

Substantial steps have been taken to improve the mechanism of developing the List of Reimbursement Outpatient Medicines, but further efforts will be needed to be undertaken to achieve long-lasting changes in the area of transparency, relevance of decisions, revisability and implementation.

Mechanism for introduction of outpatient medicines in the reimbursement list in the Republic of Moldova: development and challenges

✎ Rita Seicas*, Ghenadie Turcanu, Stela Bivol

CONTEXT

In the context of global commitments to ensure extensive access to safe, effective, quality and affordable medicines, the assessment identifies barriers and factors that facilitate access to reimbursed medicines in the Republic of Moldova.

OBJECTIVES

Objectives: The operational research of the national regulatory framework on developing the list of reimbursed outpatient medicines (LROM) by the mandatory health insurance funds aimed at identifying deficiencies and designing solutions for ensuring a transparent, holistic and feasible mechanism.

METHODS

1. Analysis of the regulatory framework for outpatient medicines to be included in the list of reimbursed outpatient medicines (LROM).
2. Qualitative research of the opinions and perceptions of the beneficiaries of medicines and actors of the system.

RESULTS

Mandatory health insurance implemented in the Republic of Moldova has shown to be an effective tool for improving the population's access to medicines. The LROM has evolved from 5 INN in 2005 to 148 INN in 2019. Public expenditures for LROM increased from 7403.5 thousand Moldavian lei (MDL) in 2005 to 523 859.3 thousand MDL in 2017. At the same time, the LROM did not significantly change compared to the national list of essential medicines. The first regulation on mechanism for introduction of outpatient medicines in the LROM was approved in 2010 and was revised fundamentally two times, with the most recent revision being done in 2015. The regulation was improved evidently, however, it is in need of further revision to: (1) improve transparency in establishing priorities for reimbursement; (2) re-introduce mandatory the cost-effectiveness criteria and budget impact analysis; (3) develop guidelines to enhance coherence and justifications of the process; (4) involve multidisciplinary expert teams^{[2][3]}. Qualitative research highlighted that access to LROM is perceived differently by different categories of population and actors of the system.

Pathway of the application for approval of medicines for reimbursement by the Mandatory Health Insurance in Republic of Moldova

