



EPHA 2018

UNIVERSAL ACCESS AND AFFORDABLE
MEDICINES FORUM

TRAILBLAZERS

ROUTES TO BETTER AND AFFORDABLE
MEDICINES BY 2025

EVENT REPORT

20 November 2018

Scotland House, Brussels



| #Trailblazers2025

epha european
public health
alliance

What do we want from our future medicines policy?

The 2018 EPHA Universal Access and Affordable Medicines Forum took place in Brussels on November 20; this was the third edition of the annual event organised by the European Public Health Alliance, bringing together key decision makers to move the access to medicines debate forward.

The 2018 Forum took place at a critical juncture, just ahead of the 2019 European Parliament elections and renewal of the European Commission, which will trigger significant changes in policy-making in Brussels. The future health and health care policy context is being shaped, with many processes already in motion, and EPHA continues to contribute to the debate.

HIGHLIGHTS AND TAKE-HOME MESSAGES FROM THE FORUM

The next European Commission should:

- Guarantee an inclusive, balanced and transparent conversation around access to medicines
- Pro-business/industry arguments should not overshadow public health policies
- Expert civil society should be consulted and included in the debate

EU Member States have been confronted with many disruptive

changes as numerous new therapies are developed. Payers are under pressure to reimburse as quickly as possible, but there is an uncertainty about the clinical benefits of the new products. This is why participants called for a review of reimbursement procedures and make them more adaptive so that the payers can gather more information and increase their certainty of the clinical benefits of new medicines. Payers' representatives taking part in the Forum emphasized that Fair Pricing does not mean equal pricing but equal access. At the same time, many participants and speakers expressed their concerns about the sustainability of health systems, threatened by the paralyzing price tags of some new medicines. Moreover, speakers reiterated that it is becoming increasingly clear that Member States are paying too much, for too little innovation.

On the ongoing negotiations on the future of Health Technology Assessment (HTA), There was general agreement that HTA is an ally of patients and health care systems. Participants argued that rationing of treatments is not a result of HTA but of the pricing strategies of pharmaceutical companies. They added that HTA is responsible for improving the overall quality of health care and the rationalizing of pharmaceutical expenditure.

“#Trailblazers2025 What about a public fund operating like a venture capital with profits reinvested into the fund to support more new start-ups, and with ethical clauses for valorisation which preserves public benefits? Venture capitalist Jan Van den Bossche: it might be feasible”



Marie-Paule Kiény

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Director of Research, French National
Institute of Health and Medical Research
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Representatives of payers called for transparency of R&D costs and pointed out that there is no justification for keeping the research, development and manufacturing costs secret. They highlighted the many asymmetries (information and power) in the pharmaceutical systems which can undermine the leverage of governments in their negotiations with the pharmaceutical sector.

There were calls for a healthy and robust competition in the pharmaceutical sector in order to guarantee a level-playing field between generics/ biosimilars and branded medicines manufacturers. To this end, emphasis was placed on the need to endorse a holistic approach looking at the overall budget impact of medicines as opposed to individual products and to ensure that there is no abuse of the patent

“Interesting twist in the debate. Q from the floor : How can Europe better incentivize and keep research here? A from two economists (1 private, 1 academia) on the panel: there are more than enough. Incentives already. We are even overshooting. #trailblazers2025 @ EPHA_EU”



Dimitri Eynikel

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Access campaign - Advocacy advisor
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monopolies (such as evergreening practices and others).

Member States representatives noted that the use of real-world data is important, but for now, there are major challenges in properly using this data. They agreed that the level of incentives in Europe is more than sufficient and that no more incentives should be granted to the manufacturers. It may even be worth reviewing whether some of the existing incentives need to be scaled down. On the other hand, they acknowledged that there are also public policy failures as well as the market failures which need to be addressed. The representative of the Holy See described the model of intellectual property rights as outdated,

presenting a barrier to access and innovation.

There was a shared understanding that innovation is the result of both private and public investment. Speakers called for the definition, mapping and tracking of the broad spectrum of public support which goes into medical R&D and for guarantees that there is a return on this multilayered and multifaceted public investment. Extensive attention was put on the need to attach public interest conditionalities to this public support, particularly over the ongoing negotiations for the EU's next research framework programme, Horizon Europe.

There was broad agreement that:

- Transparency is necessary: It is a question of democratic scrutiny and crucial for maintaining the trust in the system
- Public financing of R&D should be increased: This will increase the leverage of governments
- International collaboration is the way forward: It is about negotiating power. The BeNeLuxAI initiative is showing the way while the Valletta Declaration Group of countries is slowly catching up

The originators' representative called for an outcomes-based payment system whereby the value of new drugs will be measured and rewarded. She agreed that new payment models are necessary as well as public-private partnerships.

Other speakers agreed that it is important to direct the medicines where are most needed by patients. This means more efficacy in the system as long as we know how and to what extent these medicines work and for which patients. This will drive investment decisions and ensure equity.

“@EUCouncil @Europarl_EN and @EU_Health should step up there actions to deal with the high level of frustration of health policy makers with unsustainable pharmaceutical prices, says Clemens Auer at EPHA #trailblazers2025”



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