic medicines as well as in-depth research into medicines under review by Health Canada.

Planned spending: \$13,668,117

From the Chairperson

The Patented Medicine Prices Review Board (PMPRB) is a quasi-judicial body responsible for protecting Canadians from patent abuse related to patented medicine prices. To do so, the PMPRB reviews the prices of these medicines and intervenes as necessary in the form of a hearing, during which a panel might determine that the prices are excessive. The PMPRB also contributes to a greater understanding of the biopharmaceutical ecosystem by publishing annual reports on trends in sales, pricing, and research and development spending. Additionally, the PMPRB provides neutral, relevant, and timely ad hoc analysis on pharmaceutical trends, at the Minister's request.

This coming fiscal year, the PMPRB is in the midst of the full-scale implementation of its new Guidelines, which came into effect January 2026. The Guidelines promote administrative efficiency for the PMPRB's monitoring of patented medicine prices. They also provide transparency and predictability to Rights Holders on the procedures followed by Staff to identify potential hearing candidates. The PMPRB will be focusing on clear and transparent communication as it works hard to carry out an organized, efficient transition of its internal processes and tools.

The PMPRB's reporting function supports decision making on drug spending and innovation in Canada by providing Parliament and the Minister of Health with high-quality analytic information on domestic and international trends. The reporting schedule related to inquiries requested by the Minister for 2026-27 will reintroduce a study on generic medicines and will add a new report following emerging medicines in Canada. Both studies will complement reporting on beyond the pricing of patented medicines to paint a larger portrait of Canada's pharmaceutical market.

Alongside these goals, the PMPRB is working to support the whole-of-government effort to find administrative and financial efficiencies in its program and internal service delivery. As announced in Budget 2025, we will be modernizing our hearings by leveraging existing technology, enabling faster and more cost-effective procedural processes. We will also be conducting exploratory work on the applicability of data processing and information management tools. Throughout, we are continuing to prioritize our Staff, in part through the Inclusion, Diversity, Equity, and Accessibility (IDEA) initiative, which leads the way on eliminating barriers to inclusion in the workplace.

The PMPRB's priorities for 2026-27 are guided by our new 2026–2030 Strategic Plan, which sets out guiding principles, core commitments, and key action items for the next five years. As we take on these collaborative projects in service of Canadians, we look forward to a continued conversation with all those engaged in the PMPRB's mandate.

Anie Perrault, LL.L, ASC

Chairperson, PMPRB

Plans to deliver on core responsibilities and internal services

Core responsibilities and internal services

- [Core responsibility 1: Monitor Patented Medicine Prices](#)
- [Internal services](#)

Core responsibility 1: Monitor Patented Medicine Prices

In this section

- [Description](#)
- [Indicators, results and targets](#)
- [Plans to achieve results](#)
- [Planned resources to achieve results](#)
- [Program inventory](#)

Description

The PMPRB monitors list prices of patented medicines and initiates public hearings to determine whether such price is excessive. It also monitors and provides information on trends in pharmaceutical sales and pricing and on research and development spending by Rights Holders through the issuance of its Annual Report.

Indicators, results and targets

This section presents details on the department's indicators, the actual results from the three most recently reported fiscal years, the targets and target dates for Monitor Patented Medicine Prices. Details are presented by departmental result.

Table 1: Timely and effective monitoring of patented medicine price information provided by Rights Holders

Table 1 provides a summary of the target and actual results for each indicator associated with the results under Monitor Patented Medicine Prices.

| Departmental Result Indicators | Actual Results | 2026–27 Target | Date to achieve target |
|---|--|----------------------|------------------------|
| Percentage of Rights Holder filings monitored within the calendar year | 2022-23: N/A 2023-24: 100% 2024-25: 100% | 95% | December 2027 |
| Percentage of Hearings completed within 24 months of the issuance of a Notice of Hearing | 2022-23: N/A 2023-24: N/A 2024-25: N/A | 90% | March 2028 |
| Number of months after the relevant calendar year that the PMPRB's Annual Report is submitted to the Minister of Health | 2022-23: N/A 2023-24: 11 2024-25: 10 | Fewer than 12 months | March 2027 |

Additional information on the [detailed results and performance information](#) for the PMPRB's program inventory is available on GC InfoBase.

