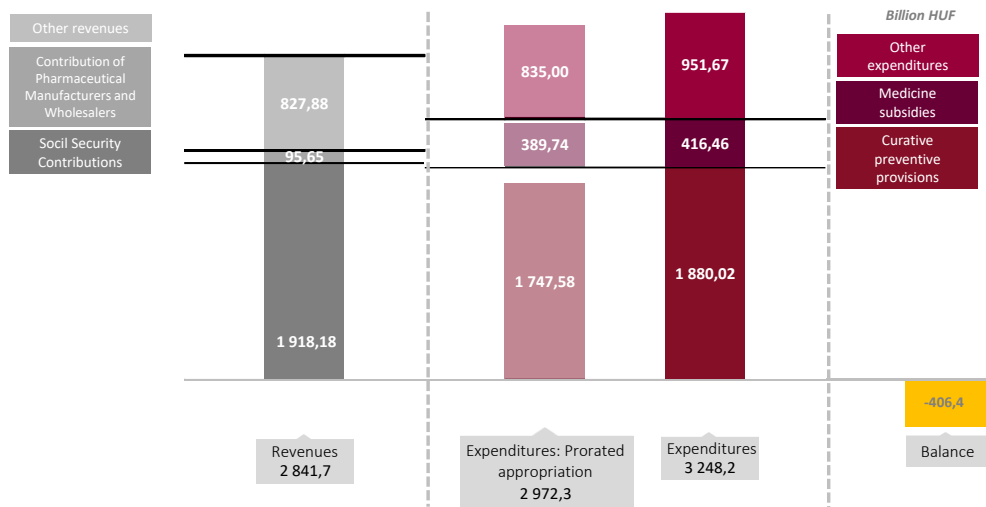


News, current issues

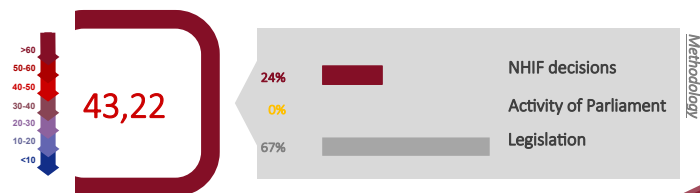
- News Kásler: Oncology continues to develop in Hungary >>
- News Therapies waiting for reimbursement can help cancer patients >>
- News Hungary leads cancer mortality statistics in Europe >>

Macro approach to financing healthcare and medicinal products

Balance of the Health Insurance Fund, December 2021



Decision-making index, December 2021



Product offering

Burden of disease analysis

The indirect costs of therapies can currently be validated in only a limited way in health economic analysis made from local financing viewpoint. However, in other levels of decision making the cost analyses, which are made in social approach, can include objective and well communicable messages. These details can aid in forming of preferences between different healthcare technologies. By way of data-request from OEP we provide the summing up of the following information:

- Demographic and epidemiologic characteristics (by age, sex and comorbidity)
- Dispersion of patients by disease severity based on pharm. treatment pattern
- Cost analyses (on data of prescr., inpatient and outpatient care, labs and diagnostic services, hospice, sickness benefit)

We suggest the patient survey method to define the patients indirect costs and the other state expenditure

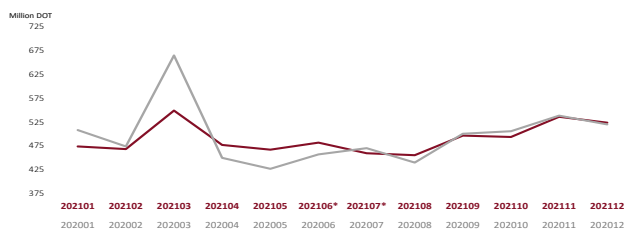
- Sickness absence costs
- Home remodeling costs
- Informal care
- Other indirect burdens

More information about our services:



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

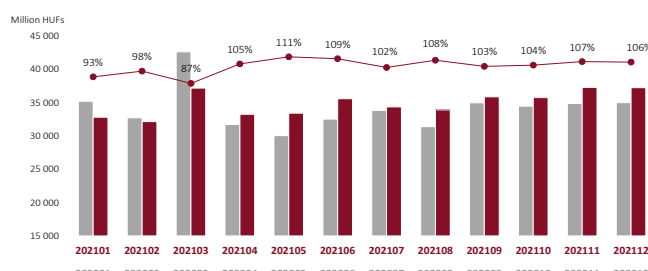
Pharmacy DOT turnover



*Note: Turnover data of SKU no. 210900238 is not displayed in DOT turnover figure (vitamin D3) - DOT 200,000 days -, this product first appeared in June 2021, as it significantly distorts the DOT turnover values as well as the overall market performance. The reimb. turnover of the SKU was taken into account.

