



The Slovenian Experience

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Disclosure

- I have no actual or potential conflict of interest in relation to this presentation.

Slovenia – quick facts

- ≈ 2 million inhabitants, GDP 17.550 EUR
- ≈ 20.000 km²
- UNIVERSITY CHILDREN HOSPITAL LJUBLJANA
 - single pediatric oncology center (70 pts per year)
- INSTITUTE OF ONCOLOGY LJUBLJANA
 - 350 outpatients and 210 inpatients are examined or treated every working day



Health insurance in Slovenia

Compulsory health insurance (CHI):

- CHI covers entire population (2 million inhabitants)
- CHI follows basic principles - universal coverage, solidarity, equity, etc.
- Top-on co-insurance as an option (co-payment, voluntary insurance)
- **Health Insurance Institute of Slovenia (ZZZS)** - single provider of CHI
- Three large fields of benefits:
 - health services
 - sick leave (> 30 days)
 - medicines



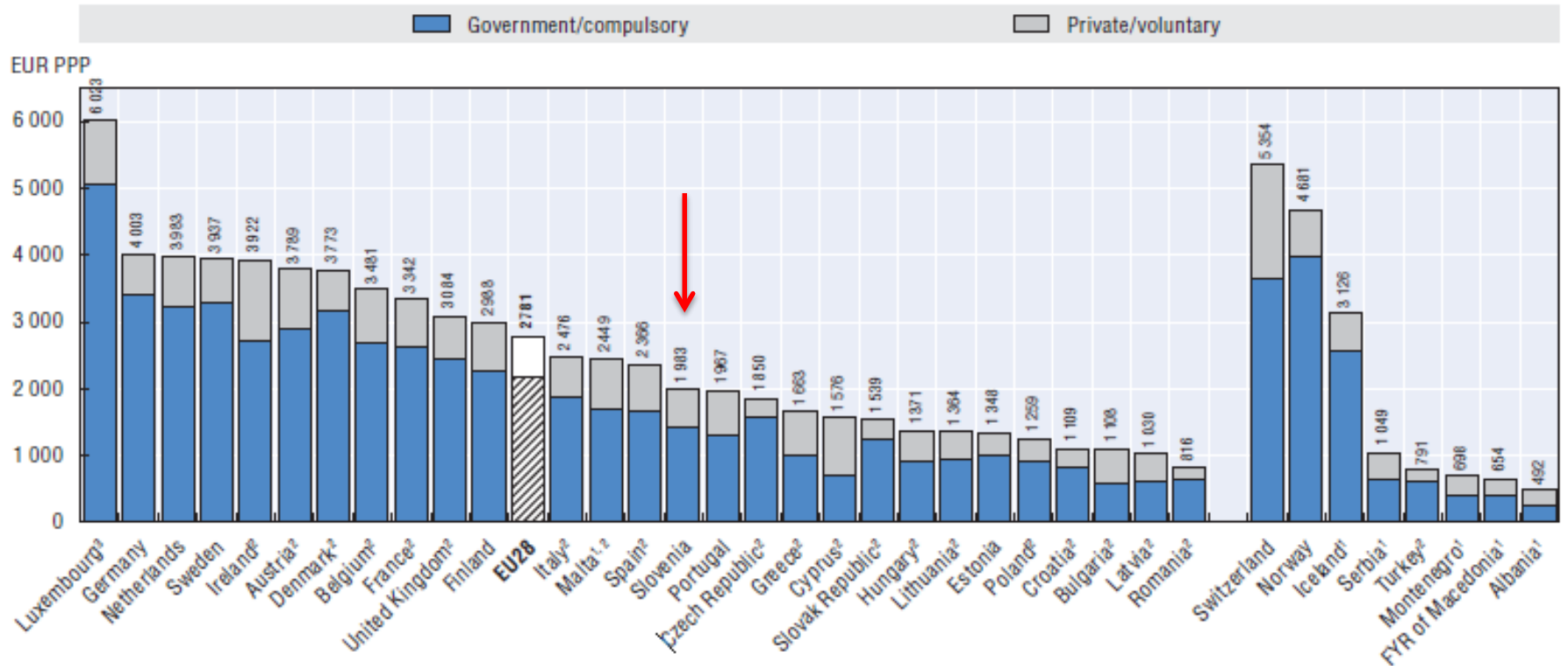
Some data on medicines

	2015
No. of reimbursed prescription drugs	2.709
No. of prescriptions per capita	8,3
No. of packs per capita	19,4
Compulsory HI expenditures for prescription drugs per capita	133 €
Compulsory + co-insurance exp. for all drugs per capita	250 €

