Gesundheit Österreich GmbH

Summary and Highlights

PPRI Network Meeting, Lisbon, 8-9 April 2025

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PPRI Secretariat
WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Policies
Pharmacoeconomics Department
Gesundheit Österreich (GÖG/Austrian National Public Health Institute)

WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Policies

PPRI Pharmaceutical Pricing and Reimbursement Information

Vienna, May 2025

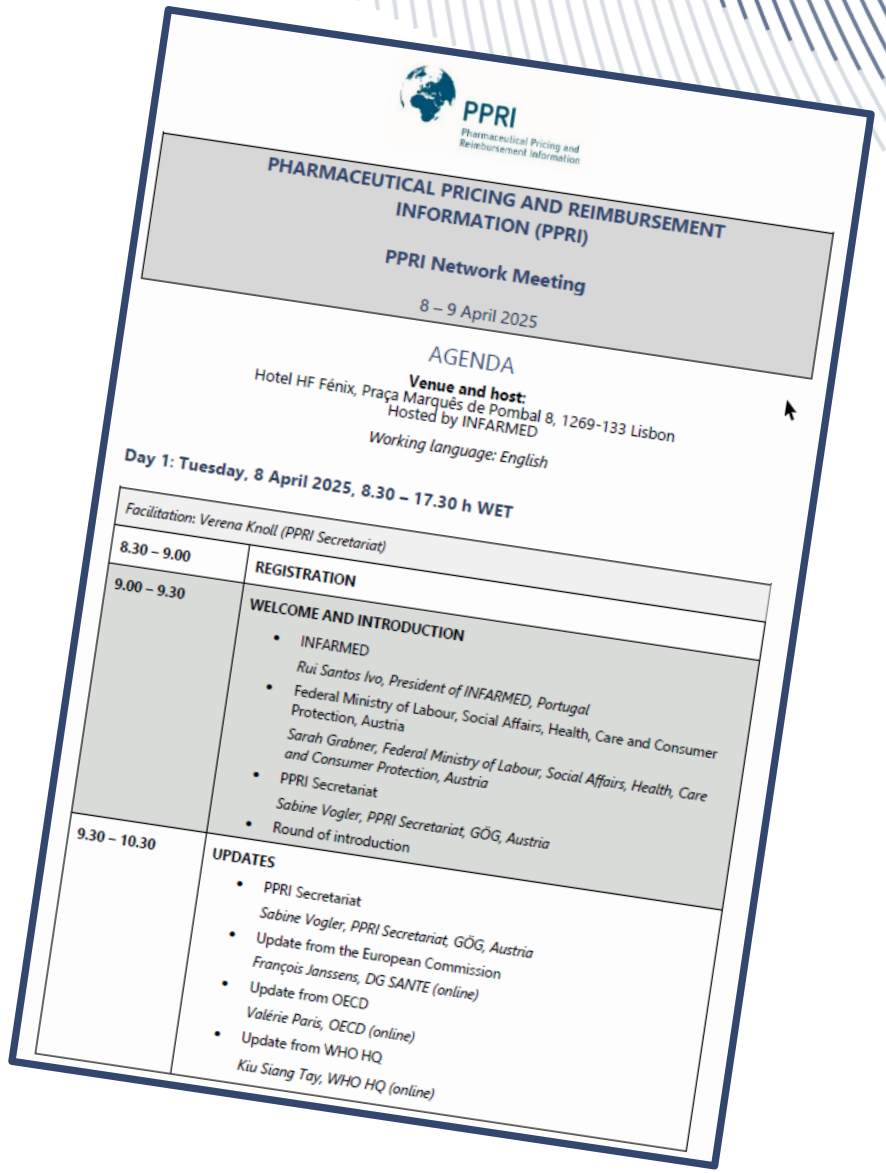
Agenda

Day 1

- Welcome words
- PPRI updates
- Country poster sessions
- Group sessions & PPRI Network Queries
- Newcomer session

