REVISITING REIMBURSED DRUGS WITH ALTERNATIVE PAYMENT MODEL IN TURKEY

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INTRODUCTION

Dramatically increasing drug expenses and innovative therapies entering the market have led Turkish Social Security Institution – with 98,6% coverage of health care and drug expenses - seek new decision making models for effective budget allocation. In 2016, Alternative Reimbursement Committee had been founded to evaluate high cost therapies both for registered or Named Patient drugs in a distinguished way. Due to legislative incompetency, the committee has been executing evaluations on financial-based models so far.

OBJECTIVE

This analysis is to ascertain the alternative payment environment for innovative therapies in Turkish pharmaceutical market, reimbursed within last two years.

METHODOLOGY

The study was undertaken from the Turkish health care payer perspective (SSI). Both registered or NPP drugs granted reimbursement by Alternative Reimbursement Committee are included in the analysis. Resource utilization data were obtained from Health Implementation Guideline Annex 4A and Annex 4C and RxMediapharma

FINDINGS

Table 1: Products Granted Reimbursement with ARM

Active Ingredient	Indication
İdursulfase	Mukopolisakkaridoz Tip II
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Cholic Acid	Zellweger Spectrum Disorder
Mifamurtide	Osteosarcoma
Vedolizumab	Ulcerative Colitis, Crohn's Disease
Tamoxifen citrate	Breast cancer
Elosulfase alfa	Morquio Syndrome
Metreleptin	leptin deficiency lipodystrophy
Nivolumab	Melanoma, NSCLC
Nusinersen sodium	Spinal muscular atrophy
Pneumococcal vaccine	Pnömokok aşısı
Taliglucerase alfa	Type 1 Gaucher disease
Blinatumomab	Acute lymphoblastic leukemia
Mepolizumab	Severe Asthma
Chenodeoxyxholic acid	Xanthomatosis Cerebrotendinous
Bacillus Calmette-Guerin	vaccine
Pomalidomide	Mltiple Myeloma
Sapropterin dihydrochloride	Phenylketonuria (PKU)
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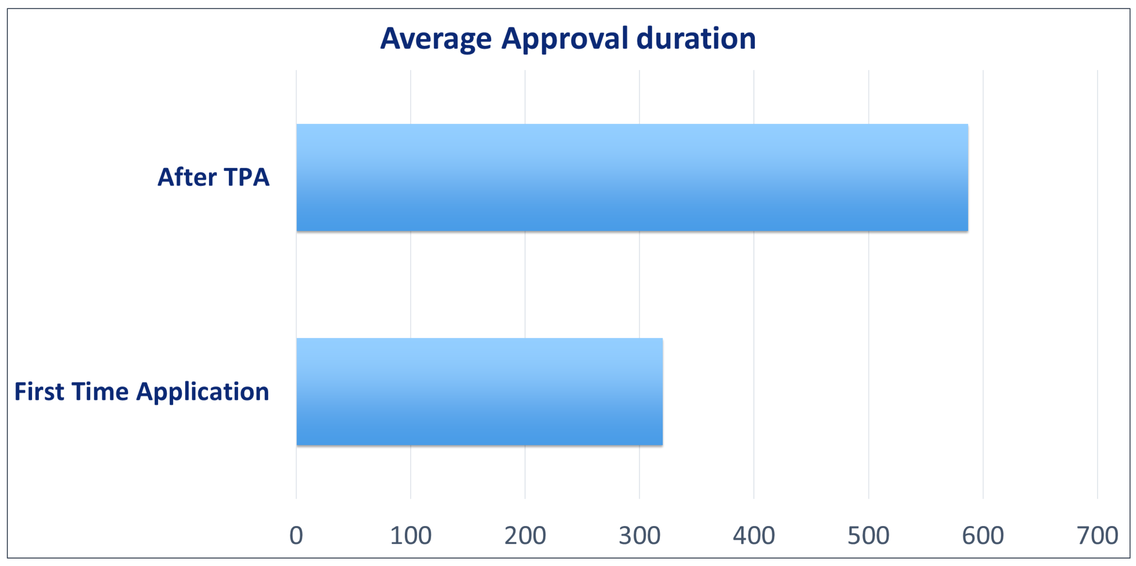
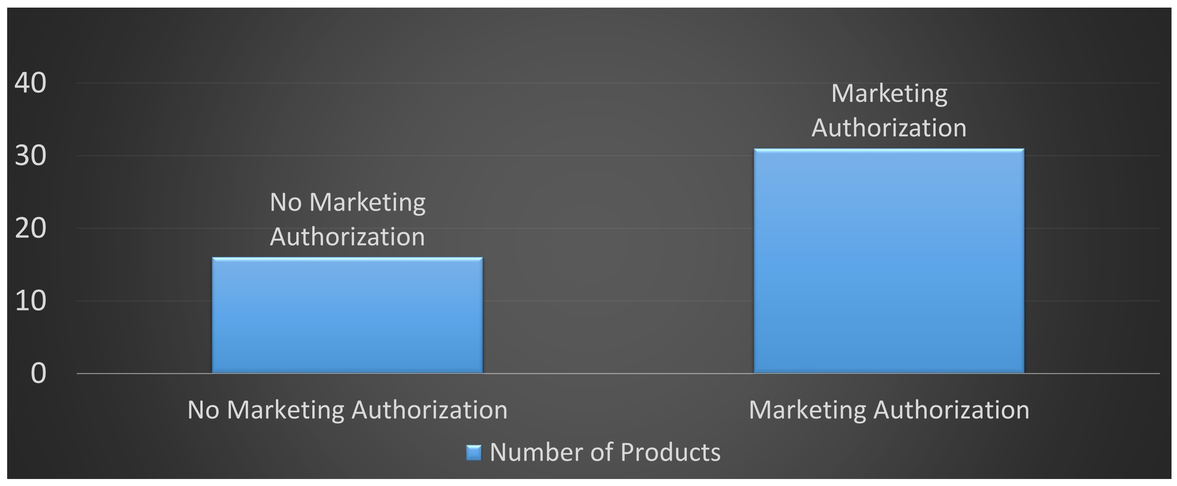
Ocrelizumab	Multiple Sclerosis
Ekulizumab	PNH, AHUS
Osimertinib	NSCLC
Gefitinib	NSCLC
Alektinib	NSCLC
Seritinib	NSCLC
Dasabuvir	Hepatitis C
Ritonavir+Ombitasvir+Paritaprevir	Hepatitis C
Sofosbuvir	Hepatitis C
Sofosbuvir+Ledipasvir	Hepatitis C
Human epidermal growth factor	Diabetic foot ulcer
Trastuzumab Emtansine	HER2 positive metastatic breast cancer
Ipilimumab	Malignant Melanoma
Trihexyphenidyl	Antiparkinson drugs
Evolokumab	Lipid Modifying Agent
Pirfenidon	Idiophatic Pulmonary Fibrosis
Tiyoguanin	Acute Leukemia
Carmustine	Multiple Myeloma, Lymphomas
Natalizumab	Multiple Sclerosis
Pirfenidon	Idiophatic Pulmonary Fibrosis
Metreleptin	Leptin Deficiency
Phenspirit Hydrochloride	Respiratory diseases
Fampride	Multiple Sclerosis
Trametinib	Malignant Melanoma
Ataluren	Duchenne muscular dystrophy
Alemtuzumab	Multiple Sclerosis
Kobimetinib	Malignant Melanoma
Dimetil Fumarat	Multiple Sclerosis

