# Transparency of cancer medicine prices and rebates

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OECI 2024 Oncology Days

Cancer Economics WG Session

Helsinki, 14 June 2024







### Declaration of interest / Disclaimer

No conflict of interest to declare.

Economist: working as senior researcher & policy expert in the Austrian National Public Health Institute (Gesundheit Österreich / GÖG) owned by the Austrian Ministry of Social Affairs, Health, Care and Consumer Protection

- Co-founder and coordinator of Pharmaceutical Pricing and Reimbursement Information (PPRI), a network of competent authorities for pricing and reimbursement in 50 countries
- Involved in the Beneluxa Initiative

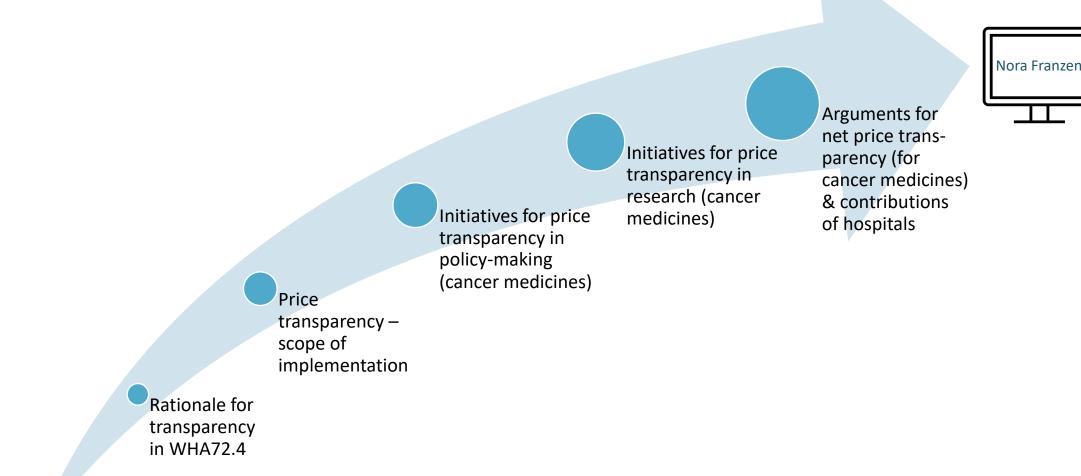
#### **Disclaimer:**

The information and data provided in this presentation was collected and analyzed by the WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Policies located at the Pharmacoeconomics Department of GÖG.

The data do not have any legally binding value. This is not a presentation of WHO. The presenter is responsible for the views expressed in this presentation, and they do not necessarily represent the decisions and policies of the WHO.



### Outline





## WHA72.8 resolution: Asks to MS

- Take appropriate measures to publicly share information on the net prices of health products;
- Take the necessary steps [...] to support
   dissemination of and enhanced availability of and
   access to aggregated results data and [...] costs
   from human subject clinical trials regardless of
   outcomes [...];
- Work collaboratively to improve the reporting of information by suppliers on registered health products, such as reports on sales revenues, prices, units sold, marketing costs, and subsidies and incentives;
- Facilitate improved public reporting of patent status information and marketing approval status of health products

#### Accountability of how taxpayers' money is spent

Reduce overpaying (list prices)
Stop sending wrong signals to others (EPR)
Strengthening the balance (equal level field)

Improvi

Results: ethical and moral obligation, protect patients from treatment that is unlikely to cure, avoid redundancies in trials ("waste"), support evidence-based P+R