Day 2

- Hot potato session
- Pharmaceutical policy and impacts in Portugal
- Implementing pharmaceutical policies: What works?
- De-funding in pharmaceutical policy: Communicating unpopular decisions



PPRI
Pharmaceutical Pricing and Reimbursement Information

PHARMACEUTICAL PRICING AND REIMBURSEMENT INFORMATION (PPRI)

PPRI Network Meeting

8 – 9 April 2025

AGENDA

Venue and host:
Hotel HF Fénix, Praça Marquês de Pombal 8, 1269-133 Lisbon
Hosted by INFARMED

Working language: English

Day 1: Tuesday, 8 April 2025, 8.30 – 17.30 h WET

Facilitation: Verena Knoll (PPRI Secretariat)

8.30 – 9.00	**REGISTRATION**
9.00 – 9.30	**WELCOME AND INTRODUCTION** • INFARMED *Rui Santos Ivo, President of INFARMED, Portugal* • Federal Ministry of Labour, Social Affairs, Health, Care and Consumer Protection, Austria *Sarah Grabner, Federal Ministry of Labour, Social Affairs, Health, Care and Consumer Protection, Austria* • PPRI Secretariat *Sabine Vogler, PPRI Secretariat, GÖG, Austria* • Round of introduction
9.30 – 10.30	**UPDATES** • PPRI Secretariat *Sabine Vogler, PPRI Secretariat, GÖG, Austria* • Update from the European Commission *François Janssens, DG SANTE (online)* • Update from OECD *Valérie Paris, OECD (online)* • Update from WHO HQ *Kiu Siang Tay, WHO HQ (online)*

Highlights

72 participants
from
28 countries

Photo credits: Infarmed / GÖG

Thank you to our colleagues at **Infarmed** for hosting this meeting!

Highlights

Welcome words by **Rui Santos Ivo**, President of INFARMED, Portugal
and
Sarah Grabner, Austrian Federal Ministry of Labour, Social Affairs, Health, Care and Consumer Protection

Photo credits: Infarmed / GÖG

3 interactive sessions
24 country posters

Day 1 – PPRI Updates

PPRI Secretariat gave a short overview of the PPRI Network, its membership, goals and activities.

Summary

- PPRI is a members-based network
- Membership limited to competent authorities; currently 50 countries; over 200 people as members
- Membership rules might need to adapt due to high influx of new members → Stay tuned ☺
- PPRI celebrates its 20th anniversary on 16 September 2025 in Vienna

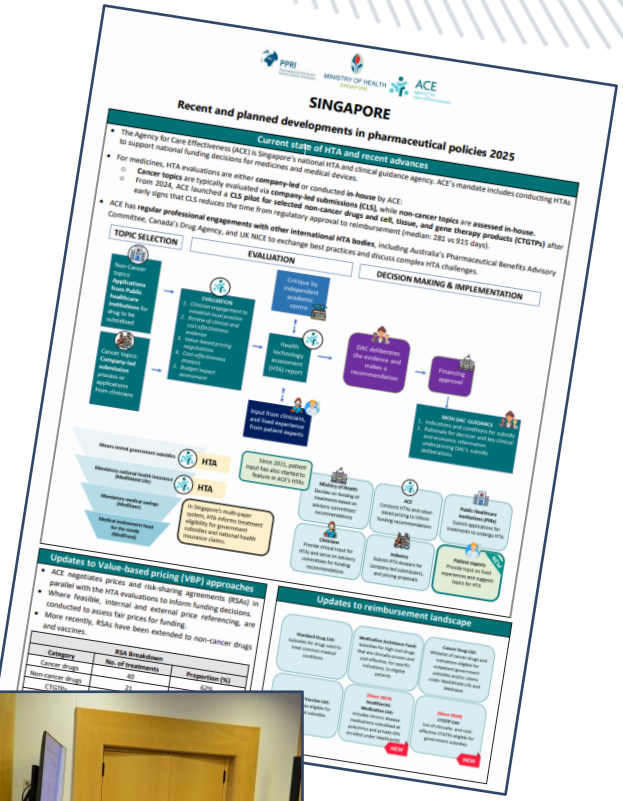
PPRI Secretariat contact details (also for questions related to membership)

