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ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE**

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Medicines in Hospitals

On commission from the European Commission and the Austrian Federal Health Ministry, the Pharmaceutical Health Information System (PHIS) has published a report on medicines management in hospitals.

Brief Summary

Information on medicines management in the in-patient sector has always been considered to be a “black box” compared to the knowledge available on pharmaceutical policies in the out-patient sector. In particular, prices of medicines used in hospitals are in general not known.

The work package Hospital Pharma of the PHIS (Pharmaceutical health Information System) project, aimed at bringing light into the black box of pharmaceutical procurement, distribution, pricing, financing and use in the in-patient sector.

This was achieved by country reports on medicines management in the in-patient sector, which were produced by representatives of the national competent authorities from 20 European countries, supplemented by concise country information by seven other EU member States. In addition a survey, including a collection of prices, in hospitals of five case study countries was undertaken.

The present PHIS Hospital Pharma Report contains both a comparative analysis of medicines management in hospitals in 27 European countries and the findings of the case study survey.

A major result of the analysis presented in this report is the need expressed for an improved interface management between the in-patient and out-patient sectors, since the first treatment usually starting in hospital care influences the choice of medicines in the out-patient sector.

Medicines used in hospitals are usually funded out of the hospital budget. They are included in the DRG or DRG-like system which exists as a remuneration scheme in many hospitals in Europe. Some European countries (e.g. France, the Netherlands) have introduced special financing schemes for some, usually very expensive, medicines used in hospital care. These medicines are not funded out of the hospital budget, but are either fully or partially paid separately by the social health insurance.

Medicines are normally supplied by the industry and wholesalers to the hospitals. Deliveries by hospital pharmacies or community pharmacies are possible and done in a few countries. Hospital pharmacies may and do serve out-patients, the internal medicines management in a hospital is the primary task of the hospital pharmacy. Hospital pharmacists are among other things responsible for the rational use of medicines and they monitor the development of pharmaceutical consumption and expenditure of their hospitals.

Medicines may be procured centrally by procurement agencies which purchase for all public hospitals, by procurement groups or individually by hospitals. Different procurement methods are in place: tendering, competitive negotiations and direct procurement.

Prices achieved in the procurement process might be lower than the official list prices. This is attributable to the fact that in the in-patient sector discounts and rebates are common and their

amount is not limited by law, as is the case for price reductions granted in the out-patient sector. As a result, discounts and rebates of up to 100 % are possible and were reported for a few countries.

To read or download the full report (188 pages)

http://ec.europa.eu/health/healthcare/docs/phishospitalpharma_report_en.pdf