

### FLASH n°139 - April 2016

#### **Feature Stories**



Stepwise market approval of new pharmaceuticals: Principle of hope should not displace principle of safety



Drugs in Switzerland bring in €450 million more than in EU member states



Launch of 'PRIME' - a scheme to accelerate the marketing of promising drug



More efficiency in healthcare systems is necessary - Time to strengthen the efforts in tackling fraud and waste!

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#### What's next?

Internal Audit Committee - AIM Offices 28 April 29 April Presidium Meeting – AIM Offices 2-3 May Health System Reforms Study trip - Austria 13 May Mutuals Working Group - AIM Offices



**Top Tweets** 



AIM @AIM\_Healthcare · 12 avr. By @ICMIF: #Cooperative and #mutual insurance sector reported a 20% / in job creation since 2007 = 190,000 new jobs

♣ CoopsCanada, Cooperatives Europe, #COOPERATIVE LIGURIA et 7 autres



AIM @AIM\_Healthcare - 12 avr.

As #clinicaltrials aren't exempted frm the #tradesecret def, a company could sue EMA for publishing #data by @EU\_ZMK @EPHA\_EU

#### AIM and You

### More efficiency in healthcare systems is necessary -Time to strengthen the efforts in tackling fraud and waste!

16 March - Fraud experts met during a two-day AIM workshop in Brussels to address latest trends and activities in the field of fraud in healthcare.

No less than 10 experts took part in the meeting. They could benefit from an overview of fraud magnitude in Europe provided by the European Healthcare Fraud & Corruption Network (EHFCN). According to EHFCN, the estimated



amount of healthcare fraud in 2014 was € 46,3m in France, €18,7m in the Netherlands, €4,6m in Portugal, €0,8m in Lithuania, €8,3m in Belgium and €20m in Czech Republic. In 2013, the global amount of healthcare fraud was estimated to be 6.19% of healthcare expenditure worldwide (5.65€ trillion). The WHO considers fraud as one of the 10 leading causes of inefficiency in health systems.

AIM members briefly presented their anti-fraud systems before hearing about corporate compliance and risk management in insurance companies and Fraud and error in the field of European social security coordination.

The working group released a press release calling all stakeholders as well as national and EU institutions to strengthen the efforts to fight fraud in healthcare. The press release is available <a href="here">here</a>.

### **European Institutions**

#### European Commission

#### The European Commission goes digital to discuss health with stakeholders

4 April - The European Commission DG SANTE has presented its brand new digital tool to foster exchange between stakeholders and institutions on health issues.

This new tool is an online platform providing an e-forum for stakeholders to discuss and suggest initiatives to the European Commission. The first themes that will be addressed on that platform are health inequalities, patient safety, health workforce development and mental health. This initiative left AIM Director in doubt as he declared at the kick-off meeting: "I struggle to understand the added value of that new structure." The e-platform will be officially launched at the conference "Towards better prevention and management of chronic diseases" on 21 April in Brussels. More information is available <a href="here">here</a>.

#### Commission launches a public consultation on the European Pillar of Social Rights

8 March – The European Commission launched a public consultation to gather views and feedback on the European Pillar of Social Rights.

The European Pillar of Social Rights intends to set out key principles and values shared at EU level to support the development of fair labour markets and welfare systems for European workers. Once adopted, the Pillar should become a reference framework to screen employment and social performance and to drive both EU and national reforms to ensure adequate common rules.

The aim of the consultation is to assess EU *acquis* and to gather views on the principles identified in the preliminary outline of the Pillar. It includes provision concerning Health and safety at work, long-term care, health care and sickness benefits. The consultation will run until 31 December 2016 and a consolidated version of the European Pillar of Social Rights should be presented early in 2017. AIM has decided to contribute to the consultation. More information is available here.

#### Health

#### Pharmaceuticals - Medical devices

## Stepwise market approval of new pharmaceuticals: Principle of hope should not displace principle of safety

5 April - The German National Association of Statutory Health Insurance Funds (GKV) published a press release to reaffirm that the safety of patients should remain a priority in the ongoing debate at European level to shorten the approval process of new pharmaceuticals.

"However comprehensible the hope for healing or alleviation of an illness is, it should not be achieved by partly renouncing the principles of safety as a precondition for the market approval", said the deputy president of GKV, Mister Stackelberg.

GKV reminds that marketing authorization must rely on a solid, scientific evidence-based examination of efficacy and risk of new drugs. "Clinical trials are essential to confirm the alleged effectiveness of a drug and to identify possible severe side-effects during a test phase, in which voluntary study participants are intensely monitored and medically cared for, before the product is made available to the general public" continued Stackelberg. The press release is available <a href="here">here</a>.

