





Switzerland

Recent and planned developments in pharmaceutical policies 2014 Policies related to high cost medicines

	Changes in pricing	Changes in reimbursement
D E V E L O P M E N T S	 Revision of the health insurance law until 1.6. 2015: More transparency in processes for SL-admission (positive list). Benefit assessment. EPR/ IPR (daily costs/ cost per cure): External price referencing will be considered stronger than internal price referencing (daily costs/ cost per cure): EPR:IPR = 2:1. Prices higher (at most 5% higher than the European average) than the European average price will be accepted. Changes in the country basket in EPR: From 2015 onwards, Belgium, Finland and Sweden will be added to Austria, Denmark, the Netherlands, France, Germany and UK. 	There are no changes planned in reimbursement.
	Other changes 2015	
	The impact of a reference pricing system for biosimilars and generics will be analysed.	
S	High cost medicines	
Р	Special pricing policies: There are no specific pricing policies for high cost medicines.	
E C	Special reimbursement/funding policies:	
ı	The reimbursement of SL products may be restricted to certain medical indications or specified	
A	quantities (so-called limitations). Sovaldi for instance, is reimbursed for patients with advanced fibrosis (Metavir score F3 to F4, Fibroscan > 9.5kPa) or for patients with extrahepatic	
L	manifestations.	
Т	 <u>High cost medicines at the interface of out-patient and in-patient sectors:</u> The costs for an in-patient hospital stay are billed according to DRG fees. For few high-cost medicines additional fees can be allocated. 	
0	Key challenges and solutions:	
P	 New high cost medicines Medicines at the interface of the out-patient and in-patient sectors. 	
С	Solutions: no specific measures are planned.	