Provided by Furst J, ZZS

Health care expenditures per capita in 2015 in EUR

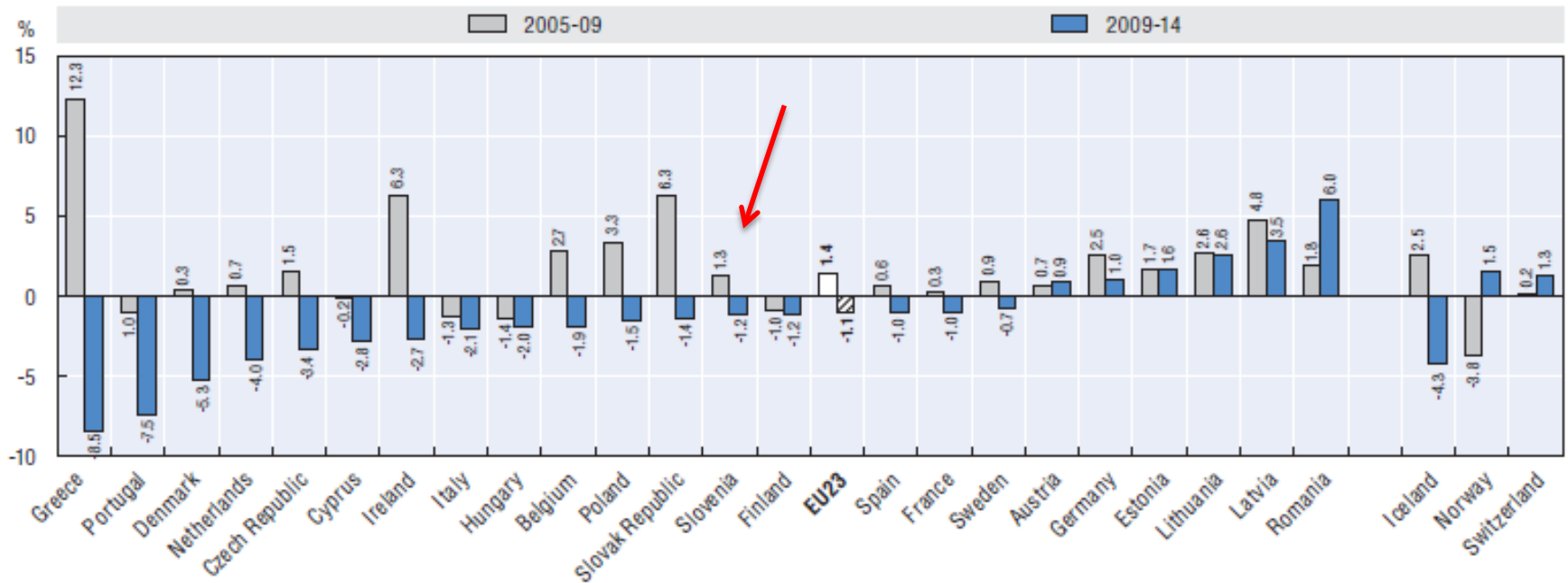
5.1. Health expenditure per capita, 2015 (or nearest year)



1. Includes investments.
 2. OECD estimate.
 3. For Luxembourg, the population data refer only to the total insured resident population, which is somewhat lower than the total population.
- Source: OECD Health Statistics 2016; Eurostat Database; WHO, Global Health Expenditure Database.

Average annual growth rates in pharmaceutical expenditures in EUR

5.10. Average annual growth in pharmaceutical expenditure¹ per capita, in real terms, 2005-09 and 2009-14 (or nearest year)



1. Includes medical non-durables.

Source: OECD Health Statistics 2016.