#### Drugs in Switzerland bring in €450 million more than in EU member states

25 March - Santésuisse reveals in a recent report that trade margins on medicines are €450 million higher in Switzerland than in EU member States.

This amount represents 2% of the premiums paid by santésuisse's members. Santésuisse does an international comparison of margins on medicines prices every year comparing the difference between the factory price and the retail price in Denmark, Germany, Great Britain, Netherlands, France, Austria, Belgium, Finland and Sweden. It excludes VAT, and is adjusted according to wages, rents, interest rates and drug prices in those countries. In 2014, Swiss statutory health insurers reimbursed €5.32 billion of drugs. The study is available here. (FR)

#### Multi-stakeholders workshop on pharma: Benelux deal, pricing and vaccination

22 March - AIM attended the invitational multi-stakeholders workshop on pharmaceuticals in Amsterdam.

The meeting was opened with one minute silence to commemorate the victims of the terrorist attacks in Brussels on the same day. Due to the bombings several foreseen participants in the workshop were not able to make it to the Dutch capital. The meeting was mainly used to inform the participants about the BENELUX collaboration in the field of pharmaceuticals (horizon scanning, HTA and price negotiation). A representative of the Austrian Public Health Institute presented the recently published study on enhanced cross-country coordination in the area of pharmaceutical product pricing, including evaluation of the current

system of external reference pricing. A representative of the generic industry was invited to explain the added value of generic medicines. Finally, an official of DG SANTE briefly explained the policies and activities at EU level in the field of vaccines.

## US Deal: price of new heart failure treatment linked to how well the drug improves the health of patients

15 March - A U.S health insurer made a deal with the pharma company Novartis for performance-based price for a new heart drug.

According to the deal, the US insurance company Cigna, will be able to adjust its payment to Novartis on the basis of the improvement of the patient's state of health. Specifically, Cigna said payments will be based on a reduction in the proportion of patients who are admitted to hospital for heart failure. Novartis said it was ready to sign more outcome-based pricing deals. Like in Europe, pharma prices have been rocketing in the last 10 years in the US.

Read the full article here.

#### Launch of 'PRIME' - a scheme to accelerate the marketing of promising drug

7 March - The European Medicines Agency (EMA) has just launched the Priority Medicines initiative – PRIME.

The aim of PRIME is to provide faster market access to certain drugs answering an unmet medical need. It also foresees early dialog with regulators and scientific advice to industry at an early stage of drug development in order to release more solid data on risks and benefits of a new drug.

This initiative raises some concerns about independency and impartiality of the engaged institutions as long as they will be allowed to provide advice to industry before the marketing authorisation. Moreover, the prospect of accelerated marketing and stronger patent protection of (very) expensive drugs makes fear an important increase of costs for the health insurance system. For more information, please read <u>ESIP</u> and HAI answers to the public consultation on PRIME launched last year by the Commission.

#### > Trends in health systems

#### Pack your bag Darling, we go the Doctor (in Bangkok)

22 March – The Thai company Medical Departure has just raised \$2.5 million to develop its business: arrange health tourism for its clients/patients.

The business model of the start-up is simple: connecting patients to a data basis of qualified doctors in Thailand, Vietnam, Philippines, Malaysia, South Korea, Indonesia, Mexico, and Costa Rica where healthcare services are much cheaper than in Europe. Those countries benefit from well-equipped private clinics and qualified healthcare professionals.

Medical tourism represents a market of approximately \$38.5 billion. Expected growth rate could reach 20% per year. Demand is especially growing for dental care which is usually not fully covered by health insurance. There are already more than 7 enterprises offering these kinds of services mainly in Asia. More info <a href="https://example.com/here/health/n

#### > International

### Ivory Coast: Make the Universal Health Coverage Dream come true

14 April - The Ivorian government has decided to implement Universal Health Coverage (UHC) across the country. This initiative raises high hopes as well as many interrogations as reminded by ADI, an African Think-thank. The success of the project will depend on the country's ability to meet three major challenges: quality of healthcare services, financing and management of UHC.

The first challenge will be to provide citizens with sufficient and quality healthcare everywhere in the country because it makes no sense to benefit from health coverage without having access to healthcare. Thus, the government will have to strengthen healthcare services by training and hiring qualified healthcare professionals, equipping hospitals with advanced and reliable materials and by enhancing the development of healthcare facilities especially in rural areas.