Plans to achieve results

The following section describes the planned results for Monitor Patented Medicine Prices in 2026-27.

Timely and effective monitoring of patented medicine price information provided by Rights Holders

Plans to achieve this result are carried out through two program functions.

The first function is reviewing pricing information submitted by Rights Holders to triage and assess whether a patented medicine should be the subject of a hearing to come to a determination of whether its price is excessive and issue appropriate orders. The PMPRB has limited capacity to hold hearings and issues Guidelines as a mechanism to narrow down the number of medicine prices that are subject to a hearing. The Guidelines were newly updated, effective January 1, 2026.

In 2026-27, the timely and effective monitoring of price information will require a well-organized transition to these new Guidelines. This means prioritizing clear communication with Rights Holders on what to expect for next steps, strong internal processes for assessments and recommendations to the PMPRB Chairperson, updated tools to securely and accurately organize data required for reviews, and efficient and modern hearing procedures.

The second function is the analysis of pricing information to identify trends, furnishing Parliament, through the Minister of Health, with an Annual Report with key statistics on the market for patented medicines and research and development spending in Canada. Under section 90 of the *Patent Act*, the Minister of Health has also requested the PMPRB to develop analytics on specific components of the broader pharmaceutical environment, work conducted by the PMPRB's National Prescription Drug Utilization Information System (NPDUIS) initiative group.

In 2026-27, section 90 analytic reporting will focus on the delivery of high-quality, relevant analytics. Along with regular reports and series, there are plans to revive an existing report series on the market for generic medicines as well as to introduce a new report on emerging medicines in Canada.

Results we plan to achieve

- Support a smooth and sustainable transition to new Guidelines.
- Renew hearing process to support timely decisions, streamline protocols, and modernize tools.
- Provide the Parliament and the Minister of Health with relevant and timely information on pharmaceutical prices and spending in Canada.

Planned resources to achieve results

Table 2: Planned resources to achieve results for Monitor Patented Medicine Prices

Table 2 provides a summary of the planned spending and full-time equivalents required to achieve results.

| Resource | Planned |
|-----------------------|--------------|
| Spending | \$13,668,117 |
| Full-time equivalents | 58 |

[Complete financial](#) and [human resources information](#) for the PMPRB’s program inventory is available on GC InfoBase.

Program inventory

Monitor Patented Medicine Prices is supported by the following programs:

- Patented Medicine Price Monitoring Program
- Pharmaceutical Trends Program

Additional information related to the program inventory for Monitor Patented Medicine Prices is available on the [Results page on GC InfoBase](#).

Internal services

In this section

- [Description](#)
- [Plans to achieve results](#)
- [Planned resources to achieve results](#)
- [Planning for contracts awarded to Indigenous businesses](#)

Description

Internal services are the services that are provided within a department so that it can meet its corporate obligations and deliver its programs. There are 8 categories of internal services:

- acquisition management services
- financial management services
- human resources management services
- information management services
- information technology services
- material management services
- management and oversight services
- real property management services

Note that the PMPRB includes communications services and legal services under its core responsibility.

Plans to achieve results

This section presents details the department’s plans to achieve results and meet targets for internal services.

In 2026-27, the PMPRB will be working to make efficient and sustainable use of resources, including finding cost-effective alternatives to existing procedures. This work will include exploring

the feasibility of using new data processing tools, such as those driven by artificial intelligence (AI), to improve the efficiency of the delivery of programs and administrative services.

This fiscal year will also bring the launch of a new information management system for the administration of internal documentation, as well as the maintenance of the retention and disposition function, both of which support the longevity and resilience of the PMPRB’s data and processes.

Internal services teams will also be prioritizing work to eliminate barriers to inclusion, diversity, equity, and accessibility at all levels and in all facets of the workplace, including through mentorship and sponsorship programs. This work, championed through the Inclusion, Diversity, Equity, and Accessibility (IDEA) initiative, has targeted goals and action plans to support staff and lead positive change across the organization.

