



# DVSV Code of Reimbursement (EKO) – Austrian Social Insurance

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24 April 2024

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# Overview - Austrian Social Insurance Dachverband der österreichischen Sozialversicherungen (DVSV)

**DVSV** = Strategic and coordinating entity of health insurance, pension funds and workers' compensation board

Department of pharmaceutical affairs (**VPM**) responsible for the „Code of Reimbursement“  
**EKO - positive list including all pharmaceuticals regularly reimbursed in the outpatient sector**

- Multidisciplinary department of pharmacists, pharmacologists, physicians, economists, data analysts and legal officers Assessment
- Assessment / Pricing / price negotiations
- Reimbursement decisions based on appraisal (by Drug Evaluation Committee)
- Shaping pharmaceutical Strategy, providing policy advice and expertise, monitoring and forecasting expenditures



## Infotool zum Erstattungskodex

Bitte geben Sie den gewünschten Suchbegriff mit mind. 4 Zeichen (Suche nach Arztespezialität oder Wirkstoffname),  
3 Zeichen (Suche nach Indikations-/Regeltext) bzw. dem ersten Zeichen (Suche nach ATC-Code) ein.

Suche nach Arztespezialitäten	Trefferliste
Arztespezialität* <input type="text"/>	<ul style="list-style-type: none"><li>1 Gastroloc "Hexal" 20 mg magensaftresistente</li><li>1 Gastroloc "Hexal" 20 mg magensaftresistente</li><li>1 Gastroloc "Hexal" 40 mg magensaftresistente</li><li>1 Gastroloc "Hexal" 40 mg magensaftresistente</li><li>1 Gastrozol 20 mg magensaftresistente Tabl. 1</li><li>1 Gastrozol 20 mg magensaftresistente Tabl. 2</li><li>1 Gastrozol 20 mg magensaftresistente Tabl. 3</li></ul>
Indikations-/Regeltext* <input type="text"/>	
Suche nach Wirkstoff	
Wirkstoffname* <input type="text" value="Pantoprazol"/>	
ATC-Code* <input type="text"/>	



<https://www.sozialversicherung.at/oeko/views/index.xhtml>

# EKO – Code of Reimbursement (1)

## Green Box

Medicines qualifying for “automatic” reimbursement,  
broad use

No prior approval needed

Some products with restrictions (e.g indication)

## “Dark“/“Light“Yellow Box

Medicines with substantial added therapeutic benefit with high costs / budget impact

Reimbursed at defined criteria after prior approval  
by chief medical officers

Medicines reimbursable at defined criteria BUT ex-  
post control (documentation) by chief medical  
officers possible

## Red Box

When application is filed, Medicine is included  
temporary category  
exceptional reimbursement after prior approval by  
chief medical officers

## Medicines outside EKO („No Box“)

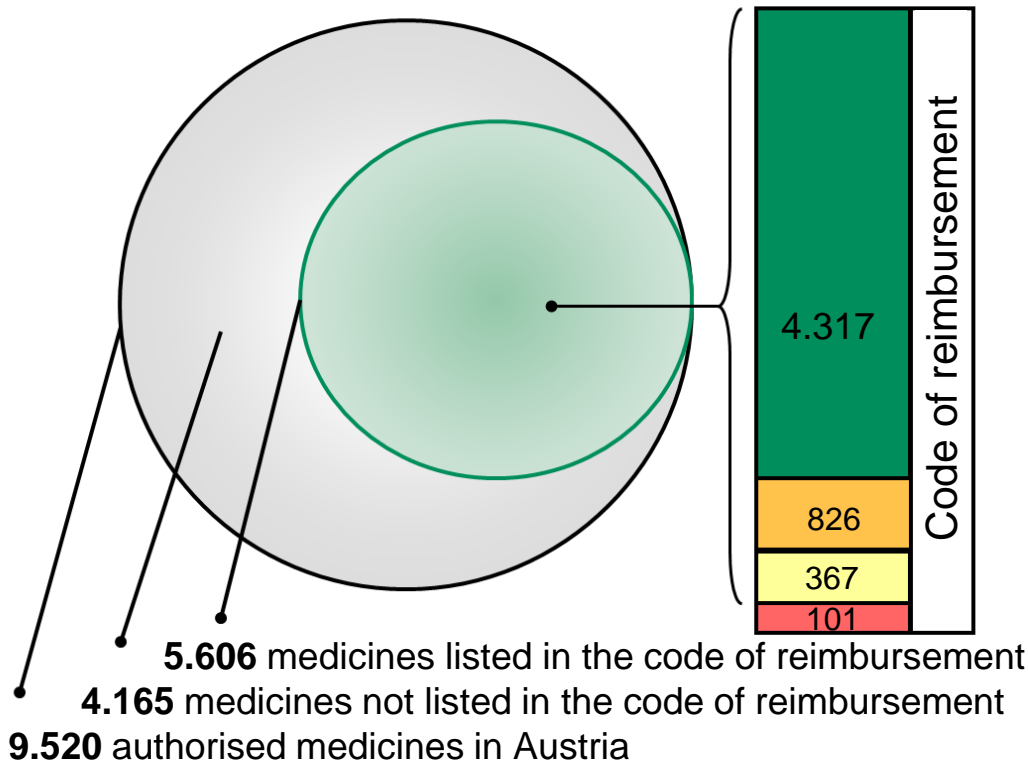
- no EKO application
- negative reimbursement decision

