

Highlights of the expert meeting 'adaptive pathways'/early access schemes

1 & 2 March, Amsterdam



Tidde Goldhoorn
Joëlle Hoebert
Ministry of Health, Welfare and Sport, The Netherlands



Innovation for the benefit of the patient:
early interaction between market
authorization, health technology assessment
and 'payer' in order to optimize patient
access to innovative medicines









Why this meeting?

- EU Presidency Italy (2014): innovation for the benefit of the patient
- WPPHSL: better access to innovative and affordable medicines
- One of priorities Dutch EU Presidency: better access to innovative medicines for the benefit of patients at affordable prices





Four subpriorities pharma

- 1. Facilitate voluntary cooperation between EU Member States in the field of Pricing & Reimbursement
- 2. (Joint) analysis of unmeant and unwished incentives in EU market access legislation
- 3. Promote faster ways of (flexible) market access of innovative (essential) medicines, but under the right conditions.
- 4. Stimulate a European debate about the big challenges ahead in the field of pharmaceutical policy.





Aim of the expert meeting

- Promote timely ways of (flexible) market access of innovative medicines, under the right conditions
- (Further) introduction and interaction between market authorization and HTA organizations, policy makers and payers
- Determine preconditions how adaptive pathways may help to get promising medicines to patients at affordable prices
- Shaping future policy in the field of adaptive pathways/early access schemes





Three main questions

- For which products are 'adaptive pathways' useful and advisable
- Alignment procedures and requirements marketing authorisation and HTA ("how to stimulate cooperation")
- Necessary conditions to come to acceptable outcome also for payer ("early interaction with payer, managed entry schemes, exit criteria")





Some highlights

- Positive interaction between different experts and "getting to know" each other's world
- Demand for better involvement of whole "chain" from beginning
- Upstream: already quite a lot of exchange of information between
 MA and HTA (more effective?)
- Downstream: complex as different health systems
- Also opportunities: common problems, alignment of patient registries, exit strategies, planning of RWD
- Managing expectations: EU level vis-à-vis patient level
- Followed by kick-off meeting of EUnetHTA (JA-3) and informal SAWP





Next steps....

- CAPR meeting (23 & 24 March)
- Feed-back to HMA meeting (June 2016)
- Next follow-up meeting to be organized later this year?