Costs: R&D costs as argument for high price –

lack of proof, consideration of public funding



More evidence-based decision-making

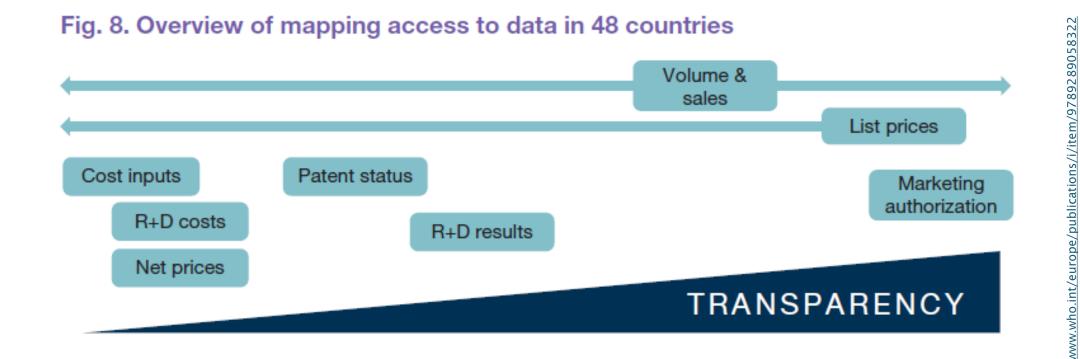


<u>Patent</u>: preparedness for generics / biosimilars <u>MA/commercialisation</u>: actual access/availability

http://apps.who.int/gb/ebwha/pdf files/WHA72/A72 ACONF2Rev1-en.pdf



## Overview of implementation of WHA72.8



Vogler S. Access to information in markets for medicines in the WHO European Region. Oslo Medicines Initiative technical report. Copenhagen: WHO Regional Office for Europe; 2022. Licence: CC BY-NC-SA 3.0 IGO.

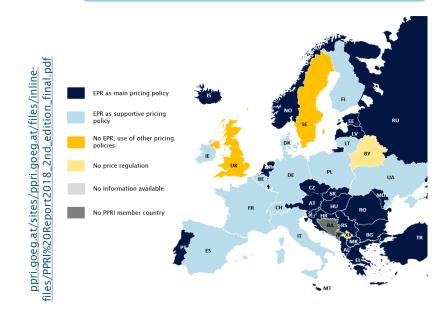


#### List prices

based on

value

prices in other countries (EPR)



Other EPR-applying countries ...

Net prices (real / actual prices)

Determine a (benchmark) price

**TOO HIGH** 

Procurers (authorities/hospitals)

Negotiate a more affordable price (confidential discount)

Publish the higher list price



Initiatives in policy-making for striving more net price transparency for (cancer) medicines

Flaging "fake prices"



"Clearing house" mechanism



EXF





Requesting net price / discount information, where feasible



Austria

**TRANSPARENCY** 



### Initiatives in research on net price transparency for (cancer) medicines/1

PHIS Hospital Pharma Report

6 The Open Pharmacoeconomics & Health Economics Journal, 2013, Volume 5

Research Article

Discounts and rebates granted to public payers for medicines in **European countries** 

Sabine Vogler<sup>1</sup>, Nina Zimmermann<sup>1</sup>, Claudia Habl<sup>1</sup>, Jutta Piessnegger<sup>2</sup>, Anna Bucsics<sup>2</sup>

Collaboration with hospitals providing net prices

Vogler et al.

Health Policy 121 (2017) 354-362 Contents lists available at ScienceDirect



Health Policy



Payers' experiences with confidential pharmaceutical price discounts: A survey of public and statutory health systems in North America, Europe, and Australasia

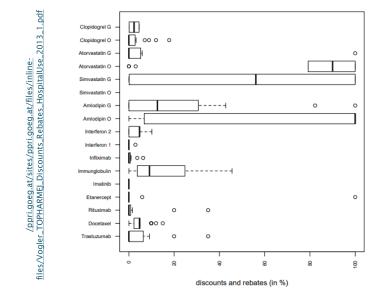


Steven G. Morgan a,\*, Sabine Voglerb, Anita K. Wagner

- <sup>2</sup> School of Population and Public Health, University of British Columbia, #267-2206 East Mall, Vancouver, BC V6T 1Z3, Canada
- b WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Policies, Vienna, Austria

Confirm wide-spread use of discounts, incl. high-priced medicines

Show limited head-room for monopoly cancer medicines, no "best deal"





