Actualities of Hungarian pharmaceutical financing market



News, current issues

- Legislations come into force from May 2014: NM Decree No.9/1993. (2014.05.01.); ESzCsM Decree No.32/2004. (2014.05.01.)
- NEWS: "Patients disappeared from Hungarian hospitals" link
- NEWS: "Future's medicines" link
- NEWS: "Pharma companies perform well" link
- NEWS: "EMA to recommend 6 new drugs for MA" link
- STUDY: "It's hard to cheat with a prescription" link
- INTERVIEW: "Parliament: Welfare committee for health issues" link

Macro approach to financing healthcare and medicinal products

Balance of the Health Insurance Fund

					Billion HUF
		2014 original		2014	
Health Security Fund	2013. I-XII.	appropriation	I-IV.	% of appropriation	% of last year
Total of Budgetary Expenditures	1 847,8	1 884,2	652,8	103,9%	112,7%
Curative preventive provisions	908,0	931,9	339,4	109,3%	126,1%
Medicine subsidies	296,0	294,1	99,4	101,4%	102,7%
Medicine subsidies (pharmacy)	281,5	222,4	94,5	127,4%	101,0%
Total Of Budgetary Revenues	1 847,8	1 884,2	648,3	103,2%	104,4%
Social Security Contributions	768,0	852,9	300,0	105,5%	118,1%
Contribution of Pharmaceutical Manufacturers and Wholesalers	58,7	56,0	19,7	105,5%	82,7%
Balance	0,0	0,0	-4,5		-10,7%

Market forecast

Healthware efficiently simulates market situations by developing and improving complex econometric models using economical-statistical estimators. Based on these models Healthware forecasts turnovers and can provide various scenario analyses.

For further information, please visit our website or contact our colleagues: <u>link</u>

Product offering

The 2014 budget counts with 2% increase in the expenditure and in the revenues too, while the balance is nil. The central budget contribution is planned to be less with 5% than last year fulfilment, and this gap is filled with the 11% higher social security contribution (85 bilion HUF). The medicine subsidies plan are lower with 2 billion HUF than last year expenses

In the first four months of 2014 the Health Security Fund produced a 0,7% deficit. The surplus (36 billion HUF) of first three months turned to deficit because the early payment of the wages due in May.

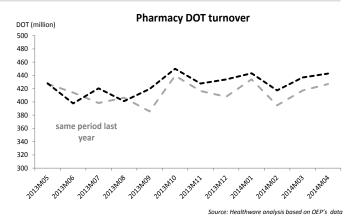
Changes to subsidised medicinal product categories

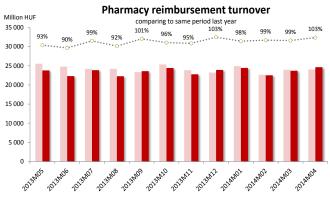
	Changes ii	n the publ	ic arug iisi				
	2014	2014	2014	2014	2014	2014	2014
	Jan.	Feb.	Mar.	Apr.	May	June	2014
Number of new products	22	34	13	16	21	22	128
Number of new Al	1	8	1	0	1	1	12
Number of delisted products	63	21	42	49	18	18	211
Prices							
Decrease	33	7	5	349	6	4	404
Increase	0	0	1	51	1	0	53

	Changes	in the pub	olic drug lis	st .			
	2014	2014	2014	2014	2014	2014	2014
	Jan.	Feb.	Mar.	Apr.	May	June	2014
Reimbursement							
Decrease	47	1	7	863	9	3	930
Increase	3	2	0	213	1	1	220
Co-payment							
Decrease	46	10	8	540	8	6	618
Increase	16	0	3	642	11	0	672

Source: Healthware analysis based on OEP-PUPHA data

Dynamics of the sales/circulation of prescription-only-medicine





Source: Healthware analysis based on OEP's data

While the turnover or reimbursed medicines in pharmacies increased by 2,2% in 2013 (measured in DOT), the total medicine subsidy of Health Security Fund was lower by 5,9%. The main cause of this saving was the reference price system which lead to significant cuts in prices and reimbursements.

Drug sales in the first four months of 2014 was 4,01% higher than the same period last year, while the average reimbursement per DOT increased slightly compared to the previous month. The reimbursement turnover is 0,26% below for this period compared to last year.

pharmaceutical market



Market data

Marketing authorisation information

2013	EMA	OGYI	2014 - Q1	EMA	OGYI	April 2014	EMA	OGYI
New brands	79	207	New brands	16	56	New brands	10	10
New SKUs	716	1 742	New SKUs	185	510	New SKUs	92	215
					Source: He	ealthware analysis based on OC	GYI's and EN	1A's data

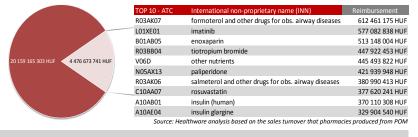
TOP10 DISTRIBUTOR by all reimbursement paid in April 2014



TOP10 BRAND by all reimbursement paid in April 2014



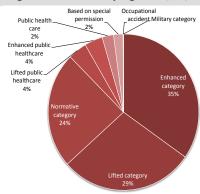
TOP10 ATC by all reimbursement paid in April 2014



Average number of medical sales reps; 04/2014

All	1 003
Medicinal products	1 545
Medical aids	222
Both	36

Drug reimbursement by legal title; 04/2014



Source: Healthware analysis based on the sales turnover that pharmacies produced from POM

Change in health care expenditure during the economic crisis — Case study

The economic crisis started from 2008 resulted in austerity measures among the governments' budget policies. This tendency influenced the expenditure on health care and pharmaceuticals. While the majority of governments have deemed healthcare provision as strategically important, their willingness and ability to pay for health services is under threat. Analysis conducted by OECD shows that across the EU member states, healthcare spending as a proportion of GDP increased from 7.3 per cent in 2000, to 9.2 per cent in 2009. However, by 2010 healthcare spending had marginally declined under 9.0 per cent.

In our analysis we investigated the relation between the healthcare expenditure and the GDP growth. On the diagrams the vertical axis shows the average annual change in health spending between 2007 and 2011, while the horizontal axis shows the average annual change in the real GDP in the same period.





The diagrams show that there is a strong link between the two variables. The first diagram reveals that the majority of the countries increased their health spending above the rate of the GDP growth, while the spending on pharmaceuticals is in level or even behind the GDP growth, with a few exceptions. Hungary can be highlighted among the exceptions, because in spite of the negative rate of the GDP growth its pharmaceutical spending was increasing until 2011, but we note that in 2012 significant measures aiming to reduce the drug budget were introduced.