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National Health Insurance Company, 46, Vlaicu Pircalab str.
Medicines and Medical Devices Agency, 2/1, Korolenko str.

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

All type of medicines (Rx and OTC) authorised and included in the State Medicines Nomenclature

Bureau of Price, from Medicines and Medical Devices Agency

National Manufacturer Price Catalogue

Task: Calculation of average price of the lowest three prices of the reference countries: Romania, Greece, Bulgaria, Serbia, Croatia, Czech Republic, Slovakia, Lithuania and Hungary; generic medicine price does not exceed 75% of the original medicine; medicines price that cannot be found in the reference countries must be equal to the average of International Non-proprietary Name (INN) recorded in the Register.

Criteria: External reference pricing.

The manufacturer price of medicines is approved for a period of one year, calculated from the date of issuing the Agency order.

The price is declared by the applicant in the national currency (Moldavian lei) and foreign currency.

If there is no price information in the reference countries, the manufacturer price for medicines is compared with:

- the price in the country of origin, with a copy of the Catalogue of the prices of medicines on the pharmaceutical market of the country of origin of the medicine;
- the manufacturer's price, recorded in the National Prices Catalogue of Producer's for similar medicines according to the ATC code (anatomical-therapeutic-chemical);
- the average import price for the previous years for the given pharmaceutical product, if it was imported.

PRICING
at ex-factory
price level

OUT- PATIENT

Pricing in the out-patient sector

Medicines distributed via wholesale and pharmacy,
regressive mark-up

Purchase price (MDL)	Final margin	Wholesale mark-up	Pharmacy mark-up	For reimbursed medicines Pharmacy mark-up
0-30,00	≤40%	≤15%	≤25%	≤15%
30,01-60,00	≤32%	≤12%	≤20%	≤15%
60,01-120,00	≤26%	≤10%	≤16%	≤15%
120,01-240,00	≤21%	≤8%	≤13%	≤13%
>240,01	≤16%	≤5%	≤11%	≤11%

Annotation: The average exchange rate in May 2017:
1 EUR = 20.6037 MDL

VAT for all types of medicines: 8 %

Reimbursement in the out-patient sector Council of reimbursed medicines from compulsory health insurance funds

Task: Decision on reimbursement status and rate of International Non-proprietary Name.

Criteria: eligibility for priority diseases, efficiency, safety, pharmaco-economic criteria.

Section I

- List of medicines for sustained (long-term) treatment in ambulatory care

Reimbursed rate:

- 100% (full price);
- 50% and 70% from median retail price (from 50 community pharmacies).

87 INN for:

- Cardiovascular diseases; Digestive diseases; Endocrine diseases (inclusive Diabetes mellitus (100%); Bronchial asthma; Anaemias in pregnant women (100%); Some diseases of children up to 18 years (100%); Epilepsy (100%); Parkinson diseases (100%); Psychical diseases (100%); Some autoimmune diseases (100%); Some rare diseases (100%) etc.

Section II

- List of medicines for episodic treatment in the day hospital/day care room, procedures room and at home treatment, of diseases commonly found in the practice of family physician

Reimbursed rate:

- 100% (full price) for children up to 18 years;
- 70% from median retail price (from 50 community pharmacies).

47 INN for:

- Respiratory system diseases: Pneumonia; Chronic bronchitis; COPD, Bronchial asthma; Digestive system diseases: Chronic hepatitis; Fibrosis and liver cirrhosis; Chronic pancreatitis, Ulcerative disease; Mental diseases: Multiple sclerosis; Myelopathy; Cerebrovascular disease; Encephalopathy; Osteoarticular diseases: Rheumatoid arthritis; Reactive arthritis; Psoriatic arthritis; Gout; Back pain; Endocrine diseases: Diabetes mellitus + diabetic neuropathy; Diabetes + angiopathies; Diabetic Nephropathy; Infection diseases: Acute Respiratory Viral Infection (on children).

IN - PATIENT

Pricing in the in-patient sector

Center for Centralized Public Procurement in Health

Tendering

Price negotiation

Task: Tendering or price negotiation of medicines. Pharmacotherapeutic Committees of public health facilities and medical institutions determine the need for medicines for the planned period (the next year), taking into account the Institutional Pharmacotherapeutics Formulary, dosage, pharmaceutical form of medicines, clinical protocols approved by MoH, the amount needed to treat one patient, stocks of drugs in institutions, and provide this information to Center. In accordance with the lists of medicines, depending on the value of contracts, appointment, features of procurement and use of medicines, the Center's working group applies one of the public procurement procedures. MoH determine the necessary amount of medicines for National vertical and special Programs.

Criteria: Requirements for each batch of medicines are evaluated separately: quality, efficiency, delivery time, payment terms and price. The tender prices are benchmarked against the registered price in the National Catalogue.

VAT for all types of medicines: 8 %

Reimbursement in the in-patient sector

Institutional Pharmacotherapeutic Committees

Task: Decision on introduction of medicines in the needed for procurement list of medicines

Criteria: eligibility for diseases, efficiency, safety, cost criteria. VEN and ABC analysis.

The hospitals purchase the medicines from the winning bidder. The cost of medicines is included in the DRG price. High cost medicines are reimbursed separately by the National Health Insurance Company (surfactant, chemotherapeutics). Insulin analogues are reimbursed by MoH.

Hospital formularies

National Clinical Protocols are the basis for hospitals to develop their institutional needs for central procurement.

No co-payments for patients

Special topic: HOSPITAL MEDICINES

In some cases, hospitals are involved in the procurement of medicines with the approval of the Center for Centralized Public Procurement in Health. Hospitals are not allowed to cooperate among themselves for the purpose of procurement. The procured price of medicines are available to the public on the website: <http://capcs.md/licitatie-desfasurate/>

The main payer for medicines for the hospital sector is the National Health Insurance Company. The price of medicines are included in treated case paid by NHIC. Health Technology Assessments (HTA) is not performed in the in-patient sector in our country. The linkage between in-patient and out-patient sector at the pharmacotherapy level is organised using family physicians that should monitor the patients after hospital discharge and prescribed medicines from ambulatory reimbursement medicines list.

PRICING
at wholesale and
pharmacy price level

REIMBURSEMENT