Planned resources to achieve results

Table 3: Planned resources to achieve results for internal services this year

Table 3 provides a summary of the planned spending and full-time equivalents required to achieve results.

| Resource | Planned |
|-----------------------|-------------|
| Spending | \$3,544,076 |
| Full-time equivalents | 23 |

[Complete financial](#) and [human resources information](#) for the PMPRB’s program inventory is available on GC InfoBase.

Planning for contracts awarded to Indigenous businesses

In compliance with Indigenous Services Canada requirements, the PMPRB has implemented a strategy to ensure procurement from Indigenous businesses and suppliers meets or exceed a minimum of 5.0% of the value of all contracts. To meet this target, Indigenous suppliers have been sourced for information technology (IT) equipment such as tablets and monitors, IT services, and voiceover services for webinars.

Procurement from Indigenous suppliers has been incorporated into the budget planning and monitoring cycle, as well as in the Operational Plan cycle, to ensure that the minimum 5.0% target continues to be met or exceeded in coming years.

Table 4: Percentage of contracts planned and awarded to Indigenous businesses

Table 4 presents the current, actual results with forecasted and planned results for the total percentage of contracts the department awarded to Indigenous businesses.

| 5% Reporting Field | 2024-25 Actual Result | 2025-26 Forecasted Result | 2026-27 Planned Result |
|---|-----------------------|---------------------------|------------------------|
| Total percentage of contracts with Indigenous businesses | 7.86% | 6.95 % | 6.10% |

The PMPRB's 2024-25 Departmental Results Report listed an actual results of 8.10% for fiscal year 2024-25. This value was recalculated based on the availability of more current data, which included more accurate tags for Indigenous and non-Indigenous businesses, leading to an updated result of 7.86%.

Department-wide considerations

- [Related government priorities](#)
- [Key risks](#)

Related government priorities

Gender-based Analysis Plus

Sex and gender differences, race, ethnicity, age, and mental or physical disability are all factors in the accessibility, affordability, and appropriate use of prescription medicines and medical devices. Differences in sex and gender+ roles, income and utilization of health care services can affect access to medicines and health insurance, as well as prescribing patterns and medicine use, and may have important repercussions for health and well-being.

Since the price of an individual patented medicine does not vary for the sex or gender+ of the user, the PMPRB's price monitoring process cannot take explicit account of the diversity of user groups or their economic situation. The PMPRB's mandate to ensure non-excessive patented medicine prices can benefit all populations indirectly through health system reinvestments and improved access to better care. However, the benefits are greater for those who pay out of pocket for their medicine, who do not have adequate drug coverage, who have a greater need for prescription medications, or whose socioeconomic status makes it more difficult to afford their medication.

An [intersectional study](#) published by Statistics Canada in 2024 found that prescription drug insurance coverage varied for men and women across factors such as marital status, immigrant status, racialized group, sexual orientation, household income, number of chronic conditions, and employment-related factors. The findings showed:

- lower levels of employer-sponsored drug insurance coverage among both recent and established immigrant men and women;
- lower levels of employer-sponsored drug insurance coverage among almost all racialized groups;
- lower proportions employer-sponsored drug insurance plan among bisexual men and women than heterosexual men and women; and
- more women than men skipping filling prescription drugs because of cost.

Through the Pharmaceutical Trends program, the PMPRB is leveraging data from the National Prescription Drug Utilization Information System (NPDUIS) database hosted by the Canadian Institute for Health Information (CIHI) to report on analytic research topics informed by GBA Plus.

Quality of life impacts

Canada's [Quality of Life Framework](#) uses 84 indicators to measure what matters most to Canadians and to help drive evidence-based budgeting and decision-making at the federal level. The PMPRB's core responsibility, though limited, overlaps indirectly with several of these indicators, including household finances indicators listed under the framework's domain of "Prosperity" and the indicator "Cost-related non-adherence to prescription medication" under the domain of "Health".

As many prescription medicines do not have less expensive generic versions available, monitoring the prices of patented medicines and intervening where the price appears to be excessive can contribute to the affordability of medicines for Canadian patients, which in turn can minimize cost-related non-adherence to these prescriptions. This is particularly relevant through the framework's "Sustainability and Resilience lens", which is aimed at building resilience and maintaining the longevity of policies and quality of life in the years to come.

