





SLOVENIA

Recent and planned developments in pharmaceutical policies 2016 Special topic: Out-of pocket payments

D E V E	CHANGES IN PRICING No changes	CHANGES IN REIMBURSEMENT No changes
L O P M E N T	C	OTHER CHANGES No changes
S P E C I A L T O P I C	Out-patient Medicines are either on the list = reimbursed or not reimbursed at all. If prescribed medicines are reimbursed, they can be on different lists: Positive list: 100 % or 70 % covered by compulsory HI, the rest is paid by voluntary co-insurance or by patient, 1.799 medicines (458 INN). Intermediate list: 10 % covered by compulsory HI, the rest is paid by voluntary co-insurance or by patient, 933 medicines (198 INN). Exceptions: vulnerable groups (children, young people in education, low income people and patients with certain diseases): 100 % reimbursement for positive list; for socially vulnerable people the voluntary co-insurance is paid by the government. Ampulated drugs List B (91 expensive medicines separately paid to hospitals for treatment for in-patients, most of them ATC B or L). List A (30 medicines separately paid to all providers for out-patients including home treatment). Measures for all drugs Maximum allowed prices are set for prescription medicinal products (originators and generics), financed or intending for financing from public funds - List of highest recognised values. Internal reference pricing system for interchangeable drugs (ATC 5) since 2003 Reference pricing for therapeutic drug groups (clusters, ATC 4 or 3) since 2013 There is no fixed prescription fee amount in Slovenia. Medicines prescribed Over-the-counter (OTC) medicines) are not reimbursed, patients pay out-of pocket. In-patient Patients do not have to provide extra payments for medicines they receive during their in-patient stay.	