StatLink <http://dx.doi.org/10.1787/888933429320>



PRICING

JAZMP (Agency for Medicinal Products and Medical Devices of the Republic of Slovenia)

- Pricing authority for medicinal products
- Approval can be granted within 1 to 1.5 months
- Internal and external reference pricing is used (lowest price)
- regulation is straightforward and transparent: wholesale prices are $\leq 100\%$ (of lowest price in Germany, France or Austria);





Pharmaceutical policy

- **HEALTH INSURANCE INSTITUTE of SLOVENIA (ZZZS)**
 - 10 regional units and 45 branch offices, cca 860 employees
 - expenditure: 2,43 billion €

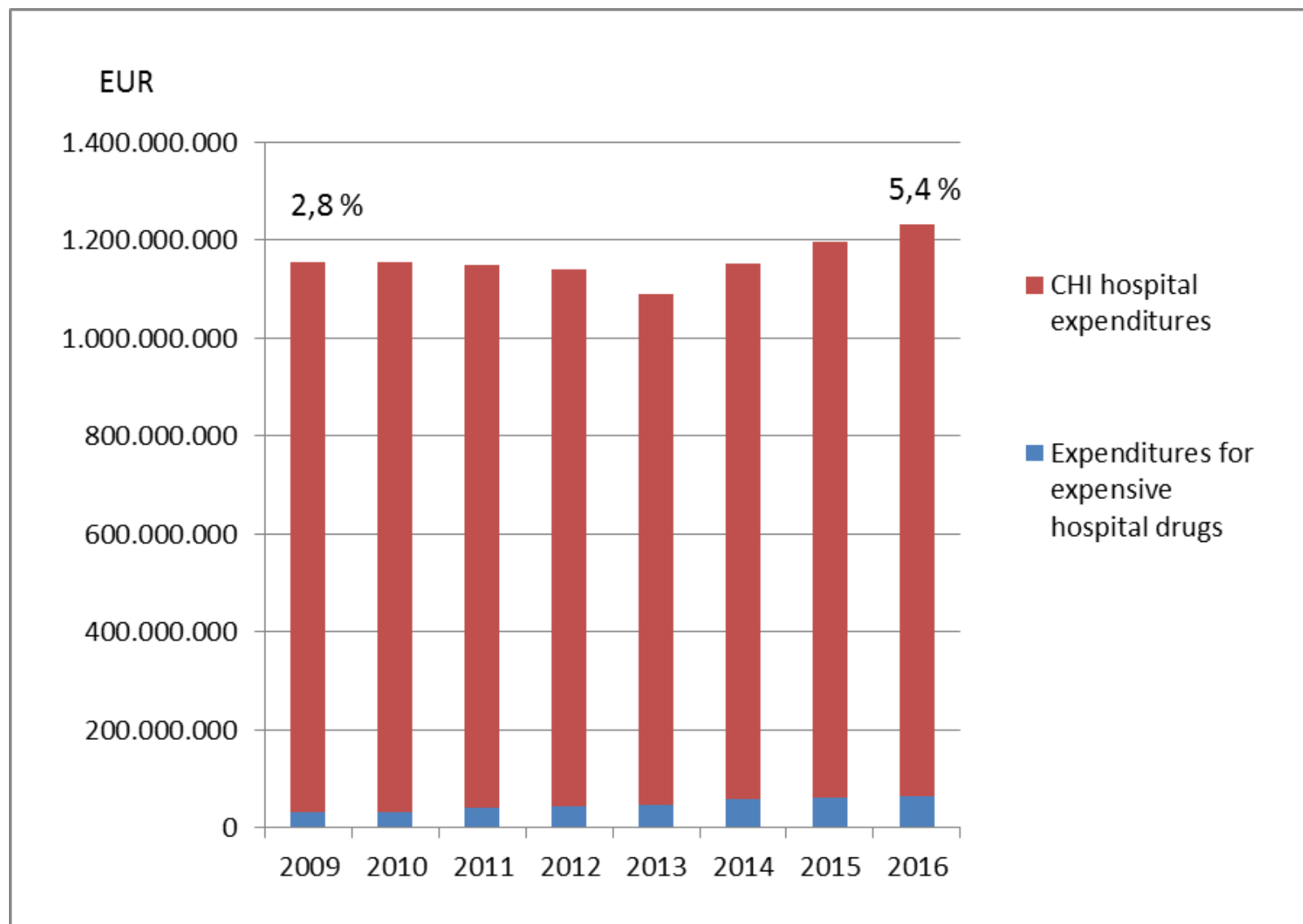
- **Reimbursement**
 - Comitee for the clasification of MPs on the list
 - May obtain additional expert opinion from different expert stakeholders
 - Decission for reimbursement, negotiation and agreement on the price of MPs



