Israel

Recent and planned developments in pharmaceutical policies 2025

CHANGES IN PRICING

Israel sets maximum prices for **all listed drugs**: Prescription drugs, OTC (over the counter) and GSL(general sale list), whether the drug is reimbursed or not (health basket).

In 2024/25 There aren't changes in the medicines pricing model.

On January 1, 2025 the vat rate was adjusted from 17 to 18% (this rate is unique and applies to all services and goods).

CHANGES IN REIMBURSEMENT

•The co-payment amount for all health funds was updated to 23.5 NIS for low-cost medications, whose price is determined according to a price list rather than a percentage-based co-payment (15% of authorized retail price for original drug, 10 % for generic drug) .
•The quarterly chronic ceiling was expanded to include all recipients of social security income support, not just those of retirement age.
•The quarterly co-payment amount was reduced by 50 NIS.
•A separate ceiling was set for fertility medications, for all active medications, not only for products like Pergonal.
•The co-payment for complex nursing hospitalization was reduced by 10 NIS per day of hospitalization.
p.s: All amounts are still not final, as the order has not yet been signed, and changes are still under discussion.

OTHER CHANGES

The Medical Information Portability Law, approved in July 2024, is designed to regulate the right of every individual to transfer their medical information between different healthcare organizations. The law mandates that healthcare organizations adopt the FHIR standard to facilitate information sharing and enable service providers to derive insights from the information. For example, a service provider will be able to utilize decision support tools that examine drug interactions, based on all prescriptions the patient has received from various organizations. Additionally, the law allows patients themselves to view all of their medical information." The deadline set by law is July 2027.

SPECIAL TOPIC:

In recent years, applications have been submitted each year for over 900 different medical technologies (including drugs, medical devices and equipment, procedures, etc.).

In the next stage, a health technology assessment (HTA) is conducted for each of the submitted applications. The HTA process is carried out by the Technology and Infrastructure Administration in the Ministry of Health, with the assistance of additional professional entities in the Ministry of Health and outside it. The HTA encompasses a clinical evaluation based on efficacy and safety using the Evidence-based Medicine approach, an epidemiological evaluation of the patient population and a needs assessment, a review of existing experience in using the technology ", a budget impact assessment, and assessment of additional aspects such as social and legal aspects. In addition, professional opinions regarding the technologies under consideration for inclusion in the basket are collected from leading experts in the various fields of medicine, based on the characteristics of the technology. .

At the end of the HTA process and the incorporation of expert opinions, the completed assessments are presented to the National Health Basket Committee for its deliberations. The Committee's deliberations last several months each year. This public committee is composed of physicians, health economists, public representatives, and representatives from all Health Maintenance Organizations (HMOs/insurers), the Ministry of Health (MOH), and the Ministry of Finance (MOF).

The Basket Committee conducts thorough deliberations on all submitted applications, examining each technology comprehensively based on professional documentation provided.. Committee members review extensive scientific and medical materials, and when necessary, consult with relevant field experts through specialized subcommittees.

After completing its deliberations, the committee typically establishes a hierarchical ranking system, categorizing technologies as "high importance" and various levels of lower importance. Within each category, the committee further ranks the requested medical technologies. The committee's ranking decisions incorporate multiple considerations, including: therapeutic efficacy; disease prevention potential; life-saving capabilities; extension of life expectancy and quality-of-life impacts; availability and effectiveness of alternative treatments; domestic and international clinical experience with the technology; economic implications at both individual and national levels; and the anticipated short-term and long-term benefits of including the technology in the healthcare basket.