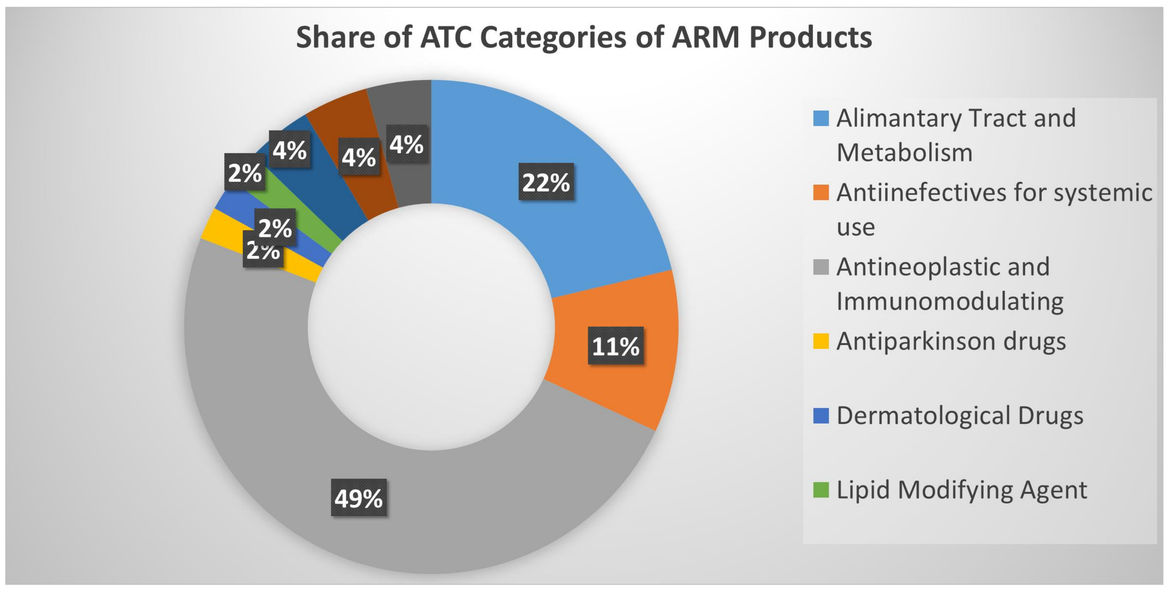
Graphic 1: Comparison of Average Duration of ARM Evaluations



Graphic 2: Retrospective Analysis of # of Products with ARM



Graphic 3: Classification of ARM Granted Reimbursement by ATC Categories



RESULTS

There are 47 SKUs reimbursed via alternative payment models since 2016. 16 of them have no marketing authorization while 31 products are already on the market. Average evaluation period for products that were previously supplied via International Pharmacy is 587 days, while first time applications take on an average of 320 days. In general, the average evaluation duration for all products is 446 days. Products according to ATC code, respectively are; Anti-neoplastic and Immuno-modulating, Anti-infective for systemic use, Musculo-skeletal System, Alimentary Tract and Metabolism, Nervous system and Respiratory system. Registered companies respectively are: Amgen, Astra Zeneca, Alexion, Biogen, Abbvie, Gilead, BMS, Takeda, mostly in NSCLC, Hepatitis C, Multiple Sclerosis, Malignant Melanoma therapeutic areas.

CONCLUSION

Results demonstrate that the evaluation conditions and durations vary according to case, unmet need and the competitive environment.

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