LITHUANIA

Recent and Planned Developments in Pharmaceutical Policy 2025/2026

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CHANGES IN PRICING

Monitoring of pricing rules: As of January 2025, criteria for monitoring the impact of reimbursed medicine pricing on availability and costs are in force and guide future pricing rule changes.

Monitoring of medicines prices changes: Since March 2026, a statistical study analyses price trends of **non-reimbursable** and **non-prescription medicines**, providing insights into annual changes and supporting evidence-based pharmaceutical policy.

CHANGES IN REIMBURSEMENT

Better Access to food for special medical purposes: From September 2025, enteral nutrition formulas reimbursed at **100% of the base price** level,

Faster HTA assessment: From May 2025, changes to reimbursement listing procedures allow **waiving pharmacoeconomic assessment** when (1) added medicines show no meaningful clinical advantage or (2) have negligible budget impact.
These changes allow approximately 30 percent of all annual applications to be assessed more quickly.

Faster reimbursement of generics and biosimilars: From April 2026, generics and biosimilars follow a simplified process for adding new active substances to reimbursement lists, enabling faster decisions.

OTHER CHANGES

E-Health Mobile app: Operational since 2025, it provides easy access to key health information, including appointments, visit history, e-prescriptions, and medical certificates.

Statistical study on pharmacy goods: From November 2025, detailed pharmacy sales data are published, covering prescription medicines, OTC medicines, medical devices, food supplements, and other goods.

Educational campaigns for patients: In 2025**,** the Ministry of Health launched a series of lectures in libraries across Lithuania on the **rational use of medicines**, with more than 1,000 patients participating nationwide.

E-prescription functionalities: From November 2025, e-health updates introduce **partial dispensing**, **flexible use of active substances** during shortages, and **"as needed" prescriptions** valid up to six months. The system separates prescribing from clinical records, allows edits by doctors and pharmacists, and adds real-time supply and reimbursement updates, including e-dispensing for paper prescriptions.

Monitoring of medicines shortages: As of April 2026, data on causes and scale of **supply disruptions** are published, along with detailed information on medicine stock levels and the wholesalers holding them.

SPECIAL TOPIC: Regulation, Pricing and Reimbursement of Combination Medicinal Products

Combination medicinal product – a medicinal product that contains two or more active substances that can be used separately in other medicinal products.

The active substances of the combination medicinal product are already reimbursed separately *(e.g. statin+ezetimib)*	**No HTA requirement** **Price-link requirement** *The reimbursable price of a combination product cannot exceed the total price of its individual active substances purchased separately.* **Co-payment compliance requirement** *The co-payment for a combination product cannot exceed the maximum per active substance multiplied by the number of substances in the product.*
One of the active substances within the Combination medicinal product is not reimbursed separately *(e.g. tramadol+paracetamol (OTC))*	**Full HTA process applies** **Standard pricing and co-payment rules apply** The product's price setting, reimbursable price determination and patient co-payment are governed by the same requirements as any standard reimbursable medicine.
Different active substances that are used for the same indication (not as combination medicinal product) (e.g. *enkorafenib use with cetuximab for metastatic colon cancer with BRAF V600 mutation)*	**Full HTA process applies** **Standard pricing and co-payment rules apply** **MEA for all active substances**