

FRANCE





Pharmaceutical pricing and reimbursement policies in the in- and out- patient sector

European Medicines Agency (EMA) or French Health Products Safety Agency (ANSM)

Task: decision on authorisation and registration Criteria: Quality, safety and efficacy (Directive 2004/27/EC) and Public Health Code

Only medicines requesting to be reimbursed are assessed

EARLY ACCESS SCHEMES	
Scheme name	Regulatory status
Temporary use authorisation (ATU) Temporary use recommandation (RTU)	Coverage before a Marketing authorisation (MA)
ATU for new indication (post-ATU direct) ATU for new indication (ATU EIT)	Coverage after a MA

French National Authority for Health (HAS)

Task: Clinical assessment (for all drugs requested to be reimbursed) and economic assessment (only if supposely innovative and/or annual gross revenu > 20 M€ and/or organisational impact)

Criteria: - Clinical assessment: medical value (SMR); added-medical value (ASMR); target population; comparators; use conditions

- Economic assessment: incremental cost-effectiveness ratio (RDCR)

Reimbursement criteria **Pricing criteria** Reimbursement rates are driven by SMR Pricing decisions are mostly driven by ASMR SMR important 65 % price > comparators major added value ASMR I SMR moderate 35 % important added value price > comparators ASMR II SMR weak 15 % price > comparators significant added value ASMR III SMR insufficient ASMR IV minor added value price = comparators Drugs treating severe and chronic disease (ALD) and price < comparators ASMR V no added value in-patient drugs are covered 100 %

OUT-PATIENT

Pricing Committee (CEPS)

Task: Price negotiation

Criteria: set by law (Art. L162-16-4 Social Security Code)

- Added medical value (ASMR)
- Economic assessment
- Comparators prices
- Sales forecast
- Use conditions

ERP is used only for innovative medicines (ASMR I, II and III) and a valid economic assessment

ERP basket is composed by Germany, Italy, Spain and the UK

Lists of authorised medicines in hospital

IN-PATIENT

Drugs over-DRGs or dispensed at the hospital for out-patient use **Drugs included** in the DRGs

Hospital purchasing body or union

Pricing Committee (CEPS)

Task: Price negotiation

Criteria: Same as out-patient

Task: Price negotiation and/or

tendering

Criteria: Depends on the product or the market situation

Sickness funds union (UNCAM)

Task: Reimbursement rate

Criteria: Reimbursement rate (15%, 35%, 65%) based on SMR Drugs treating severe and chronic disease (ALD) are covered 100 %

Ministry of Health

Task: Positive list and publication

Ministry of Health

Task: Positive list and publication Hospital drugs are covered 100%

GENERICS

Originator: -20% at generics marketing

Generics: - 60% vs originator price

BIOSIMILARS

Originator: -20% at biosimilars marketing

Generics: - 40% vs originator price

PARALLEL **IMPORT**

-5% vs originator

GENERICS

Both originator and generics: -40 % vs originator price

BIOSIMILARS

Both originator and biosimilars: -30 % vs originator price

PARALLEL **IMPORT** -5% vs originator

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