United Nations 2030 Agenda for Sustainable Development and the UN Sustainable Development Goals

Information on the PMPRB's contributions to Canada's Federal Implementation Plan on the 2030 Agenda and the Federal Sustainable Development Strategy can be found in our [Departmental Sustainable Development Strategy](#).

Artificial Intelligence

The PMPRB is adopting the federal posture towards artificial intelligence (AI) as signaled in Budget 2025. In 2026-27, work will be underway to promote the exploration of the feasibility of the use of AI-driven tools to support efficiency in the delivery of administrative tasks, without compromising confidentiality or security standards. This will include providing staff with guidance on the appropriate and relevant use of AI, as well as reinforcing current data management standards to support the adoption of AI-driven tools.

The PMPRB will undertake a more comprehensive project to assess opportunities, risks, security, training, and resource requirements for the integration of AI in program delivery for future years.

Key risks

The PMPRB continues to monitor changes in the geopolitical and economic context in which it operates. As the market for pharmaceuticals is complex, international, and interdependent, changes in trading relationships could have an impact on the prices of medicines in Canada. The PMPRB actively monitors the prices of patented medicines based on factors laid out in the *Patent Act* and associated Regulations and is empowered to take action in the event of a sudden rise in prices.

As the PMPRB moves into the implementation of new Guidelines, program delivery teams have developed internal processes to address new requirements and new demands on the price filing reviews and hearings. To mitigate concerns about the expectations and requirements for the review process, the PMPRB will continue to engage Rights Holders in outreach sessions to ensure they are well informed and prepared for the changes.

To further mitigate the effects of the transition, PMPRB Staff have identified opportunities to streamline and modernize the hearing process and will be working to put these improvements into action, including new tools for filing and managing hearing submissions as well as updates to internal databases. The intended result is efficient, effective, and well-documented procedures for all aspects of the price monitoring process, from data collection to potential hearings.

On the reporting side, access to relevant data is an increasing cost pressure. Continuing to deliver timely and appropriate results to Parliament and to the Minister of Health that support informed decision-making at all levels requires the use of diverse and high-quality databases. The PMPRB is reviewing its data requirements to optimize available resources and respond to the priority areas for trend analysis requested by the Minister.

Planned spending and human resources

This section provides an overview of the PMPRB’s planned spending and human resources for the next three fiscal years and of planned spending for 2026-27 with actual spending from previous years.

In this section

- [Spending](#)
- [Funding](#)
- [Future-oriented condensed statement of operations](#)
- [Human resources](#)

Spending

This section presents an overview of the department's planned expenditures from 2023-24 to 2028-29.

Budgetary performance summary

Table 5: Three-year spending summary for core responsibilities and internal services (dollars)

Table 5 presents the PMPRB’s spending over the past three years to carry out its core responsibilities and for internal services. Amounts for the 2025–26 fiscal year are forecasted based on spending to date.

| Core responsibilities and Internal services | 2023-24 Actual Expenditures | 2024-25 Actual Expenditures | 2025-26 Forecast Spending |
|---|-----------------------------|-----------------------------|---------------------------|
| Monitor Patented Medicine Prices | 10,223,542 | 9,780,417 | 10,621,748 |
| Subtotal (s) | 10,223,542 | 9,780,417 | 10,621,748 |
| Internal services | 3,820,603 | 3,906,683 | 4,382,324 |
| Total (s) | 14,044,145 | 13,687,100 | 15,004,072 |

Analysis of the past three years of spending

Actual spending decreased between 2023-24 and 2024-25 largely as a result of a reduction in the number of full-time equivalents (FTEs). Forecast spending for 2025-26 is based on actual spending and anticipated spending to year end, which does not anticipate full use of the Special Purpose Allotment (SPA) for hearings. Spending on hearings has been lower than normal as the PMPRB conducted price reviews under Interim Guidance. At the time of preparing this report, forecast spending of the SPA amounted to \$0.7 million of the \$4.5 million allotted. This accounts for the variance in 2025-26 forecast spending and 2026-27 planned spending shown in Table 6.

More financial information from previous years is available on the [Finances section of GC Infobase](#).

