





CZECH REPUBLIC

Recent and planned developments in pharmaceutical policies 2016

Special topic: Out-of pocket payments

D	CHANGES IN PRICING	CHANGES IN REIMBURSEMENT
E V	<u>No relevant system changes in 2016</u>	<u>No relevant system changes in 2016</u>
EL	 <u>Discussion</u> about possibility of common international approach considering price negotiations. 	 Ongoing 2nd and 3rd waves of complex reimbursement reviews
O P M E N T	 <u>Discussion</u> about generic/biosimilar price link modification - raise of the obligatory price decrease for generic product from 32 % to 40 % and for biosimilar product from 15 % to 30 %. 	 Reimbursement of generic/biosimilar is correlating with its price. The change of price decrease would reflect also to reimbursement.
S	OTHER CHANGES	
	 Planned law regulation of re-export. Selected medicinal products will be published in bulletin and they could not be exported. Sanctions up to 20 million CZK and prohibition of activity up to 2 years. 	
S	OUT-OF POCKET PAYMENTS	
Р	Out-patient sector	
E	• Maximal price and reimbursement price of the pharmaceutical product are stated in separate processes and set as nominal values.	
C I	 Both processes are primarily based on ERP. The difference between reimbursement price and pharmacy retail price is the co-payment for a 	
A	patient.For reimbursement price the system of reference groups is applied.	
L	 Groups of pharmaceuticals which have similar effectiveness, safety profile and clinical use and are considered to be therapeutically interchangeable. All pharmaceuticals within the same reference group have the same reimbursement 	
т	 price for usual daily dose. Different list of groups of pharmaceuticals in Annex No. 2 of the Act No. 48/1997 Coll., on Public 	
Ο	Health Insurance At least one fully reimbursed medicine must be in each group 	
P	 OTC medicines that are not prescribed are to be fully paid by the patient Only small group of OTC has reimbursement. 	
	Annual co-payment ceilings are established.	
С	 2500 CZK for patients under 18 years and above 65 years old 5000 CZK for other patient 	
	 Only co-payments for the cheapest medicinal product from the group are counted into this amount (the lowest possible co-payment for a patient) 	
	 The ceilings are proposed to change. 1000 CZK for patients under 18 years and above 65 years. 500 CZK for patients above 70 years 	
	 <u>In-patient sector</u> Patients do not have to provide extra payments for medicines they receive during their in-patient stay. 	