PPRI team @ GÖG
Stubenring 6
1010 Vienna, Austria

E-Mail: ppri@goeg.at
https://ppri.goeg.at

Day 1 – Presentation of PPRI country posters

- Posters on recent and planned developments in pharmaceutical policies in 2024/2025
- **Special topic:** Current advances in HTA (for EU Member States: Implications from the EU-HTA Regulation)
- Country posters can be accessed on the public PPRI website: https://ppri.goeg.at/ppri_posters



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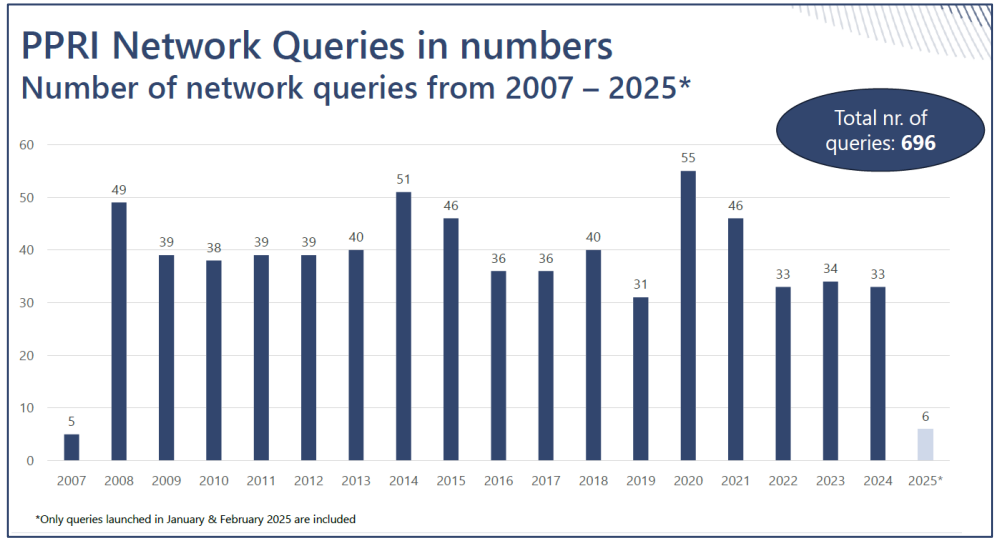
Day 1 – PPRI Network Queries

Statistics on PPRI Network Queries were presented

- Since 2007: **696 queries** launched
- Number of responses per query varies among members.
- Leading countries: **Sweden, Malta, Austria & Switzerland**



Two members provided insights into PPRI Query compilations

- Query on the pricing & reimbursement of **Casgevy** (Sarah Grabner, AT)
- Query on the reimbursement of **Epinephrine (Epipen)** (Damien Byrne, IE)