## Initiatives in research on net price transparency for (cancer) medicines/2

## may lead to higher list prices

#### Abstract

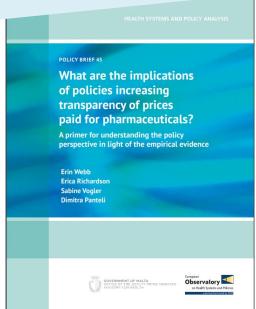
Managed entry agreements (MEAs) have been used for several years, with the aim of curbing the growth of pharmaceutical expenditure and enhancing patient access to innovation. Yet, much remains to be understood about their economic implications. This paper studies the impact of MEAs on list prices, that is, prices before the deduction of any discount. Using a theoretical model, we show that, under most price setting regimes, the introduction of an MEA leads to a higher list price. This is confirmed by our empirical analysis of a sample of 156 medicines in six countries, providing a conservative estimate of the increase in price due to the MEA of 5.9%. A relevant policy implication is that payers may overestimate the financial gains that can be achieved through this tool.

#### KEYWORDS

managed entry agreements, pharmaceutical prices, risk-sharing agreements

Gamba S, Pertile P, Vogler S. The impact of managed entry agreements on pharmaceutical prices. Health Econ. 2020;29(51):47-62

## No empirical evidence on impact on access to medicines



Webb E, Richardson E, Vogler S, Panteli D (2022): <u>What implications of policies increasing transparency paid for pharmaceuticals</u>. World Health Organization European Observatory on Health Systems and Policies



### Initiatives in research on net price transparency for (cancer) medicines/3

#### Actual and list price of expensive cancer medicines

"Best deal"?

Collabora-
tive OECI
effort!

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Country		.omania*	Hungary**	Poland	Lithuania	Czech Republic	Louis Co	Poy (gal	Spain (N=2)	Italy (N=2)	France (N=2)	Germany (N=2)	United Kingdom* ***	· · · · · · · · · · · · · · · ·	The ther- nds (=3)	Norway *****
GDP/capita (€	)	170	10.500	10,700	12,400	14 700	<b>-1,800</b>	16,600	22.800	ه,600	32,200	32,500	34,500	36,000	39,3	73,40
Herceptin®	Actual	563.14	516.47	N/A	476.56	481.82	674.80	N/A	506.88	557.70	542.43	670.00	562.71	517.92	605.25	497.74
1 vial/150 mg	price															
(€) <sup>a</sup>	List /	585.26	630.38	537.99	476.56	502.73	N/A	509.13	573.58	913.45	542.43	718.33	562.71	536.76	606.49	523.50
Trastuzumab	official															
	price															
Perjeta®	Actual	2,677.24	2,594.37	N/A	N/A	2,590.91	2,762.00	N/A	2,590.18	2,850.81	2,891.10	2,440.00	3,308.01	2,754.72	3,000.00	N/A
1 vial/420 mg	price															
(€) <sup>a</sup>	List/	2,677.24	N/A	2,419.94	N/A	2,649.10	N/A	2,761.64	2,910.58	4,113.44	2,891.10	2,580.83	3.308.01	2.840.66	3,000.00	2,474.58
Pertuzumab	official															
	price															
Mabthera®	Actual	238.19	N/A	N/A	N/A	N/A	295.27	N/A	210.56	262.39	266.44	N/A	241.16	210.38	271.13	210.80
1 vials /100	price															
mg(€) <sup>a</sup>	List/	247.96	220.53	287.72	N/A	420.91	N/A	228.80	238.06	395.67	266.44	691.62	241.20	218.38	279.27	217.47
Rituximab	official															
	price															
Avastin®	Actual	283.67	N/A	176.53	237.12	N/A	345.26	N/A	278.01	300.33	250.65	N/A	335.16	312.26	321.54	260.93