Table 6: Planned three-year spending on core responsibilities and internal services (dollars)

Table 6 presents the PMPRB’s planned spending over the next three years by core responsibilities and for internal services.

| Core responsibilities and Internal services | 2026-27 Planned Spending | 2027-28 Planned Spending | 2028-29 Planned Spending |
|---|--------------------------|--------------------------|--------------------------|
| Monitor Patented Medicine Prices | 13,668,117 | 13,404,167 | 12,881,399 |
| Subtotal | 13,668,117 | 13,404,167 | 12,881,399 |
| Internal services | 3,544,076 | 3,392,026 | 3,138,677 |
| Total | 17,212,193 | 16,796,193 | 16,020,076 |

Analysis of the next three years of spending

The PMPRB has planned decreases in planned spending for the next three years to align with the comprehensive expenditure review, as announced in Budget 2025. Spending will decrease by 7.5% in 2026-27, 10.0% in 2027-28, and 15.0% in 2028-29 onward, relative to the planned amounts listed in the 2025-26 Main Estimates.

For purposes of forecasting planned spending, it is necessary to assume that the entire SPA funding will be spent because these expenditures are dependent on the number of hearings, and the length and complexity of the hearings held, which are difficult to predict. Any unspent amount is returned to the Consolidated Revenue Fund.

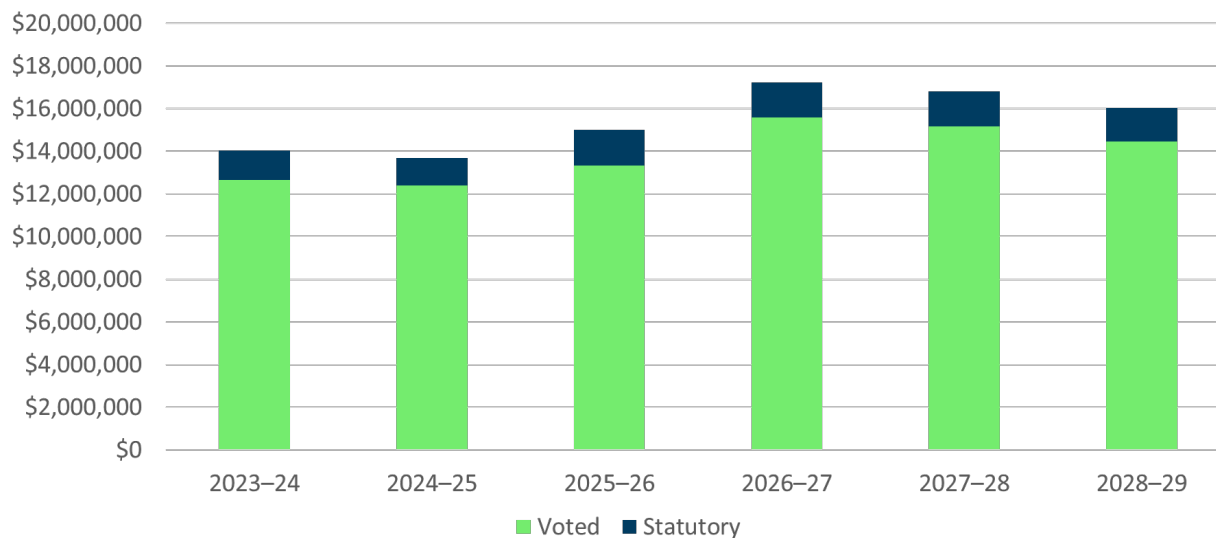
More [detailed financial information on planned spending](#) is available on the Finances section of GC Infobase.

Funding

This section provides an overview of the department's voted and statutory funding for its core responsibilities and for internal services. For further information on funding authorities, consult the [Government of Canada budgets and expenditures](#).

Graph 1: Approved funding (statutory and voted) over a six-year period

Graph 1 summarizes the department's approved voted and statutory funding from 2023-24 to 2028-29.