The question of the financing of the UHC will be crucial. In Ivory Coast, nearly half of the population lives under the poverty rate and will therefore not be able to contribute to the system. The government will have to find ways to finance it: for example by setting-up a solidarity tax on companies making super profits suggest the Think-thank. For the people who are able to contribute, Abidjan should create an efficient and innovative system to collect contribution in a country where only 12% of the people do have a bank account.

Finally, the government will have to rigorously manage UHC funds to avoid liquidity crises, ensure a fast payment of claims and release a margin for the management and administrative costs. The challenge will be to install a high level of trust and confidence with the population through honest governance of social protection bodies. More information is available <a href="here">here</a> (FR).

## Cameroun – International workshop: How the cooperatives may bridge the gap of social protection and access to medicines?

2 April— The Pan-African Cooperative conference organises a workshop about health cooperatives in Yaoundé in Cameroun end of May.

The event will aim at exchanging African experiences and presenting different projects related to healthcare carried out by African cooperatives. Public authorities and the sector gathered in Yaoundé will contribute to the drafting of a roadmap to develop joint projects. More information is available <a href="here">here</a>.

#### Healthcare on the agenda of the International Cooperatives Summit in Canada

25 March - Cooperatives from the four corners of the world will meet next October in Canada and will talk about healthcare

The International Cooperative Summit is organised every two year and gathers the stakeholders of the worldwide cooperative and mutual sector (approximately 3000 participants from 93 countries). Researchers, policy-makers, CEOs and presidents of cooperatives and mutuals as well as international organisations (WTO, World Bank, United Nations) gather to attend workshops, conferences, discussions, side-events and forums. The main theme of 2016 edition will be: "how cooperatives and mutuals can contribute to well-being and economic growth".

A workshop, organised by the Health Cooperative Alliance, will specifically deal with the role that health cooperatives and mutuals can play to tackle future health challenges. More information is available <u>here</u>.



# More cooperation between Ivorian and Moroccan mutuals

15 March – In Abidjan, Moroccan and Ivorian mutuals agreed to tighten ties to improve social protection of private employees.

Abdelaziz Alaoui, President of the Moroccan inter-professional mutual fund

(CMIM) and Joseph Akanza Koffi, President of the Mutual of workers and pensioners of the private sector in Ivory Coast (MUTREPCI) signed a partnership agreement between their two organisations in Abidjan beginning of March. It happened on the side of the AIM international conference on "Prospects of African mutuals in the framework of universal health coverage", organised in the Ivorian capital. This agreement aims to "foster and promote the exchange of information and develop common strategies to reinforce capacities of the two mutuals". The agreement foresees the possibility for MUTREPCI' members to get services in Morocco at the same rates as those applied to CMIM members. More information <a href="here">here</a> (FR).

#### **Events**

#### > Forthcoming Events

19 April	EESC hearing: Financing SGIs in the aftermath of the crisis: what role for financial instruments? Brussels
19 April	Medicines for Europe is organising an <a href="event_event-titled">event_event-titled</a> "Universal access to health – How can we contribute?"
21 April	European Commission DG CNECT eStandards Conference, Berlin
21 April	<u>Conference</u> : The role of philanthropy and social investments in fostering research and Innovation – new financial instruments and partnerships, Dutch Presidency, Amsterdam
21 April	Workshop on Disruptive models of healthcare for Europe – Europe's search for new business models, Friends of Europe, Brussels
21 April	<u>Conference</u> on deploying standards for sharing health information across Europe and beyond, eStandards Project, Berlin
21 April	The European Commission (DG SANTE) is organising a <u>meeting</u> entitled "Towards better prevention and management of chronic diseases"
21-22 April	The <u>2th International Conference</u> on Information and Communication Technologies for Ageing Well and e-Health, ICT4AWE, Rome
26 April	ECPC Conference: Unleashing the mHealth potential for cancer patients, Brussels
26 April	<u>Seminar</u> "Social and solidarity economy as a strategy for an inclusive and a sustainable development – European and Latin America perspectives".

11-12 May European Commission Workshop on EU-funded innovation procurement in the healthcare

sector, Brussels

23 May The 16th International Conference on Integrated Care: A Movement for Change: Enabling

People-Centred and Integrated Health and Social Care, Integrated Care foundation,

Barcelona

**1-3 June** Building the Future of Health, University Medical Center Groningen, Groningen, the

Netherlands

**8-10 June** <u>eHealth Week 2016</u>, Amsterdam

**14-16 June** The eHealth360° International Summit, Budapest

28 June World Congress on Active Ageing 2016, International Coalition for Ageing and Physical

Activity Melbourne, Australia

8 July Save the date! Info Day, Horizon 2020 - 'Health, demographic change and wellbeing',

Brussels

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For more information on one of the topics mentioned above, please contact the AIM Secretariat.

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