reimbursable only in justified exceptional cases after prior approval by chief medical officers

## Principally not reimbursable medicines

- Hospital
- Cosmetics
- Homeopathic medicines
- etc.

# EKO – Code of reimbursement (2)



Sozialversicherung: Ihr Partner für Gesundheit, Sicherheit und Pension

## Erstattungskodex - EKO

Stand 1. Jänner 2024

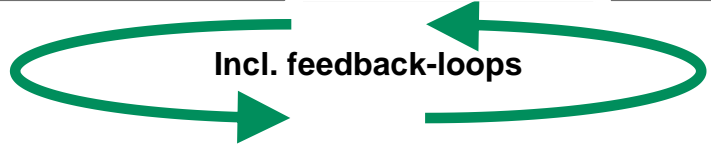
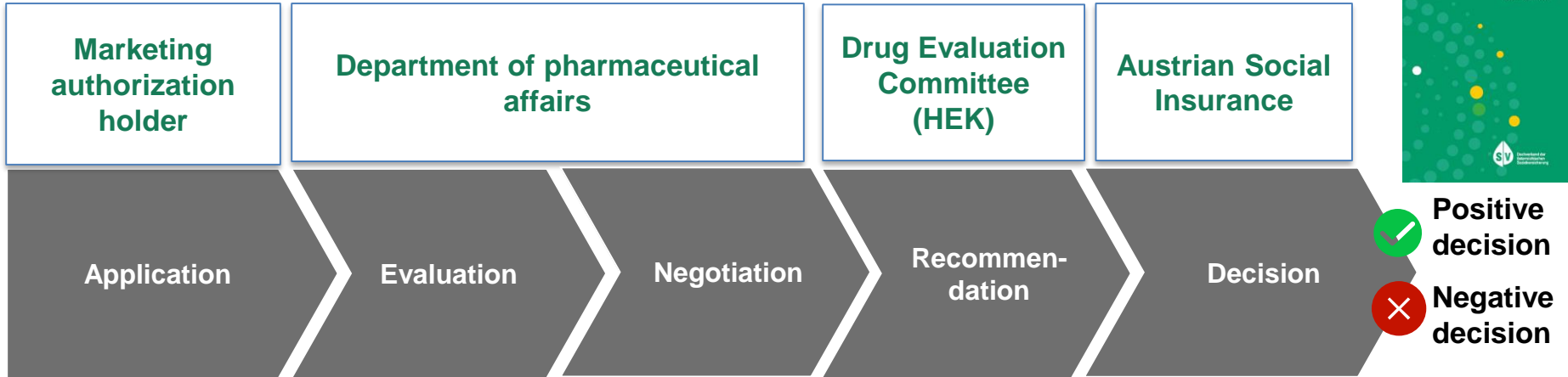
- **Authorised, eligible for reimbursement and reliably available medicines**
- **Therapeutic effect and benefit for patients according to current state of science**

SV Dachverband der österreichischen Sozialversicherungen

- Medicines without benefits for patients should not be prescribed or reimbursed, regardless of the price
- Doctors should be able to prescribe even the most expensive medicines, if necessary

Source: EKO Basisdatenbank (1.1.2024); different package sizes of one strength can count as reimbursed and not reimbursed

# Proceedings for inclusion in EKO\*



Start of procedure after submission by MAH

- 1. Pharmacologic
- 2. Medical-therapeutic
- 3. Economic evaluation

- Negotiations on
- 1. Criteria for use
  - 2. Price (incl. MEAs)

