PPRI Pharmaceutical Pricing and Reimbursement Information

Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra

SWITZERLAND

Recent and planned developments in pharmaceutical policies 2025

CHANGES IN PRICING

Cost-containment measures (Massnahmen zur Kostendämpfung, Kodä)
Planned amendments of the Federal Health Insurance Act (KVG, SR 832.10).

- **Price setting**
  The basic pricing system based on the IPR and the EPR is currently under review.
  - External (EPR) and internal (IPR) reference pricing remain primary instruments
  - Exclusion of disproportionately high EPR-based prices
  - EPR-Consideration limited to reimbursed and published prices
  - No price premium without demonstrable added benefit

- **Differentiated assessment of effectiveness, appropriateness and economic efficiency**
  The aim of the differentiated assessment is to ensure the security of supply, particularly for cost-effective and supply-relevant drugs.
  Adapted Effectiveness/Adequacy/Efficiency assessment of medical services / medicines according to Article 32 KVG is currently being assessed.

Implemented (not conclusive)
- Change in the generic / biosimilar pricing policies
- Changes in mark-up / margin / remuneration for distributors (wholesale, pharmacy)

CHANGES IN REIMBURSEMENT

Cost-containment measures (Massnahmen zur Kostendämpfung, Kodä)
Planned amendments of the Federal Health Insurance Act (KVG, SR 832.10).

- **Operationalization and technical implementation of MEA**
  In addition to the legal basis, the principles as well as the technical implementation of MEA (incl. their reimbursement) are discussed and developed.

- **Cost impact models (Kostenfolgemodelle)**
  Aim to reduce spending on high-turnover drugs in the Swiss healthcare system. Pharmaceutical companies are to be obliged to reimburse a portion of the turnover generated by such products. The establishment of a legal basis is discussed and developed with stakeholders.

- **Reimbursement from day 0**
  To provide early provisional reimbursement to certain essential, innovative therapies at the time of Swissmedic approval, before regular pricing process has been completed.
  Discussions with stakeholders are underway to define reimbursement conditions and the evidentiary requirements for demonstrating a tangible added benefit.

Implemented (not conclusive)
- Changes/modifications of co-payments
- Change/modification of policies to promote the update of generic or biosimilar medicines

OTHER CHANGES

Implemented (not conclusive)

- **Early Dialogue, Early Access** (January 2024)
  Accelerated reimbursement of drugs.
  Market authorization holders can apply to the FOPH for a preliminary assessment (Early Dialogue 1 and 2) based on defined criteria before submitting the application.
  Joint processes between the FOPH and the Swiss Agency for Therapeutic Products (Swissmedic) are intended to facilitate concurrent reimbursement and marketing authorization.

- **DigiSanté**
  DigiSanté is the national program for promoting digital transformation in healthcare.
  The operational phase, which began in 2025, will see the concrete implementation of strategic measures with the aim of improving the quality of treatment, patient safety and the efficiency of the healthcare system.

- **Electronic Patient Record (EPD)**
  The Federal Council is working on a comprehensive revision of the Federal Act on the Electronic Patient Record to make the system more efficient and secure
  In order to support the dissemination of the EPD until the possible entry into force of the initiated revision of the EPDG, a transitional financing came into

SPECIAL TOPIC:
Current advances in HTA
(for EU Member States: Implications from EU-HTA Regulation)

Description of Switzerland's HTA Mechanism

- HTA is not used as a direct tool for pricing and reimbursement.
  The legal basis of the federal HTA programme is Article 32 of the Federal Health Insurance Act (KVG; SR 832.10), which specifies that medical services covered by compulsory health insurance must meet the criteria of effectiveness, appropriateness and economic efficiency. Compliance with these criteria is to be periodically reviewed.
  The HTA programme focuses in particular on the re-evaluation of services which may not meet the relevant criteria. The aim is to eliminate such services from the List of Reimbursable Items or to restrict mandatory reimbursement. In addition, the HTA programme evaluates services which are not currently reimbursable
- The FOPH is performing HTA unsystematically and on demand if the reimbursement criteria are insufficiently detailed.
- The Swiss Network for Health Technology Assessment (SNHTA) brings together scientific institutions and experts to create information synergies and avoid duplication of work. These include Federal Administration, various association, University Institutes, Hospitals and Cantonal Institutions