



Statens legemiddelverk Norwegian Medicines Agency



NORWAY

Drug Procurement Cooperation

Norwegian Medicines Agency

Pharmaceutical services in hospitals

- Nearly all the in-patient treatments are performed in public hospitals.
- 32 of 78 state hospitals own and operate a hospital pharmacy. The 32 hospital pharmacies are responsible for production of ready to use injection/infusions and pharmaceutical services including clinical pharmacy The hospital pharmacies differ in size from 5-90 employees.
- Flow chart of the pharmaceutical procurement in the in-patient sector;

Supplier – Wholesaler – Pharmacy (private/hospital) - Hospital

 The maximum prices are set by the Norwe- gian Medicines Agency based on prices in nine European countries. The prices for hospitals are based on the agreed price from the yearly tenders by the procurement cooperation, LIS. There are no special pricing for hospital products. The tender prices are published for the suppliers. The hospital decides on which medicines to be purchased. The tender prices are published for the suppliers. The hospital decides on which medicines to 	Purchasing of medicines in the hospital sector	Financing of medicines in the hospital sector
	 gian Medicines Agency based on prices in nine European countries. The prices for hospitals are based on the agreed price from the yearly tenders by the procurement cooperation, LIS. There are no special pricing for hospital products. The tender prices are published for the suppliers. The hospital decides on which medicines to 	 patient hospital treatment. There are no patients charge for medicines dispensed in hospitals. Drug lists for medicines used in the hospitals are published by the drug committees in the

Evaluation and Interface management

- The pharmaceutical consumption and prices are monitored via the wholesalers and the hospital drug consumption report by the hospital pharmacies. Prescriptions follow the drug lists published by the drug committees agreed upon from the yearly tenders.
- There are two financial systems in Norway. One for hospital in treatment and one for the outpatient. The Norwegian state pays for both systems. There is no interface management between the two systems.