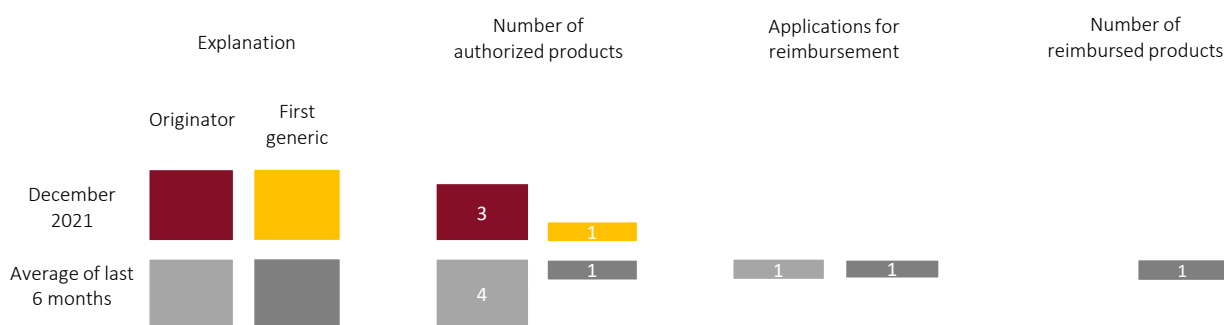
Source: Healthcare analysis based on NHIFA data

Pharmacy reimbursement turnover



Source: Healthcare analysis based on NHIFA data

Changes to subsidized medicinal product categories, December 2021



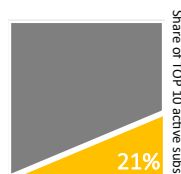
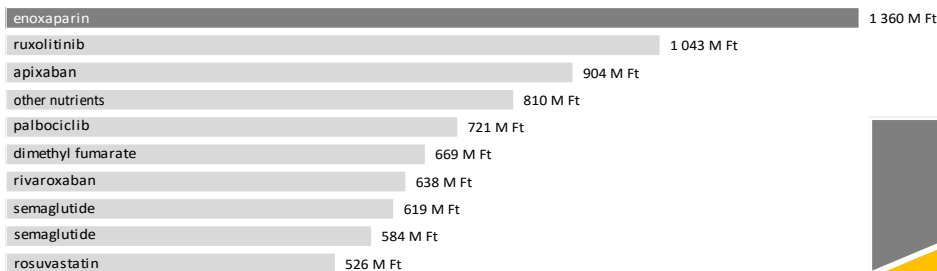
Source: Healthcare analysis based on NHIFA data



Market data

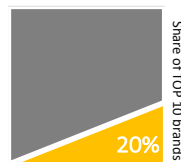
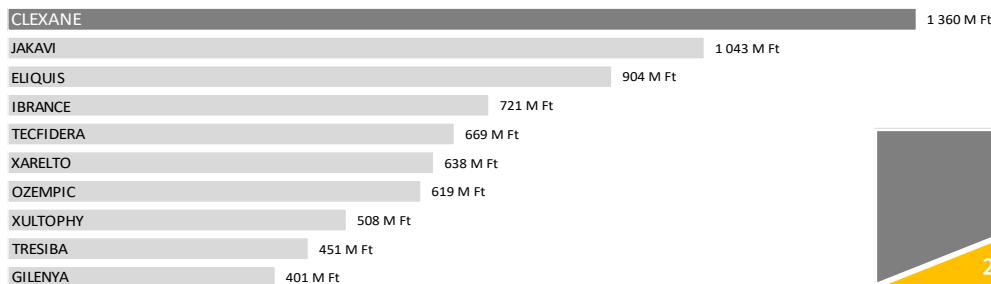
Toplists of reimbursement and number of patients, December 2021

TOP 10 ATCs by all reimbursement paid



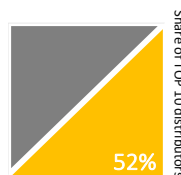
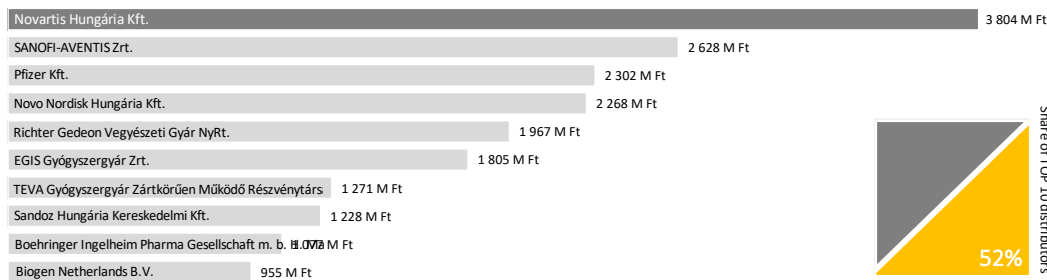
Source: Pharmacy turnover data, Healthware analysis

