



PHIS Database

Reimbursement list

Reimbursement list 2010/2011

C.	Out-patient sector		In-patient sector	
	R. list in place	Form of the list	Hospital pharmaceutical formulary in place	Form of the list
AT	Yes	Positive list	Yes	Out-patient list also relevant for in-patient sector; hospital pharmaceutical formulary (HPF)
BE	Yes	Positive list	Yes	Out-patient list also relevant for in-patient sector; hospital pharmaceutical formulary (HPF)
BG	Yes	Positive list	Yes <sup>5</sup>	Hospital pharmaceutical formulary (HPF) <sup>5</sup>
CY	Yes	Positive list	No	Out-patient list also relevant for in-patient sector
CZ	Yes	Positive list	Yes	Out-patient list also relevant for in-patient sector; hospital pharmaceutical formulary (HPF)
DE	No <sup>1</sup>	Two negative lists	Yes	Hospital pharmaceutical formulary (HPF)
DK	Yes	Positive list	Yes	Hospital pharmaceutical formulary (HPF) <sup>7</sup>
EE	Yes	Positive list	Yes	Hospital pharmaceutical formulary (HPF)
EL	Yes	Negative list <sup>2</sup>	n.a.	n.a.
ES	No <sup>6</sup>	Negative list	Yes	Hospital pharmaceutical formulary (HPF)
FI	Yes <sup>3</sup>	Positive list	Yes	Hospital pharmaceutical formulary (HPF)
FR	Yes	Positive list	Yes	Hospital pharmaceutical formulary (HPF)
HU	Yes	Positive list and negative list	Yes	Out-patient list also relevant for in-patient sector; hospital pharmaceutical formulary (HPF)
IE	Yes	Positive list	Yes	Hospital pharmaceutical formulary (HPF)
IT	Yes	Positive list	Yes	Out-patient list also relevant for in-patient sector; hospital pharmaceutical formulary (HPF)
LT	Yes	Positive list	Yes	Hospital pharmaceutical formulary (HPF)
LU	Yes	Positive list	n.a.	n.a.
LV	Yes	Positive list	Yes	Hospital pharmaceutical formulary (HPF)
MT	Yes	Positive list	No	Out-patient list also relevant for in-patient sector
NL	Yes	Positive list	Yes	Out-patient list also relevant for in-patient sector; hospital pharmaceutical formulary (HPF)
PL	Yes	Positive list	Yes	Out-patient list also relevant for in-patient sector; hospital pharmaceutical formulary (HPF)
PT	Yes	Positive list	Yes	Hospital pharmaceutical formulary (HPF)
RO	Yes	Positive list	No	Out-patient list also relevant for in-patient sector
SE	Yes	Positive list	No	Out-patient list also relevant for in-patient sector
SI	Yes <sup>4</sup>	Two positive lists	Yes	Hospital pharmaceutical formulary (HPF)

SK	Yes	Positive list	Yes	Out-patient list also relevant for in-patient sector; hospital pharmaceutical formulary (HPF)
UK	No	Two negative lists	Yes	Hospital pharmaceutical formulary (HPF)
AL	Yes	Positive list	n.a.	n.a.
CH	n.a.	n.a.	n.a.	n.a.
HR	Yes	Positive list	n.a.	n.a.
IS	Yes	Positive list	Yes	Hospital pharmaceutical formulary (HPF)
NO	Yes	Positive list	Yes	Hospital pharmaceutical formulary (HPF)
TR	Yes	Positive list	Yes	Out-patient list plus list for hospital only medicines

C. = country, HPF = hospital pharmaceutical formulary, n.a = not available, R. = Reimbursement

<sup>1</sup> DE: In addition, a small (positive) list issued by the Federal Joint Committee contains non-prescription drugs that are exceptionally reimbursed under the Social Health Insurance

<sup>2</sup> EL: The reintroduction of positive list is still ongoing

<sup>3</sup> FI: Negative list is not yet implemented, however the legal basis is there

<sup>4</sup> SI: There are two positive lists, one called positive list and another is called intermediate list

<sup>5</sup> BG: Separate positive list for the in-patient sector

<sup>6</sup> ES: There is no positive out-patient list itself in Spain. There is a monthly electronic catalogue which contains all possibly reimbursable medicinal products but it is not considered as closed list itself.