Text description of graph 1

| Fiscal year | Total | Voted | Statutory |
|-------------|--------------|--------------|-------------|
| 2023-24 | \$14,044,145 | \$12,656,858 | \$1,387,287 |
| 2024-25 | \$13,687,100 | \$12,398,001 | \$1,289,099 |
| 2025-26 | \$15,004,072 | \$13,324,438 | \$1,679,634 |
| 2026-27 | \$17,212,193 | \$15,574,520 | \$1,637,673 |
| 2027-28 | \$16,796,193 | \$15,158,520 | \$1,637,673 |
| 2028-29 | \$16,020,076 | \$14,464,403 | \$1,555,673 |

Analysis of statutory and voted funding over a six-year period

It is necessary to assume that SPA funding will be required in its entirety for planned spending in future years. Forecast spending on the SPA in 2025-26 is \$0.7 million, with a projected lapse of \$3.8 million. This accounts for the difference between total forecast spending in 2025-26 and planned spending for 2026-27.

Per the comprehensive expenditure review announced in Budget 2025, the PMPRB will be reducing spending by 7.5% in 2026-27, 10.0% in 2027-28, and 15.0% in 2028-29 onward, relative to the planned amounts listed in the 2025-26 Main Estimates.

For further information on the PMPRB’s departmental appropriations, consult the [2026-27 Main Estimates](#).

Future-oriented condensed statement of operations

The future-oriented condensed statement of operations provides an overview of the PMPRB’s operations for 2025-26 to 2026-27.

Table 7: Future-oriented condensed statement of operations for the year ended March 31, 2027 (dollars)

Table 7 summarizes the expenses and revenues which net to the cost of operations before government funding and transfers for 2025-26 to 2026-27. The forecast and planned amounts in this statement of operations were prepared on an accrual basis. The forecast and planned amounts presented in other sections of the Departmental Plan were prepared on an expenditure basis. Amounts may therefore differ.

| Financial information | 2025-26 Forecast results | 2026-27 Planned results | Difference (Planned results minus forecasted) |
|--|---------------------------------|--------------------------------|--|
| Total expenses | 16,742,397 | 19,105,924 | 2,363,527 |
| Total revenues | - | - | - |
| Net cost of operations before government funding and transfers | 16,742,397 | 19,105,924 | 2,363,527 |

Analysis of forecasted and planned results

The PMPRB is projecting \$19.1 million in expenses based on 2026-27 Main Estimates and accrual information. This amount does not include future supplementary estimates. It represents an increase of \$2.4 million from 2025-26 forecast results.

The increase is primarily attributable to the \$4.5 million planned in 2026-27 for the SPA. It is necessary to assume that SPA funding will be required in its entirety for planned spending in future years. However, forecast spending on the SPA in 2025-26 is only \$0.7 million. This is offset by the planning savings for 2026-27 approved in Budget 2025.

The 2026-27 planned expenses by core responsibility are as follows:

- Monitor Patented Medicine Prices \$15.0 million; and
- Internal services \$4.1 million.

PMPRB receives most of its funding through annual Parliamentary appropriations.

A more detailed [Future-Oriented Statement of Operations and associated Notes for 2026-27](#), including a reconciliation of the net cost of operations with the requested authorities, is available on the PMPRB’s website.

Human resources

This section presents an overview of the department’s actual and planned human resources from 2023-24 to 2028-29.

Table 8: Actual human resources for core responsibilities and internal services

Table 8 shows a summary of human resources, in full-time equivalents, for the PMPRB’s core responsibilities and for its internal services for the previous three fiscal years. Human resources for the 2025–26 fiscal year are forecasted based on year to date.

| Core responsibilities and internal services | 2023-24 Actual full-time equivalents | 2024-25 Actual full-time equivalents | 2025-26 Forecasted full-time equivalents |
|---|--------------------------------------|--------------------------------------|--|
| Monitor Patented Medicine Prices | 58 | 53 | 55 |
| Subtotal | 58 | 53 | 55 |
| Internal services | 24 | 24 | 27 |
| Total | 82 | 77 | 82 |

Analysis of human resources over the last three years

Actual FTEs increased from 2024-25 to 2025-26 as a result of backfilling staff departures and fulfilling staffing actions.