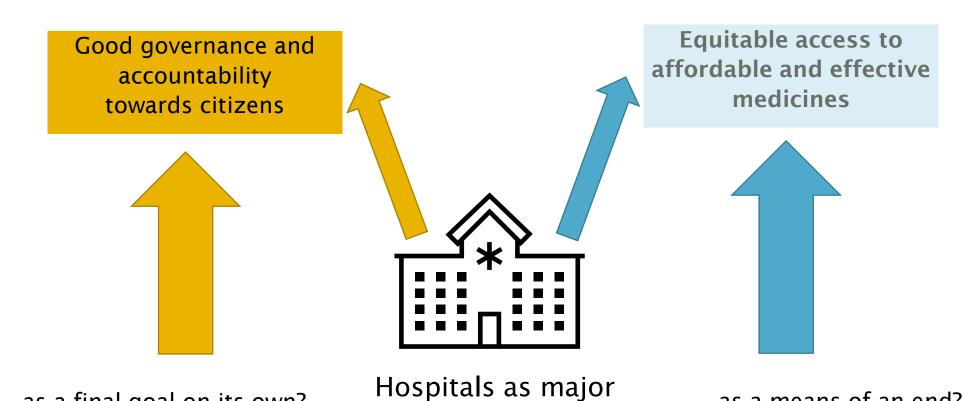
pubmed.ncbi.nlm.nih.gov/26670

Excerpt from Annex - further price data available

van Harten WH, Wind A, de Paoli P, Saghatchian M, Oberst S. Actual costs of cancer drugs in 15 European countries. The Lancet Oncology. 2016;17(1):18-20



## Why (net) price transparency?



potential contributor

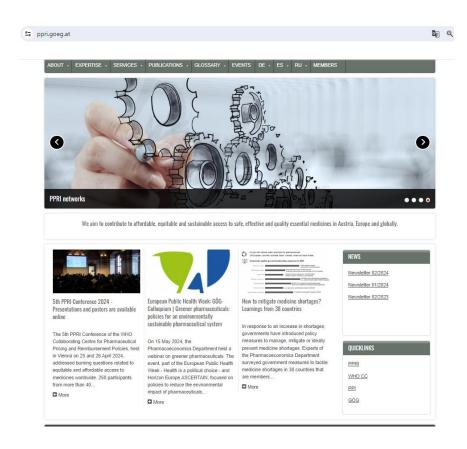
to price transparency



as a means of an end?

as a final goal on its own?

## Thank you for your attention



#### **Dr. Sabine Vogler**

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Head of the WHO Collaborating Centre for
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## TRANSPARENCY IN PRICE NEGOTIATIONS