<sup>7</sup> FR: HPF = list of medicines at the hospital level. In France there are two lists concerning the in-patient sector: 1) List of out-patient medicines which are also available in in-patient sector and 2) List of in-patient medicines

## Reimbursement rates 2010/2011

C.	Out-patient sector: Reimbursement rates
AT	<b>100%</b>
BE	<b>Different percentage rates of the ex-factory price depending on the category<sup>1</sup></b>
BG	<b>100; 75; 50</b> Up to 100%: medicines for common chronic disease Up to 75%: medicines for diseases with low morbidity and mortality leading to significant deterioration of the health status and disability
CY	<b>100; 50% (public sector)</b> 100%: different statuses (e.g. pensioners) 50%: people with low income <b>0%</b> (private sector)
CZ	<b>No fixed reimbursement rates defined</b> exception: 50% for immunostimulantia
DE	<b>100%</b>
DK	<b>100; 85; 75; 50%</b> Rate is depending on pharmaceutical expenditure (higher expenditure means a higher rate)
EE	<b>100; 75; 50%</b> 100%: serious or epidemic disease 75%: chronic disease 50%: general disease
EL	<b>100; 90; 75%</b> 100%: medicines for severe diseases 90%: medicines for chronic conditions and for low pensioners 75%: standard rate of reimbursement
ES	<b>100; 90; 60%</b> <small>(2011)</small> 100 %: pensioners and hospital medicines

<b>C.</b>	<b>Out-patient sector: Reimbursement rates</b> 90%: medicines for chronic diseases 60%: majority of POM
FI (2011)	<b>100; 72; 42%</b> 100%: medicines for 34 severe chronic conditions where pharmaceutical treatment is necessary and restores or replaces normal bodily functions 72%: medicines for 10 chronic diseases where pharmaceutical treatment is necessary 42%: basic rate of reimbursement
FR (2011)	<b>100; 65; 30%; 15%</b> 100%: severe chronic diseases 65%: medicines with major clinical benefit by serious disease 30%: medicines with less clinical benefit by serious disease and those for non-serious disease with a form of clinical benefit 15%: medicines with weak clinical benefit by serious disease and those for non-serious disease with a form of clinical benefit
HU	<b>85; 55; 25% or 100; 90; 70; 50%</b> 85, 55, 25%: medicines of positive list. Rate depends on therapeutic value of the medicine and severity and status of disease. 100, 90, 70, 50 %: medicines for specific diseases
IE	<b>100%</b> 100%: for a specific group of population. The others have 100% reimbursement of medicines after having paid up-front a specific co-payment
IT	<b>100%:</b>
LT	<b>100; 90; 80; 50 %</b> Rate is depending on severity of the disease (the more severe, the higher the rate)
LU	<b>100; 80; 40%</b> 100%: medicines. with precise indication of therapeutic application, which is generally medicines for chronic disease 80%: all other drugs without special destination, prescriptions prepared as directed by physician 40%: medicines with more limited indications
LV	<b>100; 75; 50%</b> 100%: chronic, life threatening diseases or diseases causing irreversible disability where medicines ensures and maintains the patient's life functions 75%: diseases where medicines maintain or improve the patient's health 50%: diseases where medicines are necessary to improve the patient's health, vaccines.
MT	<b>100%</b> (public sector) <b>0%</b> (private sector)
NL	<b>100%</b>
PL	<b>100; 70; 50%</b> There are no specified inclusion criteria for each group: 100%: medicines for specific indications 70, 50%: supplementary medicines Full lump sum of PLN 3.20: basic medicines
PT (2011)	<b>100; 90; 69; 37; 15%</b> 100%: life saving medicines 90%: essential medicines for chronic diseases; 69%: essential medicines for serious illnesses 37%: not priority medicines with proven therapeutic value 15%: new medicines with not yet proven therapeutic value
RO	<b>100; 90; 50%</b> 100%: medicines for severe chronic diseases 90%: essential and cost effective medicines 50%: essential but less cost effective medicines
SE	<b>100; 90; 75; 50%</b>

<b>C.</b>	<b>Out-patient sector: Reimbursement rates</b> Rate is depending on pharmaceutical expenditure (higher expenditure means a higher rate)
SI	<b>75; 25%</b> 75%: medicines on positive list 25%: medicines on intermediate list
SK	<b>100% and partial reimbursement</b> Categories depending on specific criteria
UK	<b>100%</b>
AL	<b>100%; 85%-95%; 75%-85%; 65%-75%; 55%-65%; 50%</b> 100%: Medicines treating cancer, multiple sclerosis, growth hormone deficiency, etc. for pensioners, war veterans, children under 12 months. 85%-95%: Insulin for diabetics, drugs treating epilepsy, depression, Parkinson, osteoporosis, etc. 75%-85%: Medicines for chronic conditions such as coronary heart disease, hypertension, asthma, etc. 65%-75%: Gynaecologic medicines, other medicines treating ulcer, urinary infections, etc. 55%-65%: Medicines treating cough, mycosis, rheumatism, etc. 50%: Antibiotics, dermatologic drugs, etc.
CH	n.a.
HR	<b>100%; and partial reimbursement</b> 100%: List A Co-payment: List B
IS	<b>65-70% on average</b>
NO (2011)	<b>100%; 62%</b> 100%: Reimbursement is always 100% for children under the age of 16 and for low-income pensioners. 62%: Different conditions under different schedules
TR	<b>100%; 90%; 80%</b> 80%: Medicines for active workers 90% Medicines for the retired 100%: Chronic patients