Table 9: Human resources planning summary for core responsibilities and internal services

Table 9 shows information on human resources, in full-time equivalents, for each of the PMPRB’s core responsibilities and for its internal services planned for the next three years.

| Core responsibilities and internal services | 2026-27 Planned full-time equivalents | 2027-28 Planned full-time equivalents | 2028-29 Planned full-time equivalents |
|---|---------------------------------------|---------------------------------------|---------------------------------------|
| Monitor Patented Medicine Prices | 58 | 58 | 55 |
| Subtotal | 58 | 58 | 55 |
| Internal services | 23 | 23 | 21 |
| Total | 81 | 81 | 76 |

Analysis of human resources for the next three years

Planned FTE levels are expected to be consistent with current levels through 2027-28. There is a reduction planned in 2028-29 to correspond with the comprehensive expenditure review announced in Budget 2025.

Federal tax expenditures

The PMPRB's Departmental Plan does not include information on tax expenditures.

The tax system can be used to achieve public policy objectives through the application of special measures such as low tax rates, exemptions, deductions, deferrals and credits. The Department of Finance Canada publishes cost estimates and projections for these measures each year in the [Report on Federal Tax Expenditures](#).

This report also provides detailed background information on tax expenditures, including descriptions, objectives, historical information and references to related federal spending programs as well as evaluations and GBA Plus of tax expenditures.

Corporate information

Departmental profile

Appropriate minister(s): The Honourable Marjorie Michel

Institutional head: Anie Perrault, Chairperson

Ministerial portfolio: Health

Enabling instrument(s): [Patent Act](#) and [Patented Medicines Regulations](#)

Year of incorporation / commencement: 1987

Other: The Minister of Health is responsible for the pharmaceutical provisions of the *Patent Act* set out in sections 79 to 103. Although the PMPRB is part of the Health Portfolio, because of its quasi-judicial responsibilities the PMPRB carries out its mandate at arm's length from the Minister.

The PMPRB also operates independently of

- Health Canada, which approves medicines for marketing in Canada based on their safety, efficacy, and quality;
- Canada's Drug Agency, which performs health technology assessment and assembles expert committees to make recommendations on which medicines should qualify for reimbursement under publicly funded drug programs;
- the Institut national d'excellence en santé et en services sociaux (INESSS), which evaluates medicines to make recommendations on reimbursement by public plans in Quebec;
- the pan-Canadian Pharmaceutical Alliance (pCPA), which negotiates the list prices on behalf of the publicly funded drug programs across Canada; and
- federal, provincial, and territorial public drug plans and private drug plans, which approve the listing of medicines on their respective formularies for reimbursement purposes.

Departmental contact information

Mailing address:

The Patented Medicine Prices Review Board
Box L40
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333 Laurier Avenue West
Suite 1400
Ottawa, Ontario
K1P 1C1

Telephone: 1-877-861-2350

TTY: 613-288-9654

Email: PMPRB.Information-Renseignements.CEPMB@pmprb-cepmb.gc.ca

Website(s): <https://www.canada.ca/en/patented-medicine-prices-review.html>

Definitions

appropriation (crédit)

Any authority of Parliament to pay money out of the Consolidated Revenue Fund.

budgetary expenditures (dépenses budgétaires)

Operating and capital expenditures; transfer payments to other levels of government, departments or individuals; and payments to Crown corporations.

core responsibility (responsabilité essentielle)

An enduring function or role performed by a department. The intentions of the department with respect to a core responsibility are reflected in one or more related departmental results that the department seeks to contribute to or influence.

Departmental Plan (plan ministériel)

A report on the plans and expected performance of an appropriated department over a 3year period. Departmental Plans are usually tabled in Parliament each spring.

departmental result (résultat ministériel)

A consequence or outcome that a department seeks to achieve. A departmental result is often outside departments' immediate control, but it should be influenced by program-level outcomes.

departmental result indicator (indicateur de résultat ministériel)

A quantitative measure of progress on a departmental result.

departmental results framework (cadre ministériel des résultats)

A framework that connects the department's core responsibilities to its departmental results and departmental result indicators.