dr. N. Franzen, the Netherlands Cancer Institute

NKI Team: J. Vancoppenolle, MSc

prof dr. V. Retèl, prof dr. W. van Harten







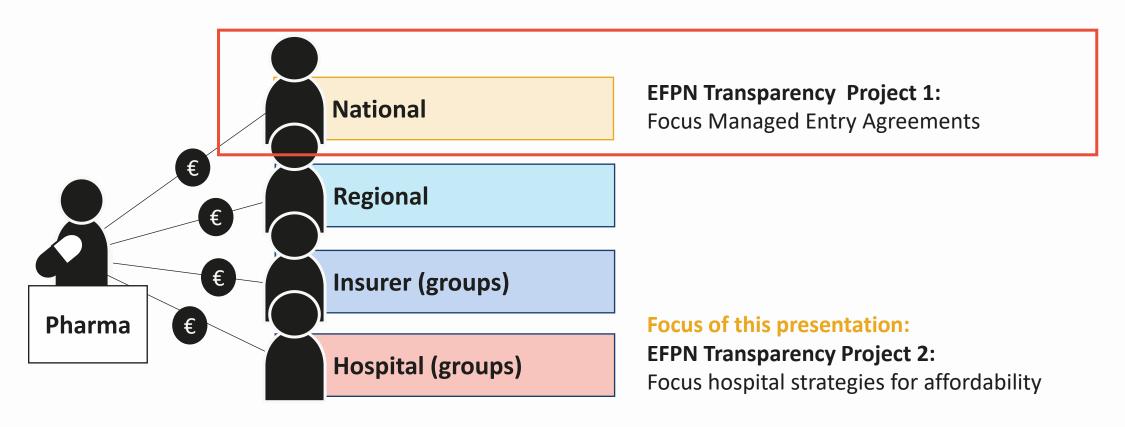








## Price negotiations at national, regional, insurer, and hospital level











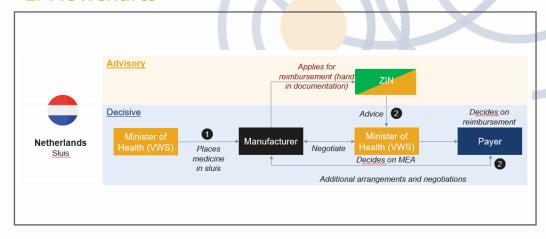


## Public Data on Managed Entry Agreements in 15 European European countries

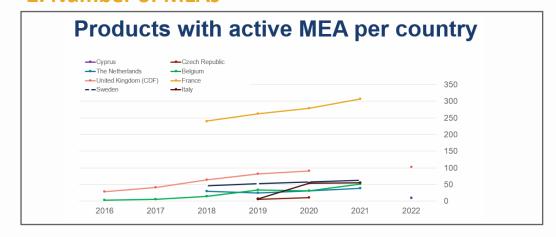
N Franzen, J Vancoppenolle, S Vogler, V Retel, W van Harten

Objective: To improve transparency regarding MEAs by investigating and comparing their non-confidential elements across selected European countries.

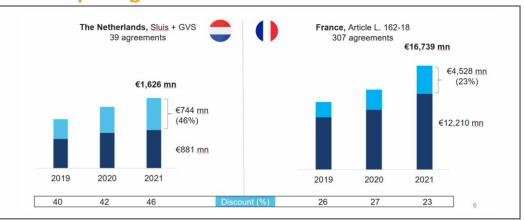
#### 1. Flowcharts



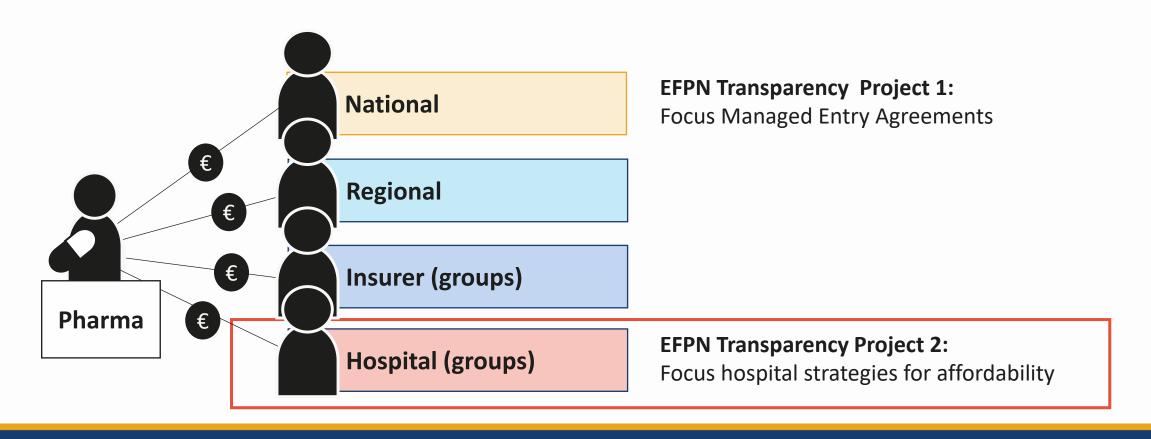
#### 2. Number of MEAs



#### 3. Comparing Financial information



## Price negotiations at national, regional, insurer, and hospital level













## Price Transparency of Innovative Cancer Drugs: A Crucial Step towards Informed Price negotiations

J Vancoppenolle, N Franzen, (...) V Retel, W van Harten

#### **Rational:**

- In many countries, hospitals play an important role in access & budgets.
- OECI study indicated large price differences (58%) with limited access



#### **Objective:**

- Collect average actual prices of cancer medicines per European country.
- Identify price/expenditure reduction strategies of hospitals.