Recommendation based on assessment

Decision based on recommendation of drug evaluation committee

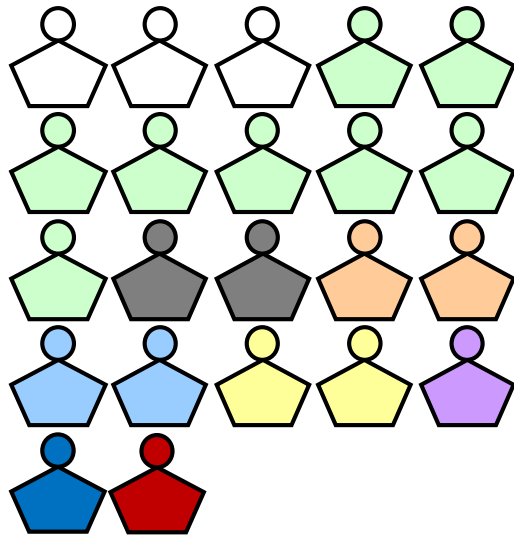
*Inclusion in Red Box*

Duration: **max. 180 days** [price increases max. 90 days]

*Decision by DVSV*

\*based on: ASVG, Verfahrensordnung zur Herausgabe des Erstattungskodex, Geschäftsordnung der Heilmittel-Evaluierungs-Kommission, Transparency 4 directive (89/105/EWG)

# Drug Evaluation Committee (HEK)



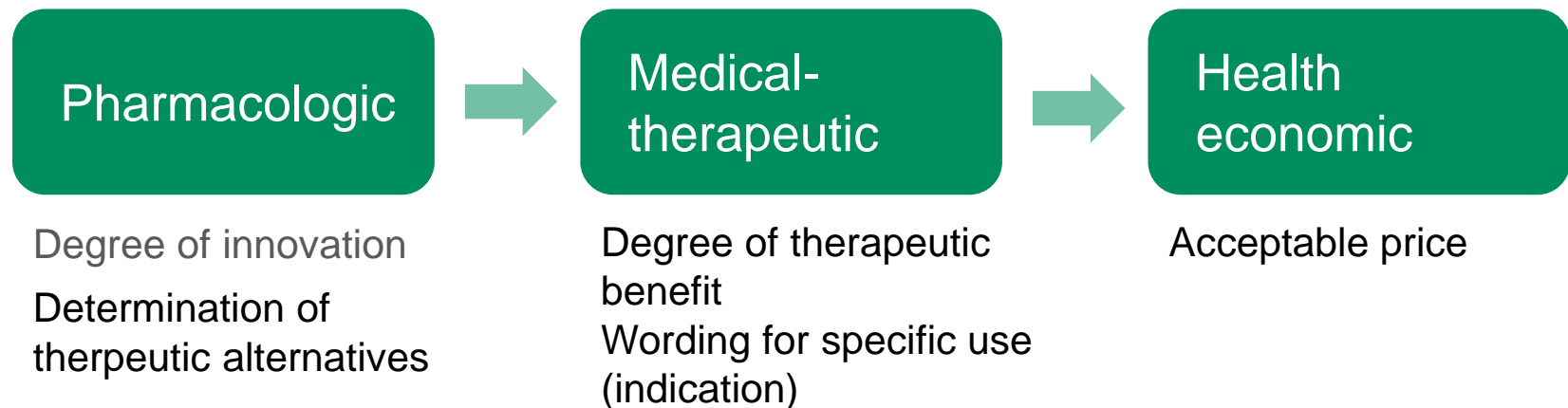
- Independent science representatives
- Representatives of the Social Insurance System
- Representatives of Austrian Federal Office for Safety in Health Care
- Representatives of the Austrian Chamber of Commerce
- Representatives of the Federal Labour Board
- Representatives of the Austrian Medical Association
- Representative of the Austrian Chamber of Pharmacists
- Representative of the Federal States
- Patient advocacy representative

- advisory body consisting of several federations
- supports the DVSV in the decision making concerning the inclusion of drugs into the EKO
- 22 members / 20 voting members
- majority decisions

