

## Conclusions and lessons learned<sup>1</sup>

On 29 / 30 September 2011 the WHO Collaborating Centre (WHO CC) for Pharmaceutical Pricing and Reimbursement Policies organized the second PPRI (Pharmaceutical Pricing and Reimbursement Information) Conference in Vienna (Austria).

The PPRI conference offered a critical look at pharmaceutical policies which are aimed at meeting the balance between equity and cost-containment. The conference addressed key issues in pricing and reimbursement policies of medicines – from a global and European perspective and in the light of the current financial crisis. Evidence-based tools for promoting the rational use of medicines with a special focus on the interface between the primary and the hospital sector were also discussed.

Key lessons learned from the PPRI Conference 2011 were:

- **Pharmaceutical pricing and reimbursement issues for out-patient medicines continue to be of key interest.** The conference format paid, via different strands, also attention to the issue of hospital pharma and interface management as well as the rational use of medicines. But a key interest of the participants, also expressed in the attendance rate of the different sessions, was in topics around pharmaceutical pricing and reimbursement, including the relevance of specific policies in countries and technical aspects of measures.
- **Price is just one element of the equation.** Acknowledging the importance of know-how about prices of medicines and pricing policies, it was recommended to broaden the scope beyond prices alone. Pharmaceutical expenditure is the result of price, including the shift to new and more expensive medicines, and volume. Initiatives to establishing and strengthening volume control (e.g. prescription monitoring) are to be supported.
- **Rational use of medicines is considered as a way forward.** The quality aspect of pharmaceutical policies, i.e. which impact do pharmaceutical policies have on the quality of pharmaceutical services delivered, should be taken stronger into consideration both by policy makers as well as by researchers. In accordance with this, monitoring of performance, including identifying possible inefficiencies, of various implementation strategies and efforts to achieve rational use of medicines is of critical importance as basis for future decision-making and development.
- **New medicines and technologies.** Policies and strategies should be developed to support a conscious, evidence based introduction of new medicines and technologies in the health care system as well as the capacity in methods including Health Technology Assessment. Establishment of regulatory procedures for evaluation of newer health technologies and medicines should be considered.

- **The in-patient pharmaceutical sector and interface management initiatives have to continue to be explored.** In agreement with findings in the PHIS (Pharmaceutical Health Information System, <http://phis.goeg.at>) Hospital Pharma Report, the importance of increased cooperation between the hospital and out-patient sector to ensure rational medicines use, was thoroughly debated. Good practice models for interface management were presented, and a need to further characterize the status in this field in different parts of the world was emphasized. In particular it is important to define the critical mechanisms to be in place in order to implement interface management efficiently. The challenges that are acknowledged should to be addressed as a priority in future.
- **Information about pharmaceutical policies should be supplemented by evidence about their impact in terms of public health and economically.** Whereas knowledge about the implementation of specific policies is welcome, it is equally important to learn about the effects of policies: What did they do to the population, and did they meet the expectations? Both public authorities and researchers were encouraged to collect longitude data and to assess health outcomes of policy measures.
- **Generic policies appear not to be fully explored yet.** At the PPRI conference, generics were identified as one area where competition works. There is common understanding that savings from generics might be invested for funding innovation. However, as evidence on generics penetration across the countries demonstrated, generic uptake could be improved by more consistent generic policies.
- **External price referencing will continue to be one of the main pricing methodologies used in Europe.** The PPRI conference critically discussed this pricing methodology, highlighting possible disadvantages and negative impacts (e.g. distorted prices due to hidden discounts, access problems). Nonetheless, it was concluded that external price referencing, like other policies, might be applied in spite of its limitations since there are few alternatives.
- **Responsibility of value based judgments cannot be delegated.** While technical work has its merits, it is never as a stand-alone but needs to be based on values defined by society. With regard to medicines, the concept of the willingness to pay and the value of innovation are issues to be explored.
- **Transparency at many levels should be improved.** At several points in time at the conference a call for increased transparency was expressed. This regarded different issues including discounts and other “confidential” agreements and the procedures and work in technical committees.
- **Information sharing about evidence and good-practice examples was recommended to be continued.** Networks – either organized at regional level or beyond, globally – are considered as a valuable forum. The PPRI network of public pricing and reimbursement authorities was highlighted as model, and the on-going expansion beyond the European Union was appreciated.

- **The dialogue between stakeholders is seen as a learning opportunity for all.** The need and benefits from learning and understanding different perspectives was highlighted, and all stakeholders were encouraged to seek the dialogue.
- **The consumers and patients' perspective has to be taken into account.** Participants at the PPRI conference were reminded that pharmaceutical policies have to be for the benefit of all citizens, in particular vulnerable groups, and it should be ensured that their perspective is actively involved.

<sup>1</sup> Document prepared by the Conference Organizers, the WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Centre, Vienna, in consultation with the Scientific Programme Committee of the PPRI Conference and published after public consultation on the final conclusions