Departmental Results Report (rapport sur les résultats ministériels)

A report on a department's actual accomplishments against the plans, priorities and expected results set out in the corresponding Departmental Plan.

full-time equivalent (équivalent temps plein)

A measure of the extent to which an employee represents a full person-year charge against a departmental budget. For a particular position, the full-time equivalent figure is the ratio of number of hours the person actually works divided by the standard number of hours set out in the person's collective agreement.

gender-based analysis plus (GBA Plus) (analyse comparative entre les sexes plus [ACS Plus])

Is an analytical tool used to support the development of responsive and inclusive policies, programs, and other initiatives. GBA Plus is a process for understanding who is impacted by the issue or opportunity being addressed by the initiative; identifying how the initiative could be tailored to meet diverse needs of the people most impacted; and anticipating and mitigating any barriers to accessing or benefitting from the initiative. GBA Plus is an intersectional analysis that goes beyond biological (sex) and socio-cultural (gender) differences to consider other factors, such as age, disability, education, ethnicity, economic status, geography (including rurality), language, race, religion, and sexual orientation.

Using GBA Plus involves taking a gender- and diversity-sensitive approach to our work. Considering all intersecting identity factors as part of GBA Plus, not only sex and gender, is a Government of Canada commitment.

government priorities (priorités gouvernementales)

For the purpose of the 2026-27 Departmental Plan, government priorities are the high-level themes outlining the government's agenda in the [2025 Speech from the Throne](#).

horizontal initiative (initiative horizontale)

An initiative where two or more federal departments are given funding to pursue a shared outcome, often linked to a government priority.

Indigenous business (entreprise autochtones)

Requirements for verifying Indigenous businesses for the purposes of the departmental result report are available through the Indigenous Services Canada [Mandatory minimum 5% Indigenous procurement target](#) website.

interested parties (parties intéressées)

For the purposes of the PMPRB, any group or individual who is impacted by or takes interest in matters under the PMPRB's jurisdiction. In the context of consultations, interested parties might

include pharmaceutical Rights Holders, patient and health groups, public and private payers, distributors, and researchers and academics, among others.

non-budgetary expenditures (dépenses non budgétaires)

Non-budgetary authorities that comprise assets and liabilities transactions for loans, investments and advances, or specified purpose accounts, that have been established under specific statutes or under non-statutory authorities in the Estimates and elsewhere. Non-budgetary transactions are those expenditures and receipts related to the government's financial claims on, and obligations to, outside parties. These consist of transactions in loans, investments and advances; in cash and accounts receivable; in public money received or collected for specified purposes; and in all other assets and liabilities. Other assets and liabilities, not specifically defined in G to P authority codes are to be recorded to an R authority code, which is the residual authority code for all other assets and liabilities.

performance (rendement)

What a department did with its resources to achieve its results, how well those results compare to what the department intended to achieve, and how well lessons learned have been identified.

performance indicator (indicateur de rendement)

A qualitative or quantitative means of measuring an output or outcome, with the intention of gauging the performance of a department, program, policy or initiative respecting expected results.

plan (plan)

The articulation of strategic choices, which provides information on how a department intends to achieve its priorities and associated results. Generally, a plan will explain the logic behind the strategies chosen and tend to focus on actions that lead to the expected result.

planned spending (dépenses prévues)

For Departmental Plans and Departmental Results Reports, planned spending refers to those amounts presented in Main Estimates.

A department is expected to be aware of the authorities that it has sought and received. The determination of planned spending is a departmental responsibility, and departments must be able to defend the expenditure and accrual numbers presented in their Departmental Plans and Departmental Results Reports.

program (programme)

Individual or groups of services, activities or combinations thereof that are managed together within the department and focus on a specific set of outputs, outcomes or service levels.

program inventory (répertoire des programmes)

Identifies all the department's programs and describes how resources are organized to contribute to the department's core responsibilities and results.

result (résultat)

A consequence attributed, in part, to a department, policy, program or initiative. Results are not within the control of a single department, policy, program or initiative; instead they are within the area of the department's influence.

statutory expenditures (dépenses législatives)

Expenditures that Parliament has approved through legislation other than appropriation acts. The legislation sets out the purpose of the expenditures and the terms and conditions under which they may be made.

target (cible)

A measurable performance or success level that a department, program or initiative plans to achieve within a specified time period. Targets can be either quantitative or qualitative.

voted expenditures (dépenses votées)

Expenditures that Parliament approves annually through an appropriation act. The vote wording becomes the governing conditions under which these expenditures may be made.