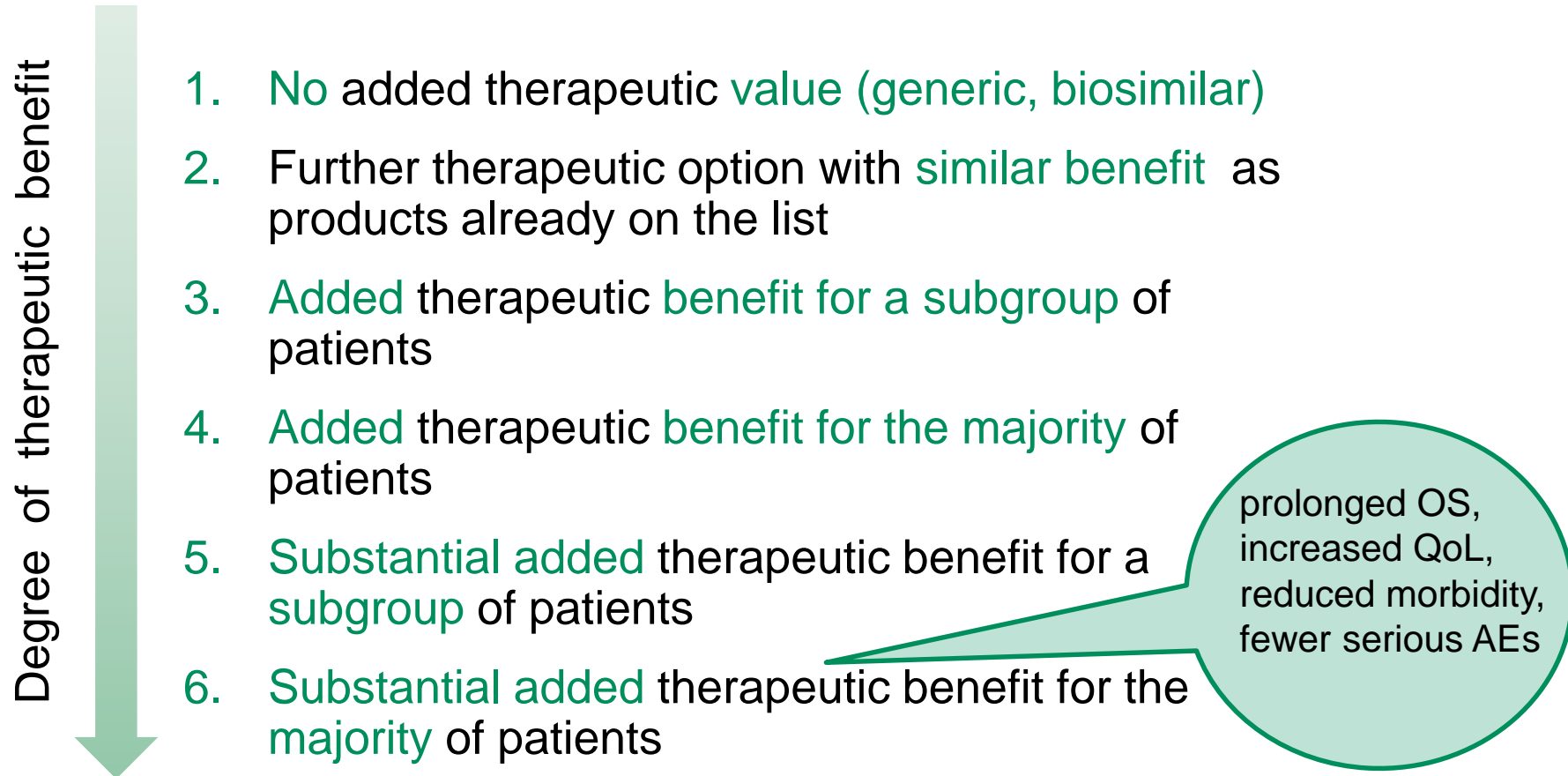
# Principles of Evaluation

- Evaluation is based on **published clinical data**
- Pharmaceuticals are evaluated for their therapeutic value
  - in the licensed indication
  - in comparison to all available alternatives
- new pharmaceutical to be listed must provide **additional benefit**: therapeutic, economic or both

