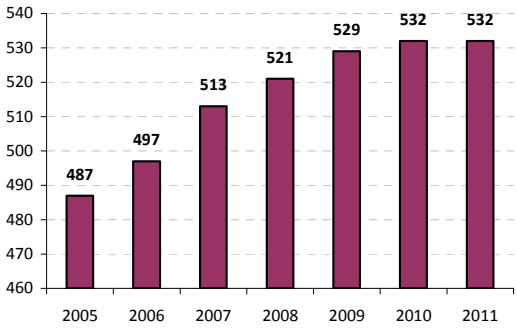


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Recent changes in pharmaceutical policy measures and developments in pharmaceutical expenditure

Major changes in pharmaceutical policy in 2012-2013	Development of pharmaceutical expenditure in the last 5 available years																
<p><u>Pricing</u></p> <ul style="list-style-type: none"> • Price cuts' policy was strengthened in 2012. As usual it occurred all along the year but was mainly concentrated at the beginning (march). Amount : nearly 1 €Bn Mainly affected therapeutic classes : statins, proton pump inhibitor (PPI), renin-angiotensin system (RAS), alzheimer... • Margin changes : Change in <u>wholesale margin</u>, applicable 1st of January 2012 : if ex-factory price lower than 450€ = maximum of (6,68% and 0,3€), 0€ over 450€ Change of <u>pharmacist margins</u> for 3-month packs = [90% (PFHT of monthly pack x 3)]. Decided in May 2012, applicable 1st of July. In April 2012 : New <u>agreement with pharmacists</u>, including P4P remuneration on generic substitution improvement and quality of generic dispensing to the elderly (no impact on price of medicines). • Change in VAT Increase in the VAT rate from 5.5 to 7% for non-reimbursable drugs came into force on 1st of January 2012 <p><u>Reimbursement</u></p> <ul style="list-style-type: none"> • Several delistings occurred in 2012 : - March: VASODILATORS and insufficient SMRs including Multaq®, Vastarel® - May: Percutalgine®, Glucovance® - Septembre : Derinox® - 3rd generation contraceptive were delisted in January 2013, 9 months before the planned date <p><u>Other changes</u></p> <ul style="list-style-type: none"> • June 2012 : Extension of policy with pharmacists « Tiers-payant contre génériques » (TPcG, "Commission paritaire nationale" 6 june 2012) : nationwide and all insured <p style="text-align: center;">Outlook</p> <p><i>Further price cuts (Low weight molecular heparins, Hepatitis-HIV, Paracetamols in association, calciums, generics – European convergence –, proton pump inhibitor...) and delistings (slow action anti-arthritis) scheduled for 2013.</i></p> <p><i>On-going discussions regarding pharmacists' margins.</i></p>	<p><u>Out-patient sector</u></p> <p><i>Please use the same data definitions as indicated in the Glossary: http://whocc.goeg.at → Glossary</i></p> <p>Pharmaceutical expenditure per capita in euro</p>  <table border="1"> <thead> <tr> <th>Year</th> <th>Expenditure per capita (€)</th> </tr> </thead> <tbody> <tr> <td>2005</td> <td>487</td> </tr> <tr> <td>2006</td> <td>497</td> </tr> <tr> <td>2007</td> <td>513</td> </tr> <tr> <td>2008</td> <td>521</td> </tr> <tr> <td>2009</td> <td>529</td> </tr> <tr> <td>2010</td> <td>532</td> </tr> <tr> <td>2011</td> <td>532</td> </tr> </tbody> </table> <p>Source: PQE 2nd indicator part I - from DREES Health accounts</p> <p><u>In-patient sector</u></p> <p>n.a</p> <p><u>Total market</u></p> <p>n.a</p>	Year	Expenditure per capita (€)	2005	487	2006	497	2007	513	2008	521	2009	529	2010	532	2011	532
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<p style="text-align: center;">Impact of measures and evaluation</p> <p>Generics' share among the "répertoire" increased by nearly 12 percentage points from may to december 2012.</p> <p>Price cuts and generics' growth helped to restrain health insurance's pharmaceutical expenditure in 2012, although several expensive drugs entered the market (Victrelis®, Incivo®, Pradaxa®, Xarelto®, Zytiga®...). => Structure component was restrained thanks to price and generics components.</p> <p>Although OTC sales were dynamic last year, the global market decreased.</p> <p>So far no study showing a restriction in access to medicines. Available studies on renouncement to health care show that it usually concerns dental care and optical care.</p>																	