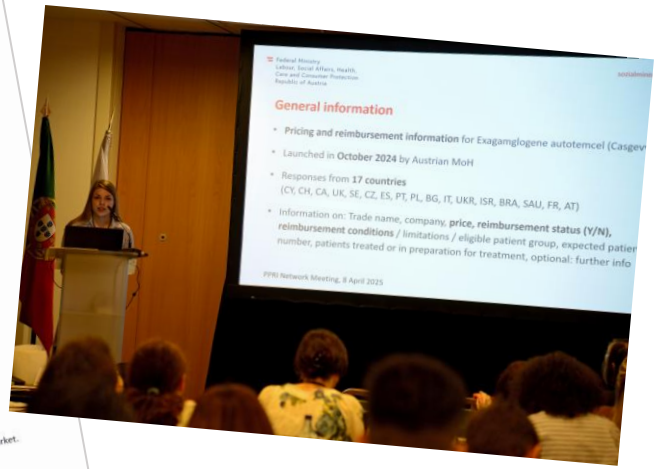

Ireland Query: Reimbursement of epinephrine (Epipen®) autoinjector

Purpose of the query:
- To ascertain reimbursement prices of epinephrine auto-injector (Epipen®) in other jurisdictions and any reimbursement controls/validations in place
- Application for a price increase received from supplier (Viatris) for adult and paediatric presentations
- 50% uplift in PTW requested, Budget impact of €850,000, €1.2 million across all brands of epinephrine autoinjectors
- Essential medicine – emergency medicine used in anaphylaxis
- Stock also held by community pharmacy contractors for vaccination services where ampoules are not available
- 3 alternative product portfolios available – Viatris brand 55% market share
- Shortages previously in this area – potential interruption of supply to the Irish market

Number of answers received:
- 11 countries responded

Results of PPRI query:
- 8 countries - higher unit prices than ROI
- 2 countries - marginally lower unit prices than ROI
- 1 country - not reimbursed
- 1 country – limitations on number of auto injectors per dispensing
- 1 country – reimbursable under certain conditions. Continuations of treatment only with documentation of the allergy

Possible impact:
- Provided contextual information to support national decision making.
- Price increase request approved for the totality of the epinephrine market.



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Day 2 – Hot potato session

Health Policy
Volume 157, July 2025, 105317

Early access to medicines with added therapeutic value: Measuring and comparing time to medicines access in England, France, Germany, Italy and Spain ☆

Sophie Delcroix-Lopes [a], Nadia Amer [b], Christophe Chaignot [a], Charlotte Pelletan [a]

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Highlights

- Early access schemes offer patient access to medicines before marketing authorization.
- Early access schemes are primarily used in countries with longer access times.
- Taking into account early access schemes abridges access times to new medicines.
- They also tend to delay negotiations within the standard procedure.
- Existing studies documenting time to medicines access usually neglect early access schemes.

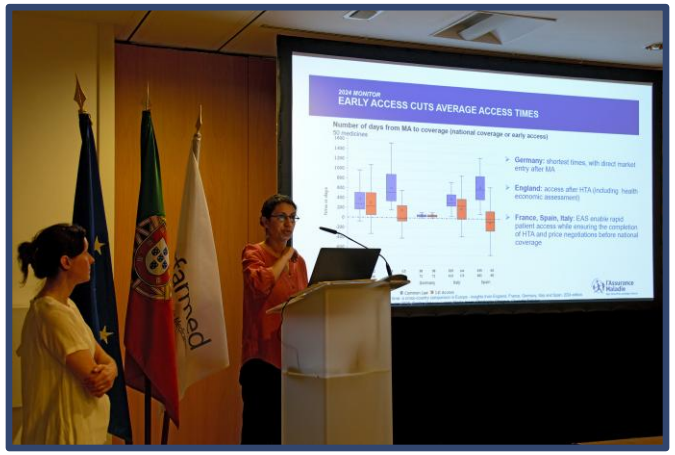
Published after the PPRI network meeting: https://www.sciencedirect.com/science/article/pii/S0168851025000739

Topic: Early Access Schemes

(Session run by Sophie Lopes & Nadia Amer, CNAM, France)

Sophie and Nadia presented the results of a country study they conducted of EAS in England, France, Germany, Italy and Spain:

- Early access schemes: usually narrow indication scope
- EAS in most countries granted before marketing authorisation (MA)
- Early access cuts average access times
- France EAS experience: negotiation times are longer if a medicine has EA
- UK: Pharma-sponsored EA



