



## Abstract of the PPRI Report

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PPRI (Pharmaceutical Pricing and Reimbursement Information) is a research project funded by the European Commission, Health and Consumer Protection Directorate-General (DG SANCO) and the Austrian Federal Ministry of Health, Family and Youth (BMGFJ). The project management is undertaken by the main partner Gesundheit Österreich GmbH, Geschäftsbereich Österreichisches Bundesinstitut für Gesundheitswesen / Austrian Health Institute (GÖG/ÖBIG) and the associated partner World Health Organisation, Regional Office for Europe (WHO Europe).

The objective of the PPRI project, which started in April 2005 and ended in October 2007, was to improve information and knowledge on the pharmaceutical systems in the Member States of the enlarged EU. This was mainly achieved by strengthening the network of relevant institutions in the field of pharmaceuticals and by compiling a comparative analysis, based on 21 core indicators for comparing pharmaceutical systems and on country specific reports (PPRI Pharma Profiles).

Within its time-frame of two and a half years, PPRI established a network of 52 institutions, mainly competent authorities and third party payers from a total of 31 countries. The PPRI network includes representatives from all 27 EU Member States except Romania, plus Albania, Canada, Norway, Switzerland, and Turkey. Additionally, European and international institutions (European Medicines Agency, OECD, WHO, World Bank) have been involved in the PPRI project.

The participating national representatives produced PPRI Pharma Profiles which provide in-depth information and data on pharmaceutical pricing and reimbursement in their country. At the end of the PPRI project, more than 20 Pharma Profiles have been finalised, and for the future annual up-dates of the profiles are planned.

The PPRI comparative analysis, which included 27 countries (the so-called "PPRI countries"), confirmed the existence of 27 different pharmaceutical pricing and reimbursement systems in Europe, though some identical key characteristics of pharmaceutical systems can be found in several PPRI countries. For instance, 24 of the 27 PPRI countries control the prices of pharmaceuticals (or of a group of pharmaceuticals, usually reimbursable pharmaceuticals). Pharmacy remuneration is regulated in all PPRI countries, and regulated wholesale mark-up schemes exist in 21 PPRI countries. All PPRI countries have reimbursement lists (national formularies) in place, of which positive lists, including pharmaceuticals that may be prescribed at the expense of a third party payer, are the most widespread (in 25 countries).

Some tools have become quite common in recent years. For example, at the end of the PPRI project, 18 of the 27 PPRI countries applied a reference price system, which implies that a maximum reimbursement amount has been defined for groups of interchangeable pharmaceuticals. Additionally, the methodology of external price referencing (international price

benchmarking), i.e. comparing to the prices of the same product in other countries, has become a widely-used methodology applied for pricing decisions in 22 PPRI countries.

Despite these similarities, each country features a specific pharmaceutical system, with its unique characteristics. PPRI offered the opportunity to learn about the systems of the fellow countries, including their experiences with reform measures. The PPRI participants have shown interest to follow-up with future developments in pharmaceutical pricing and reimbursement, and to devote on filling gaps in data availability and increasing comparability of pharmaceutical expenditure and consumption data.

Deliverables produced under the framework of the PPRI project, including the PPRI Pharma Profiles and the PPRI Glossary, are accessible through the PPRI website: <http://ppri.oebig.at>  
→ Publications.