## Three stage evaluation



## Medical evaluation – Degree of therapeutic benefit for patients





# Benefit - Price Matrix

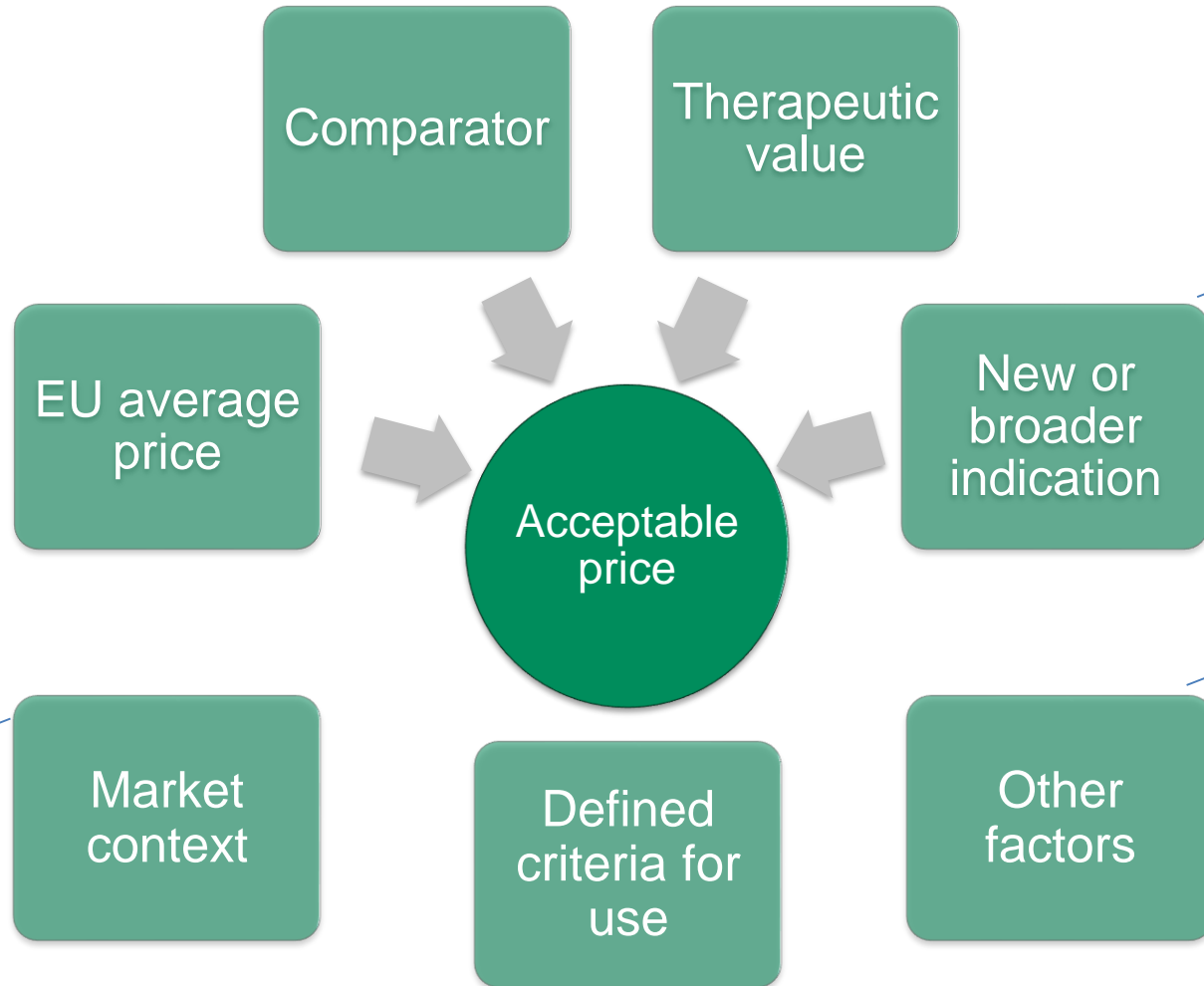
Therapeutic benefit	Number of patients	Price compared to comparator drug in EKO	
Substantial added benefit	Majority (Z6)	higher => pharmacoeconomic study required to show positive „cost-benefit“ ratio	
	Subgroup (Z5)		
Minor added benefit	Majority (Z4)	max. + 10%	
	Subgroup (Z3)	max. + 5%	
Equal or similar benefit	(Z2)	min. -10%	
Subsequent products with same active ingredients	(Z1)	<b>Deductions for generics/biosimilars</b>	
		1st	min. -50/38%
		2nd	min. -18/15%
		3rd	min. -15/10%
	further	min. - € 0,10	

*Pharmacoeconomic study is mandatory if no comparator is listed in the EKO*

## Substantial added therapeutic benefit:

- Reimbursement can be accepted if the „cost-benefit“ ratio is meaningful and justified. This needs to be demonstrated by the company with a pharmaco-economic study (=CEA, CUA, CBA, CMA...)
- No explicit ICER per QALY threshold
- Submitted by company
- ISPOR checklist (full appraisal) => credibility and relevance

# Determination of the Price



price reduction in relation to market extension

burden of disease UMN

- market size
- competition
- no. of providers
- budget impact

# Consequences of negative decision

- **No inclusion into EKO** but every pharmaceutical has to be paid for by social health insurances if deemed necessary on a case-by-case basis and prior approval by the chief medical officer („no box“)
- **Litigation / court**
- **New attempt**



Thank you for your interest