TOP 10 brands by all reimbursement paid



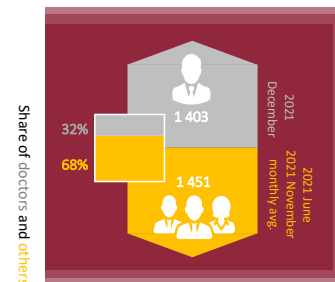
Source: Pharmacy turnover data, Healthware analysis

TOP 10 distributors by all reimbursement paid



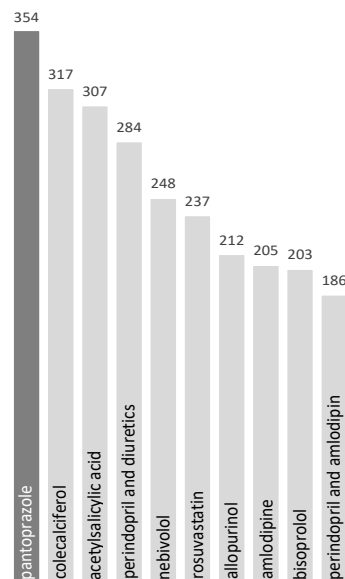
Source: Pharmacy turnover data, Healthware analysis

Average number of medical sales reps



Source: NHIFA data, Healthware analysis

TOP 10 active substances by number of patients (thousand patients)



Source: Pharmacy turnover data, Healthware analysis

Analysis of pharmaceuticals published in January 2022 — Case study

Healthware analysis based on NEAK data

On 1st January 2022, a total of 38 applications (26 brands) have been accepted to the reimbursement system. All of these applications required a legislative amendment, which meant that NHIFA could not take a final decision on its own, so the applications were referred to the Ministry of Human Resources. *

In this case study, we provide a brief overview of these requests' typical processing time, also divided into sections according to each decision point. When interpreting the analysis, it is important to consider that after the change of legislation in 2018, the analysis of a submission's timeline faces many obstacles, since these procedures have to be closed within 360 days. In the case of submissions that appears to exceed this procedure time, companies tend to initiate the closure of the process and resubmitting the dossiers without any, or with minimal changes. In our analysis, the requests closed by a termination order and submitted again within a few month were considered as a re-submission. In case of these products, the submission date was determined based on the first submission.

Based on our analysis, the following statements hold regarding the timeline of the analyzed procedures:

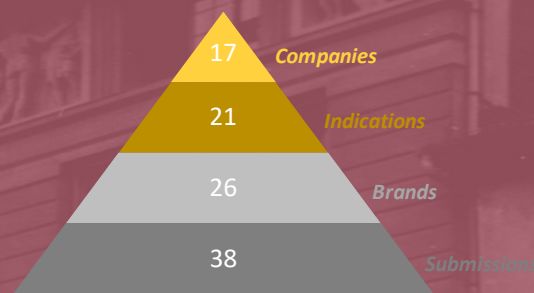
- ♦ average time between (atb) submission and proposal to the TÉF is 12 days (min. 3 days, max. 23)
- ♦ atb. the handover to TÉF and the first TÉB session takes 99 days (min. 42, max. 422)
- ♦ atb. first and last TÉB session is 102 days (min. 14, max. 154)
- ♦ atb. last TÉB session and proposal to MoH is 159 days (min.19, max. 408)

NHIFA proposes legislation amendment requests intermittently to the Minister responsible for Health Insurance - in line with the TÉB decision -, based on 2006. Act XCVIII. [Gyftv.], according to which reimbursement

of pharmaceutical applications or alteration of reimbursement conditions of an already reimbursed medicine requires amendment of legislation.

A more detailed analysis of these submissions have been published in the [March Special Edition](#), where, in addition to the overall timeline, we also present the distribution of submissions based on the need for the legislative amendment. We also highlight the companies and therapeutic areas with the most submissions and analyze the procedure times of the given submissions in different breakdowns (by requested reimbursement categories, companies).

* In this analysis we have used the information that was published on 24th of February, 2022 by NHIFA



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