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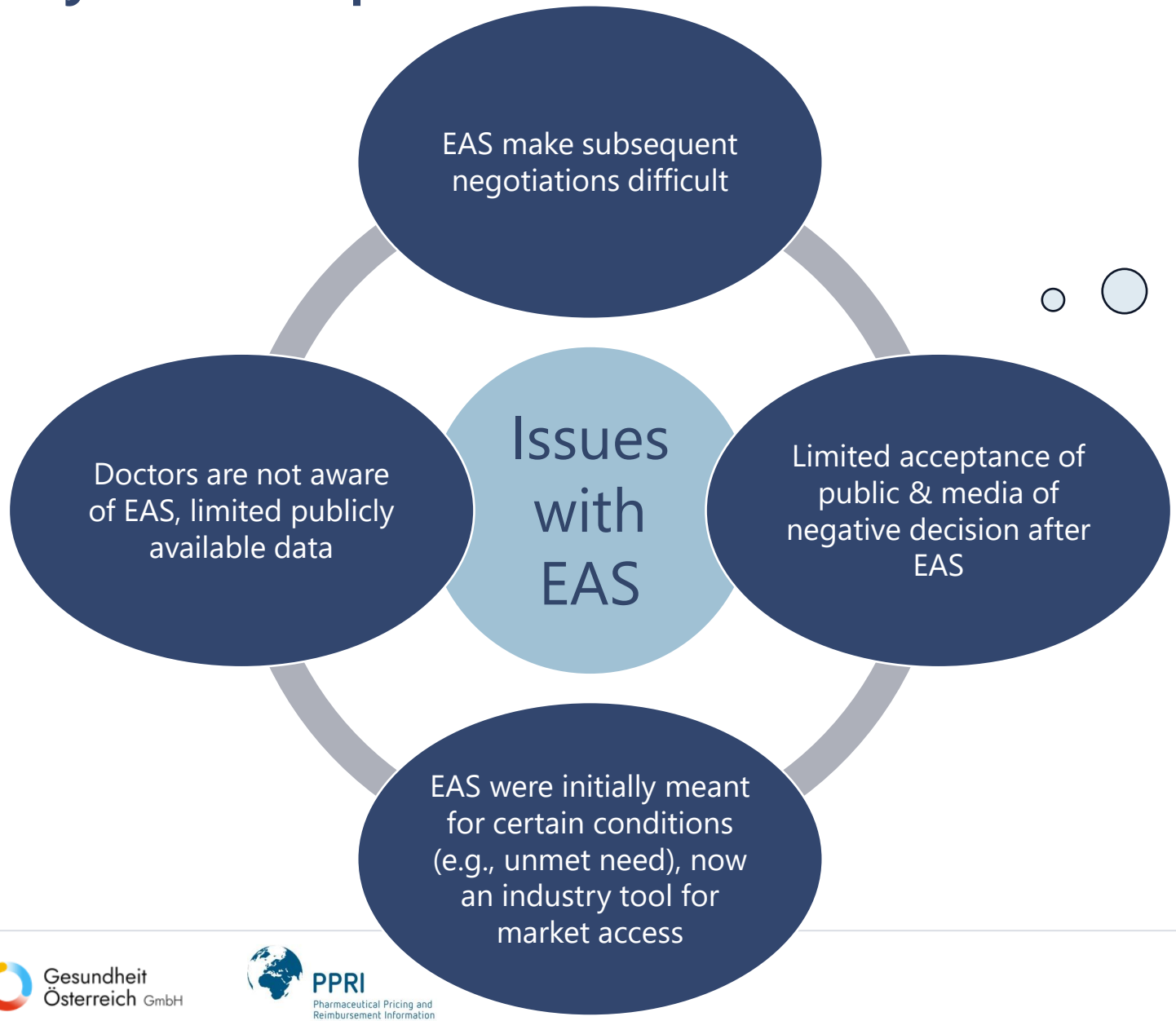
Day 2 – Hot potato session



Measuring the performance of authorities through "access" – a good approach?

