

# International overview of appraisal systems for rare disease treatments

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### **Objectives and process**

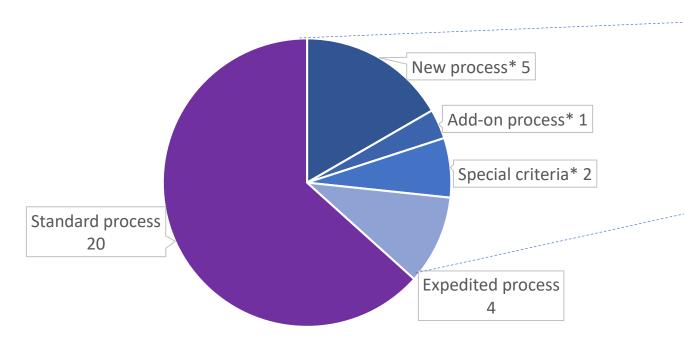
**Objectives:** documentation of international rare disease appraisal and reimbursement processes

Validation for accuracy and completeness & Questionnaires and follow-up questions desk research done to (N=32)create **country** Questionnaire sent to vignettes (N=32) country experts (incl. informed consent) **Identification** of country experts in EU MS, EEA countries, Australia, Canada, New Zealand (N=37) January 2018 – to date



## HTA appraisal/reimbursement processes for medicines to treat rare diseases in all EU Member States, EEA countries, Canada, New Zealand and Australia

HTA appraisal/reimbursement processes for rare disease treatments (N=32)



	Rare	Ultra-rare
Special criteria		2/2
Add-on process	1/1	1/1
New process	5/5	3/5



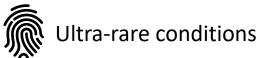


<sup>\*</sup> Referred to as **special processes** in this presentation

NB. Many countries have named-patient programmes, but this is out of the scope of this research,

(**Work in progress: results may change**)

### Overview of country special processes for rare disease treatments



#### **ENGLAND**



 Highly specialised technology: ultraorphan drug framework, managed access agreements, higher willingness to pay and greater uncertainty

#### **GERMANY**



Special reimbursement status (benefit automatically proven)



### LITHUANIA



Special reimbursement status
(special positive list, therapeutic value not graded, special committee)\*



#### **ROMANIA**

 Reimbursement based on points system (extra points for orphan drugs)



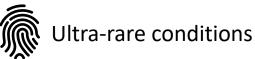
#### **SLOVAKIA**

 Greater willingness to pay based on points system (extra points for orphan drugs)





### Overview of country special processes for rare disease treatments



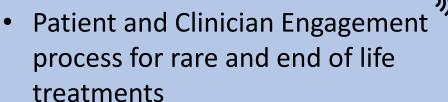


### **NORWAY & SWEDEN**

Higher willingness to pay and greater uncertainty



### **SCOTLAND**



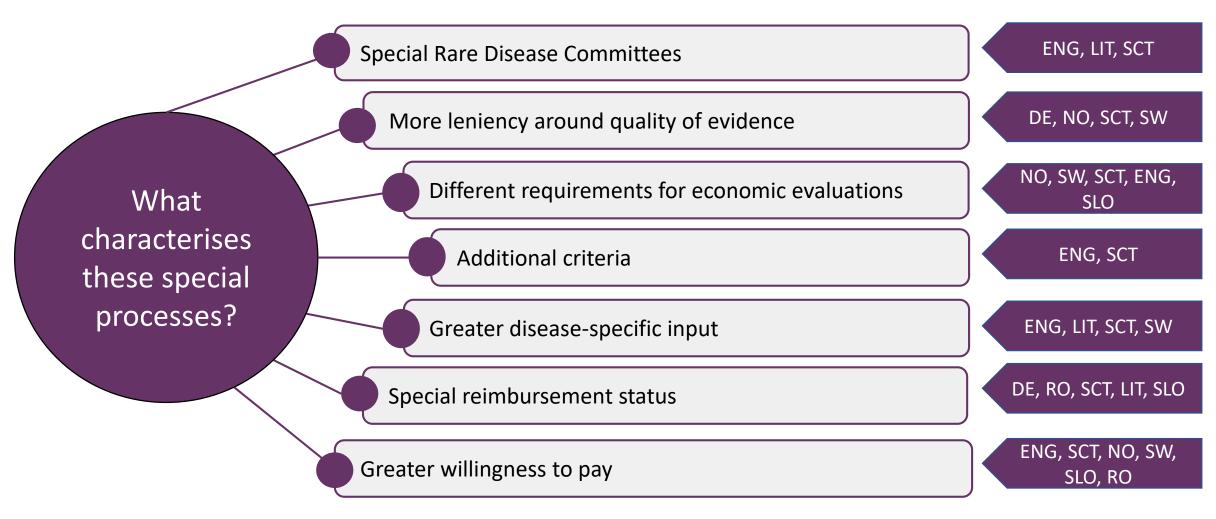


- Ultra-orphan drug framework
- New ultra-orphan drug process (April 2019): 3 year monitoring





### Overview of main differences with standard processes







### **Challenges in appraising OMPs**

### **CHALLENGES**

Lack of good quality clinical data (5)

Lack of real world data

Justifying value for money (unacceptably high ICERs)

Monitoring treatment efficacy

Managing budget impact

Lack of criteria and transparency

Making arrangements work for all stakeholders

No long term meaningful outcomes

### Stated impacts (countries with special processes)

More OMPs applied for are reimbursed (5)

Allows reasonable reimbursement considering limitations (2)

OMPs privileged in reimbursement process (1)





### Thank you!

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