## **Collection price data**



**Stimulate participation** 

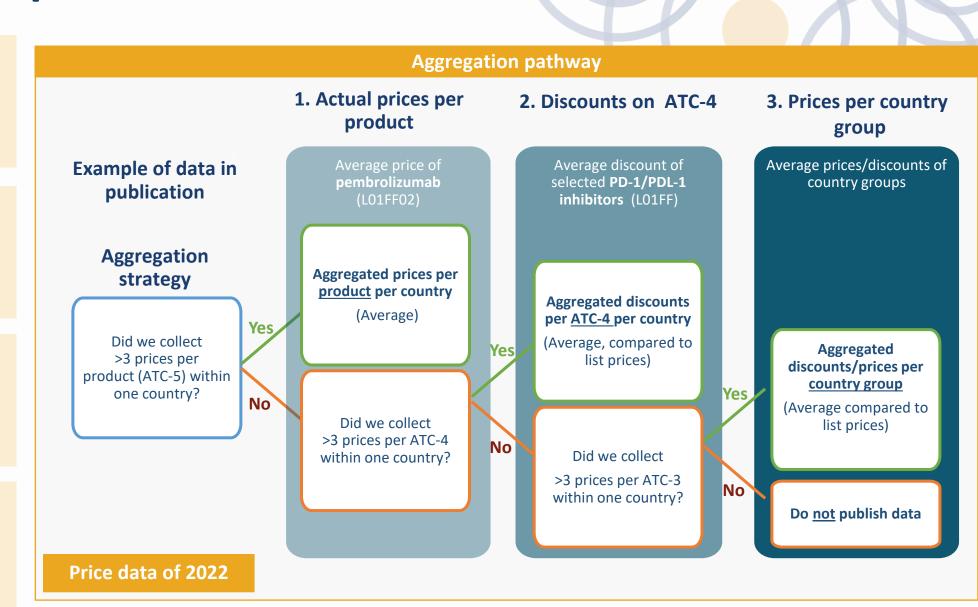


**Legal counseling** 



**Anonymity & Aggregation** 





## **Selection of medicines**

Medicine	ATC4 chemical subgroup
IBRUTINIB	BTK-inhibitors
ACALABRUTINIB	BTK-inhibitors
DARATUMUMAB	CD38 -inhibitors
ISATUXIMAB	CD38 -inhibitors
NIVOLUMAB	PD-1/ PDL-1 -
MIVOLOWIAD	inhibitors
PEMBROLIZUMAB	PD-1/ PDL-1 -
FLIVIDIOLIZUVIAD	inhibitors

Medicine	ATC4 chemical subgroup
PALBOCICLIB	CDK-inhibitors
RIBOCICLIB	CDK-inhibitors
ABEMACICLIB	CDK-inhibitors
ENZALUTAMIDE	Anti-androgens
POMALIDOMIDE	Other immuno suppressants

Medicine	ATC4 chemical subgroup
GEMCITABINE	Pyrimidine analogues
CAPECITABINE	Pyrimidine analogues
ABIRATERONE	Other hormone antagonists & related agents
LENALIDOMIDE	Other immuno suppressants

### **Selection of medicines**

Medicine	Patent expiration
IBRUTINIB	2026
ACALABRUTINIB	2032
DARATUMUMAB	2031
ISATUXIMAB	2030
NIVOLUMAB	2026
PEMBROLIZUMAB	2028

Medicine	Patent expiration
PALBOCICLIB	2028
RIBOCICLIB	2029
ABEMACICLIB	2029
ENZALUTAMIDE	2024
POMALIDOMIDE	2024

Medicine	Patent expiration
GEMCITABINE	2004
CAPECITABINE	2013
ABIRATERONE	2022
LENALIDOMIDE	2017

#### **Monopoly**

#### **Oligopoly**

#### **Competition**

- Patented
- No/little treatment alternatives
- Nearly/newly off-patent
- Some treatment alternatives

