OBJECTIVES: Nowadays hospital at home (HAH) is dealing with increasing demand of treatment at home and greater commitment to promote its development. A brake identified for its growth is its funding system based on price per activity. The funding of expensive drugs is a current concern. This present study about oral anti-cancer drugs (OACC) in the Hospital at Home, Assistance Publique Hôpitaux de Paris (AP-HP) in 2014 aims to determine the ratio cost of treatment/stay per patient. RESULTS: On 2014, the AP-HP AH-stays with a treatment cost of 30% or more per stay (criteria for total funding in addition to the HAH tariffs) are estimated 17% of in AP-HP. However, the number of these stays was not available. Multivariate analysis reveals two important parameters influencing significantly the HAH ratio: male status and drug special supervision status. OBJECTIVE: To assess the prices of essential medicines for chronic diseases prevalent in the Asia Pacific region. METHODS: A secondary analysis of medicine prices data from the World Health Organization/Health Action International’s database on medicine prices, availability and affordability was undertaken in March - May 2016. Data on 18 medicines used for chronic diseases prevalent in the older population were obtained from facility-based surveys conducted between 2001 and 2013 in 11 countries, namely China, Fiji, India, Indonesia, Lao, Malaysia, Mongolia, the Philippines, Sri Lanka, Thailand and Vietnam. Prices were converted into the base year of 2015 for comparison. Patient prices were adjusted for inflation and purchasing power parity, and procurement prices for inflation and official exchange rates. Data were analysed for lowest priced generic (LPG) and innovator brand (IB) products in both public and private sectors. Outcome measures were median (range) price ratios to international reference price (RP). RESULTS: The median (range) price ratio for procurement of medicines for HA-stays were found to be highest in the Philippines [23.97 (24.104-103.43) and lowest in Malaysia [19.86 (15.69-23.46) and for IBs in Philippines [27.1 (23.42-22.73)] and lowest in India [0.36 (0.23-2.2)]. Patient price in public sector for IBs were found to be highest in the Philippines [79.13 (12.05-380.08)] and nil in Malaysia as it is provided freely. In public sector for LPGs in Philippines were [28.88 (14.19-53.93)] and nil in Malaysia and India as they are providing freely. Procurement price in private sector for IBs were found to be highest in Indonesia [150.03 (155.33-292.28)] and lowest in India [12.19 (29.78-29.78)] and for LPGs highest in the Philippines [46.21 (9.76-140.86)] and lowest in China [0.50 (6.96-14.18)]. CONCLUSIONS: Procurement price of essential medicines for chronic conditions were high in Asia Pacific Region compared to IRP, especially for IBs. Patients are paying very high prices for both IB and LPG medicines, especially in private sector.