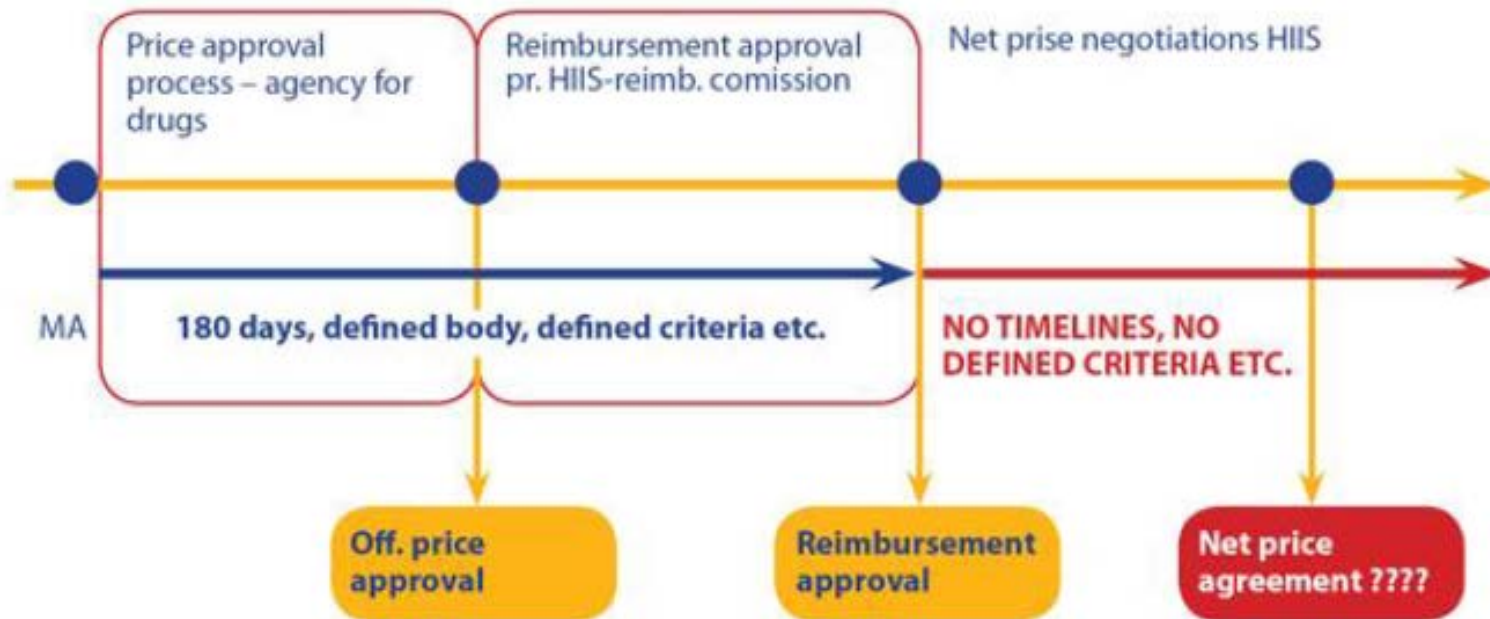
Pharmaceutical policy 2

- **Expensive hospital drugs** (>5.000 €/person/year)
 - 2015: 65 mil. EUR
 - Financed directly to providers
 - Remibursed monthly on a basis of actual ussage
 - Prescribing restrictions

Expenditures for expensive hospital drugs



Applicable for all Rp and expensive H drugs



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Conclusions

- Small countries have many similar problems as bigger ones
- There are some specific (Slovenian) issues:
 - Lack of capacities (no HTA agency)
 - Lack of expertise (only 2 tertiary hospitals, one oncology centre)
 - Need for more collaboration (and improvisation)

Acknowledgement

Jurij Furst, ZZZS