- Generics
- Multi-source



## on our results





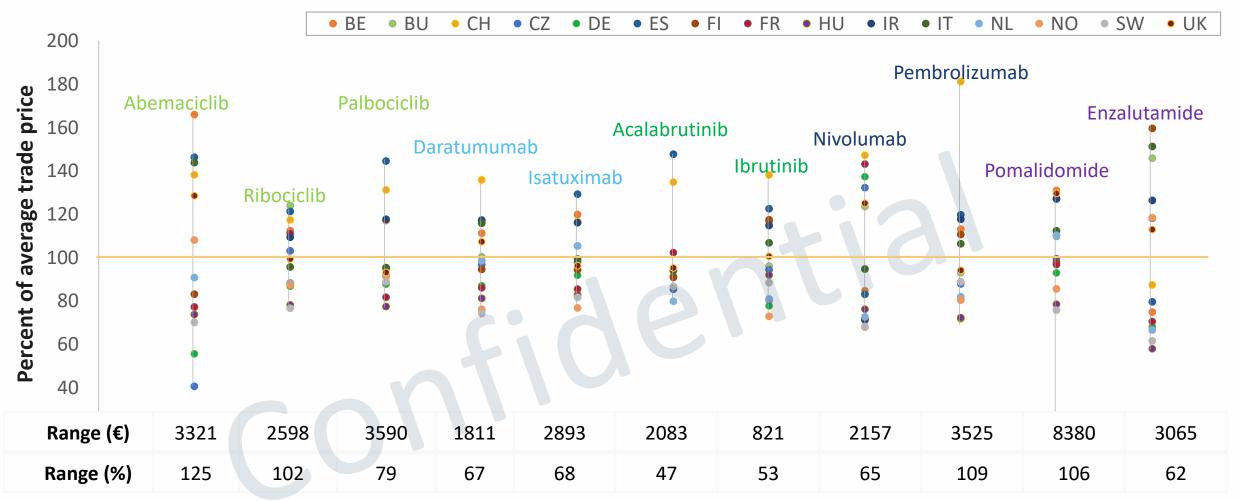






### Differences in <u>public</u> prices

Relative 2022 Average Trade prices, Percent



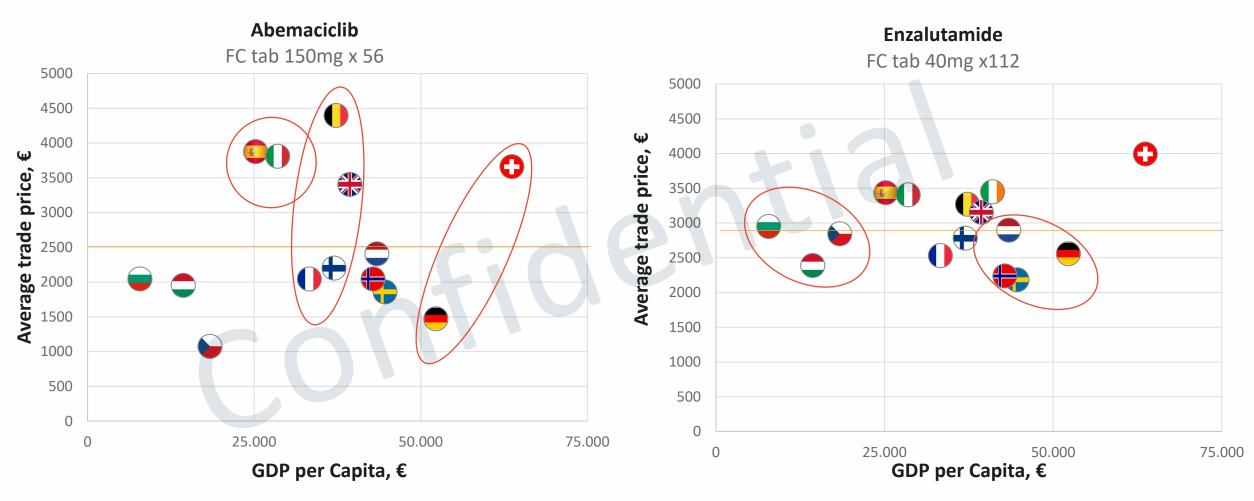
Average trade price = sales revenue/units package sold, exl VAT & margin of pharmacies and wholesalers

