



Together Working to Improve Access to Medicines: Analysis of Cross-country Collaborations in Europe

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Conflicts of interest

- Commissioned by the World Health Organization (WHO), Regional Office for Europe
- No personal conflicts related to this topic



Background

- Recently, **cross-country collaborations** of governments in the area of access to medicines have been **established** in Europe
- Cooperation on **pricing, procurement and reimbursement policies.**

Southern EU states present unified front in drug talks

By Sarantis Michalopoulos | EURACTIV.com

10. Mai 2017



EURACTIV

Acumen public a
BCEP. The Intern



By Getty

Belgium, Netherlands team up to take on pharma over prices

Until now pricing was almost exclusively negotiated between one country and company.

By PETER O'DONNELL | 4/21/15, 1:56 PM CET | Updated 4/22/15, 12:54 PM CET



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Farmaco-epidemiologie & Klinische Farmacologie

Objectives

- To **identify and assess cross-country collaboration** initiatives to improve access to medicines
 - To **identify** and describe existing cross-country collaborations including their motivations and objectives
 - To **identify facilitating and challenging** factors for cross-country collaborations



Methods

- Literature/document **review** (March-May 2018)
- **Selection** of initiatives (June 2018)
 - That fulfilled in- and exclusion criteria → 5 collaborations
- Semi-structured **interviews** (July-November 2018)
 - Interview guide, informed consent
 - A total of 19 interviews with 26 people
 - Draft working paper was sent for validation









Included collaborations

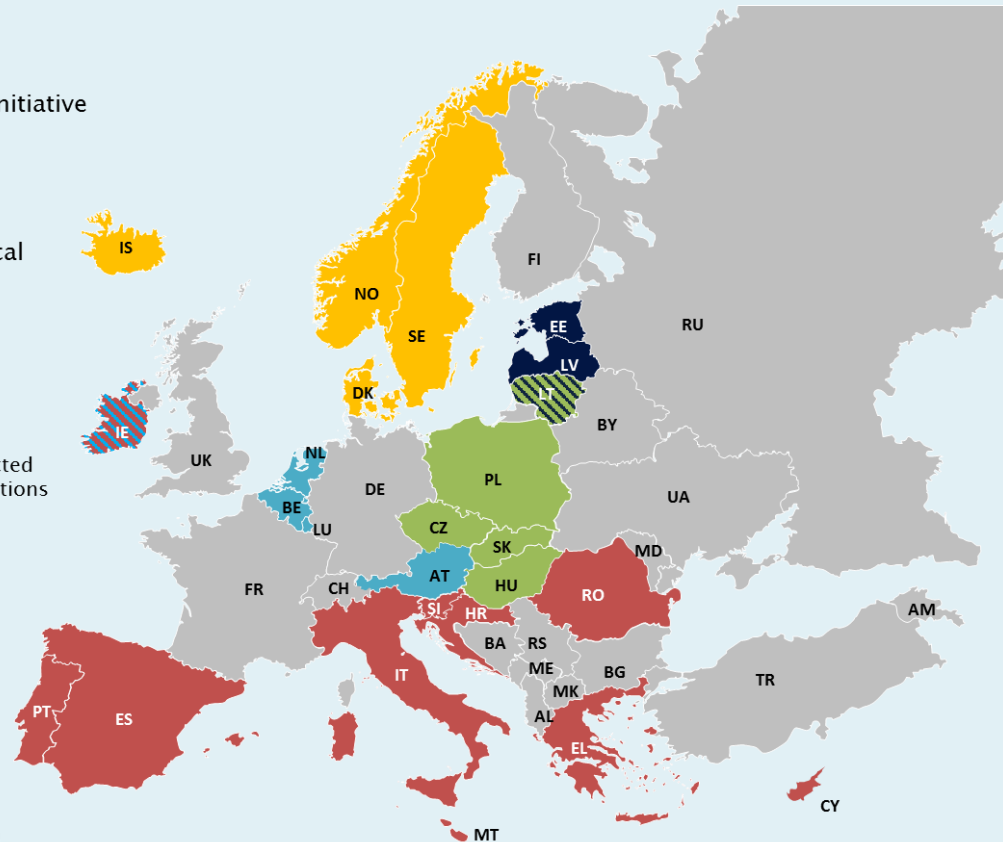
Collaboration	Objectives / Key activities	Start
Baltic Procurement Initiative	Procurement of vaccines Lending of medicines	2010 (Task Force), 2012 (partnership agreement)
Beneluxa initiative	Horizon scanning, HTA, Information sharing, P+R (negotiations)	2015 (BE, NL, LU), 2016 (AT), 2018 (IE)
Nordic Pharmaceutical Forum	Horizon scanning, joint procurement	2015
Valletta Declaration	Horizon scanning, exchange of information, joint assessment, negotiations	2017
Visegrad *	HTA, joint negotiations	2017

