

POLAND

Recent and planned developments in pharmaceutical policies 2017

Special topic: hospital medicines

CHANGES IN PRICING

Amendment of the reimbursement act:

- abolition of the 25% reduction in drug prices in parallel imports in relation to the price of reference medicine
- drugs from parallel import will not affect prices of other medicines

These changes are planned to be implemented within 6 months.

CHANGES IN REIMBURSEMENT

Amendment of the reimbursement act:

- Introduction of the reimbursement development mode which aims at supporting the reimbursement of high cost and orphan drugs, including the creation of special funds for innovation
- Changes in pay-back mechanism

These changes are planned to be implemented within 6 months.

OTHERS CHANGES

With the 1st January 2018 all reimbursement proceedings will through new IT system SOLR

SPECIAL TOPIC: HOSPITAL MEDICINES

Article 6.1 of the Reimbursement Act (among others) defines reimbursement availability categories for hospital medicines: drug programme; chemotherapy (for the entire range of registered indications and applications or for a specific indication associated with a specific clinical state).

Currently, there are 381 drugs reimbursed within the framework of drug programmes and 469 drugs reimbursed within chemotherapy. All drugs included in the reimbursement list under these categories have official sale price (set as a result of negotiations which includes HTA evaluation) which cannot be exceeded. On the contrary it can be lower in conjunction with risk sharing schemes (which are confidential) or via tendering. Additionally, hospitals are obliged to purchase drugs with the prices lower than limits.

The basis for the limit within the given limit group is taken as the highest among the lowest wholesale prices per DDD of the drug topping up, as per the declaration filed in the application for inclusion in the reimbursement scheme, 110% of the quantitative turnover (calculated in reference to DDD) achieved in this limit group for the preceding year or, in the case of a drug for which a new limit group will be established, 100% of the estimated requirements.

The pharmaceutical expenditure in the in-patient sector in Poland presents itself as follows:

2015: 0,58 bn EUR (drug programmes) and 0,13 bn EUR (chemotherapy)

2016: 0,69 bn EUR (drug programmes) and 0,15 bn EUR (chemotherapy)