C. = country, n.a = not available, PLN = Polish złoty

<sup>1</sup> BE: since April 2010 a new reimbursement scheme:

Category	A	B		C	Cs	Cx
		preferentially insured persons	all other insured persons			
< 14.38 EUR	0 % of the RL ex fact	26,52 % of the RL ex fact	44,20 % of the RL ex fact	88,39 % of the RL ex fact	106,07 % of the RL ex fact	141,43 % of the RL ex fact
≥ 14.38 EUR	0 EUR + 0% of the ex-fact	1,50 EUR + 16% of the ex-fact	2,50 EUR + 27% of the ex-fact	5,00 EUR + 54% of the ex-fact	6,00 EUR + 65% of the ex-fact	8,00 EUR + 86% of the ex-fact

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## NOTES

<b>Data sources:</b>	WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Policies 2011, data provided by PPRI and PHIS network members AT: PHIS Pharma Profile Austria (draft), October 2011 BG: PHIS Pharma Profile Bulgaria, October 2010 DK: PHIS Pharma Profile Denmark (draft), March 2011 ES: PHIS Pharma Profile Spain (draft), April 2011 FR: PHIS Pharma Profile France (draft), April 2011 IS: PHIS Pharma Profile Iceland (draft), September 2011 IT: PHIS Pharma Profile Italy (draft), July 2011 NL: PHIS Pharma Profile Netherlands (draft), April 2011 NO: PHIS Pharma Profile Norway, June 2011 SK: PHIS Pharma Profile Slovakia (draft), July 2011 UK: PHIS Pharma Profile United Kingdom (draft), February 2011
<b>Available years in PHIS database:</b>	2010/2011
<b>Data limitations:</b>	-
<b>Data validation:</b>	Data was validated by PHIS network members (if possible) in summer 2011.
<b>Country abbreviations:</b>	AT = Austria, BE = Belgium, BG = Bulgaria, CZ = Czech Republic, CY = Cyprus, DK = Denmark, DE = Germany, EE = Estonia, EL = Greece, ES = Spain, FI = Finland, FR = France, HU = Hungary, IE = Ireland, IT = Italy, LT = Lithuania, LU = Luxembourg, LV = Latvia, MT = Malta, NL = The Netherlands, PL = Poland, PT = Portugal, RO = Romania, SE = Sweden, SI = Slovenia, SK = Slovakia, UK = United Kingdom; AL = Albania, CH = Switzerland, HR = Croatia, IS = Iceland, NO = Norway, TR = Turkey

## DEFINITION

Definition according to PHIS Taxonomy ( <a href="http://phis.goeg.at/downloads/database/PHIS_Taxonomy_WP6_IndicatorsReport_final.pdf">http://phis.goeg.at/downloads/database/PHIS_Taxonomy_WP6_IndicatorsReport_final.pdf</a> )	
<b>Name of the indicator:</b>	Reimbursement list
<b>Objective:</b>	To assess if a country has implemented measures guaranteeing or limiting the access to medicines which are, at least partially, funded by a Third Party Payer.
<b>Definition:</b>	<p>States may use reimbursement lists which may take either the form of a</p> <ul style="list-style-type: none"><li>- positive list: list of medicines that may be prescribed at the expense of the third party payer.</li><li>- negative list: list of medicines which cannot be prescribed at the expense of the third party payer (PHIS Glossary).</li></ul> <p>A country may use a combination of reimbursements lists, a positive and negative one for example.</p> <p>Reimbursement lists may differ for the out-patient and in-patient sector.</p> <p>Usually positive and negative lists only refer to the out-patient sector, but in some countries they may also be valid for the in-patient sector.</p> <p>For the in-patient sector, it should state if hospital pharmaceutical formularies (HPF), a national hospital list or out-patient positive lists also eligible for hospitals are in place.</p>
<b>Type:</b>	Qualitative
<b>Breakdowns:</b>	Out-patient / in-patient
<b>Data source(s) preferred:</b>	PHIS Pharma Profiles and PHIS Hospital Pharma Reports
<b>Code in PHIS Taxonomy:</b>	S10