#### **Preliminary results**

Source: Own analysis of: MIDAS DATABASE. 2022. IQVIA AG. All Rights Reserved. & EUROSTAT

## Differences in <u>public</u> prices

2022 Average Trade prices, €



## Analyzing confidential (real) prices Inclusion Status



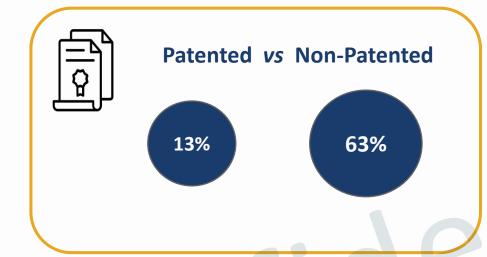
N= 14 4 hospitals with (strong) interest

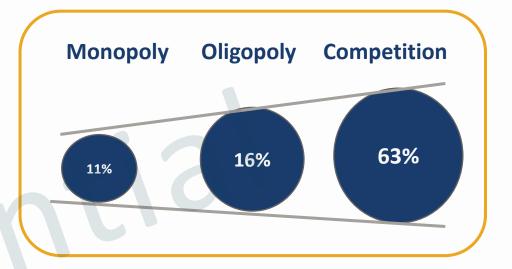
## Confidential discounts, averages

N = 12 hospitals, 5 countries

**Average** discount

28%





PD-1/PDL-1 - inhibitor	BTK-inhibitors	CD38-inhibitor	CDK-inhibitors	Anti-androgens	Other immune suppressant	Pyrimidine analogues
11%	14%	16%	17%	31%	65%	49%











## Come and join us!

Introduction & explanation

- 45 minutes
- Identification of the right contact within hospital
- Questions & remarks
- Additional requirements/permissions

Preparation

- 90-120 minutes
- Interview questions are shared
- Participating hospital prepares the questions

Data collection

- 60 minutes
- Data orally submitted
- Interview not recorded
- Data is saved anonymously

- Co-authorship possible
- my email: n.franzen@nki.nl
- Inclusion ends Jul 31 2024

Included Hospitals: goal 3 per country

The Netherlands

Germany

France

Italy

Hungary

Portugal

Denmark

Belgium

Switzerland











## TRANSPARENCY IN PRICE NEGOTIATIONS

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### Lets discuss!



https://www.mentimeter.com/

Code: **5461 1315** 



- 2. Our hospital successfully negotiates with pharmaceutical companies to purchase cancer medicines at more affordable prices.
- 3. More information of prices of other hospitals and countries (e.g. price transparency) will help our hospital/country to better negotiate prices.



## Legal steps taken

- (1) The research protocol has been approved by the advocacy division of the Antoni van Leeuwenhoek hospital. To ensure compliance with legal aspects, external legal counsel Van Doorne has performed a competition law analysis based on the original EFPN research proposal and again to this price study.
- (2) The research division will only publish price information that is at the time of publication at least one year old.
- (3) Price information submitted to the EFPN will be anonymized and aggregated before any publication or broadcasting so that it cannot be traced back to one single institute, hospital, organisation or patient or a limited number of those. Price information will only be published on a product level if more than 3/5 data points have been collected per country. If not, the EFPN will publish price information per ATC 4 level, ATC 5 level or group countries per region. If not sufficient data points are collected, data will not be published.
- (4) The research division of EFPN will act as the primary and only recipient of Confidential Information within EFPN.
- (5) The research division will process price information by secured e-mailing. The research division will store information in a secure and confidential filing location, with sole access for selected members of the EFPN research unit.
- (6) Data will be transferred through an anonymous link.