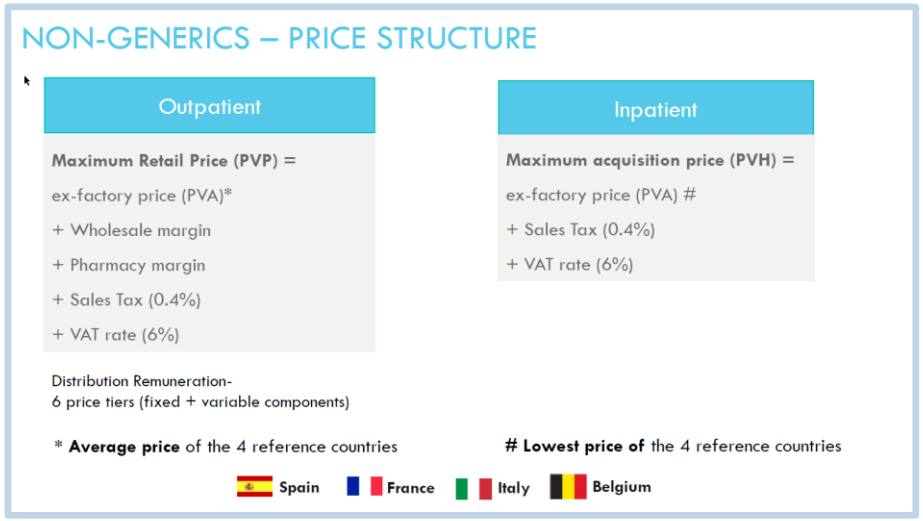
Day 2 – Pharmaceutical Policy and Impacts in Portugal

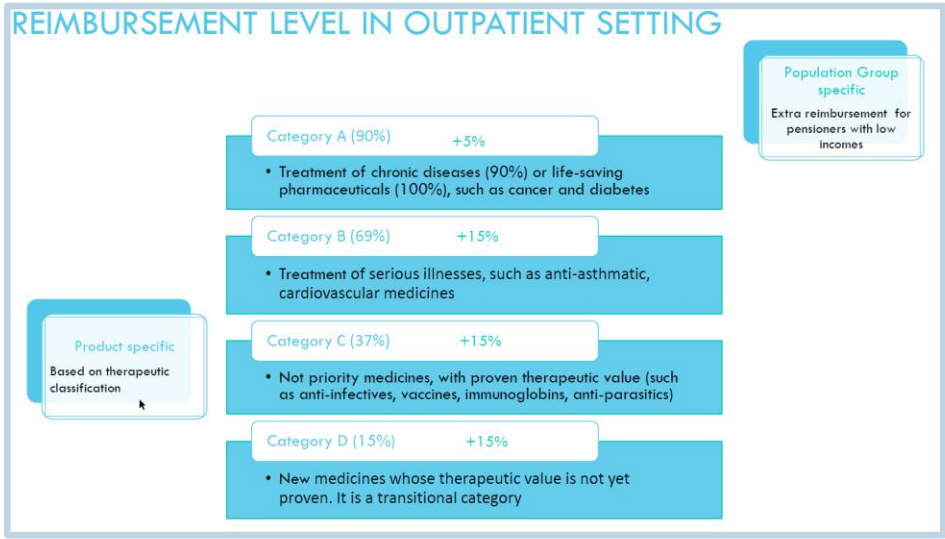
The Portuguese Pharmaceutical System: Structure and Challenges (Sónia Caldeira, INFARMED)

- PT: prices are considered to be low, in annual price review there is an option to increase price
- P+R policies support accessibility while maintaining financial stability
- Different reimbursement rates according to medicine types; special reimbursement schemes
- Lengthy evaluation process
- Co-payments are a revenue stream
- No special incentives for biosimilars

Challenges

- Delays in access to innovation despite EAS that are in place
- High co-payments for patients (co-payment rates of up to 67%)