* Also known as FAAP (Fair and Affordable Pricing)



Included collaborations

-  Baltic Procurement Initiative
-  Beneluxa Initiative
-  Nordic Pharmaceutical Forum
-  Valetta Declaration
-  Visegrad *
-  No participation in selected cross-country collaborations



Comments:
Ireland is part of two collaborations, the Beneluxa initiative and the Valetta Declaration
Lithuania is part of two collaborations, the Baltic Procurement initiative and Visegrad

Source: Data collection of the WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Policies, Vienna, and the WHO Collaborating Centre for Pharmaceutical Policy and Regulation, Utrecht.



Initiation

- One country that led the initiative
 - Political initiative
 - Driven bottom-up by technical experts
 - Informal networks/ technical collaboration were already occurring within the countries
- Usually official documents (E.g. partnership agreement, MoU)
- Some countries are in more than one collaboration



Decision making

- Consensus-based
- Activities performed in accordance with the national laws and regulations
- Governing principles are followed: accountability, confidentiality, conflict of interests
- Level of political engagement varies across collaboration



Resources

- Major difficulty to assess the resources
- At least 2-4 people per country part time involved in collaboration activities
- No allocated budget (as it is not a formal collaboration based on an international treaty)



Communication

Internal communication

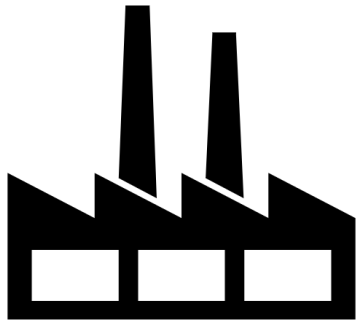
- Virtual form of communication
- Most have set regular meeting schedules
- These may vary from every 3 months to every 6 months

External communication

- Varies
 - No external communication though view it to be important
 - National press activities (based on joint PR)
 - Collaborations frequently invited to meetings
 - One: Collaboration website and social media like Twitter
- Communication to the outside world is perceived as challenge



Stakeholder reactions



Negative
Reluctant to
enter into joint
negotiations



Supportive
If aware



Partially not known
Expectation of access
to medicines within
short time
Patients might not be
aware



Successful

- All unanimous that the collaborations are successful:
 - Difficult to measure the results of collaboration so far, but worth the effort
 - A move in the right direction → too early to have “tangible successes”
 - Early benefits of the collaboration (information exchange and initiation of some assessments)
- Monitoring and evaluation
 - Process indicators
 - “Tangible successes”
 - Mixed positions on indicators



Facilitators and Challenges

Facilitating factors	Challenges
Trust between persons involved	Difference in language hinders communication
Experts know each other	Legal barriers
Political support and commitment	Lack of available resources
Information technology	Having concrete results
Determine common spoken language	Secure interest and willingness of the industry
Existing similarities in health systems	Balance between confidentiality and transparency
Strong coordination and leadership from one of the participating countries	



Conclusions

- Importance of political commitment
- High expectations within collaboration and pressure from “outside”
- Need to produce “tangible results”
- Information and experience sharing is (considered) key
- Processes take time
- Collaboration requires (time) resources
- Monitoring and evaluation processes should be planned in
- Communication is a challenge (language issue)



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Questions

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