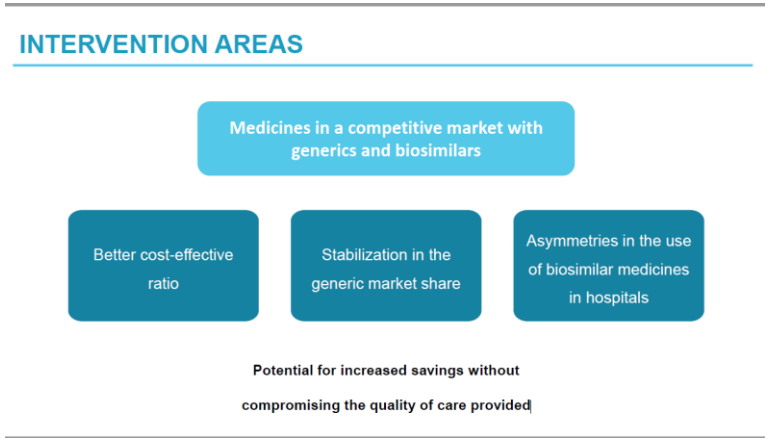




Day 2 – Pharmaceutical Policy and Impacts in Portugal

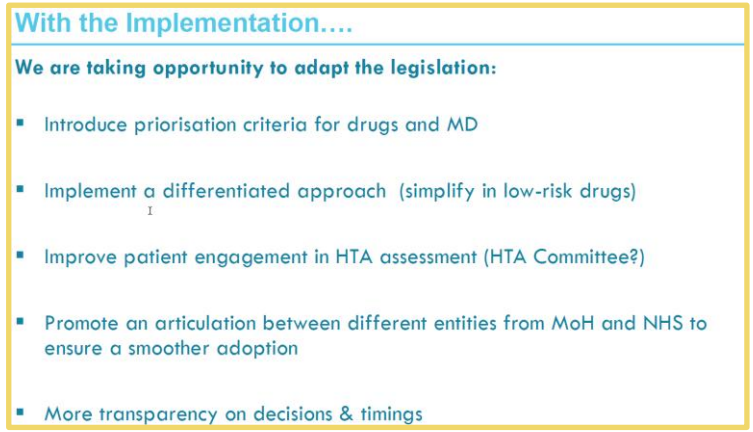
Rethinking Public Spending on Pharmaceutical and Medical Devices: The ongoing Reforms (Ana Correia, INFARMED)

- Current spending review (financial goals set by Ministry of Finance): Goal of identifying areas where efficiencies and savings can be made
- A current area for intervention identified for the current spending review was the generic and biosimilars market
- Idea is: Prescribers should feel the savings, otherwise they won't know their contribution
- Reduction of waste, e.g., in polypharmacy; point is not limiting access, but creation of consciousness about it
- Challenging process: Ministry of Finance wants 15% reduction; difficult to manage and reconcile expectations of Ministries of Finance and Health with each other.



The reimbursement process: Opportunities with the HTA-R regulation (Cláudia Furtado, INFARMED)

- HTA results now mostly in the "added value but non-quantifiable" category
- PT includes budget impact in their considerations
- Negotiation factors: Pharmacotherapeutic assessment; ICER and budget impact; affordability
- Robust HTA system but with delays; delays create pressures to do an EAS/programme, affects negotiations
- More efficient use of clinical experts through HTA-R
- Improve patient engagement in HTA assessment



Day 2 – Implementing pharmaceutical policies: What works?

Introduction

Facilitators and barriers & relevance of evaluation studies (Sabine Vogler, PPRI Secretariat, GÖG)

Case study 1

Measures to mitigate medicines shortages in Portugal (Diogo Sobral, INFARMED)

Case study 2

Measures to mitigate medicines shortages in Brazil (Diego Botelho Gaino, ANVISA)

Photo credits: Infarmed / GÖG

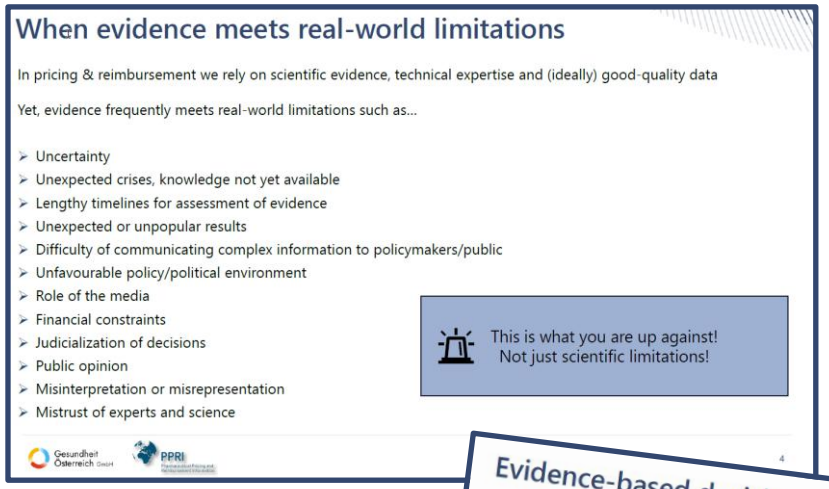
Day 2 – De-funding in pharmaceutical policy: Communicating unpopular decisions

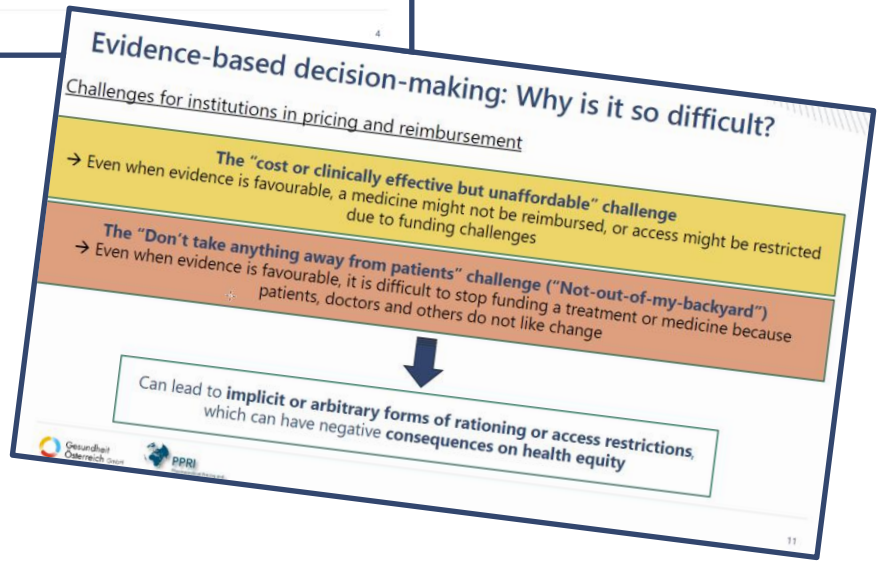
Presentation 1

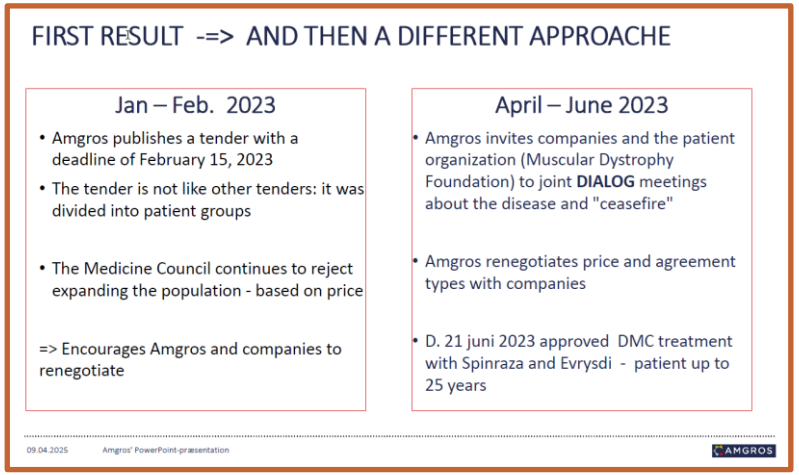
When evidence meets real-world limitations
(Katharina Kieslich, PPRI Secretariat, GÖG)

Presentation 2

Experiences from the PPRI network countries: Denmark
(Dorthe Bartels, AMGROS)







Outlook and network events

Thank you to our colleagues at **Wigev (Vienna Healthcare Group)** for hosting the next meeting!

In-person network meeting in Vienna on 15 September 2025

PPRI@20 anniversary meeting and celebration in Vienna on 16 September 2025