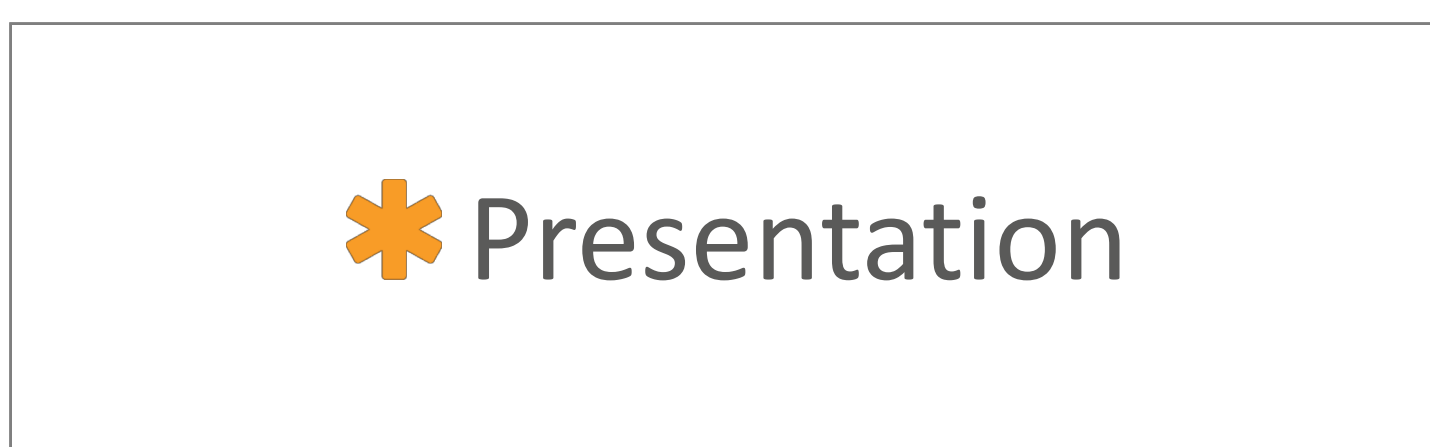




European Federation of Pharmaceutical  
Industries and Associations

# EFPIA Market Access Delays Analysis

\* **Date:** 14/03/2018 \* **Version:** Final



# Introduction (1)

The **Patients W.A.I.T. Indicator** shows, for new medicines (i.e. medicines including a substance that has not been previously available in Europe) within a (rolling) 3 year cohort:

- 1.The rate of availability, measured by the number of medicines available to patients in European countries. For most countries this is the point at which the product gains access to the reimbursement list;
- 2.The average time between marketing authorisation and patient access, measured by the number of days elapsing from the date of EU marketing authorisation (or effective marketing authorisation in non-EEA countries) to the day of completion of post-marketing authorisation administrative processes.

The 2017 analysis uses a sample of 146 products approved by EMA between January 2014 to December 2016 – (46 in 2014, 53 in 2015, 47 in 2016).

For the first time the analysis now includes combination products (as of 1<sup>st</sup> January 2016).

# Introduction (2)

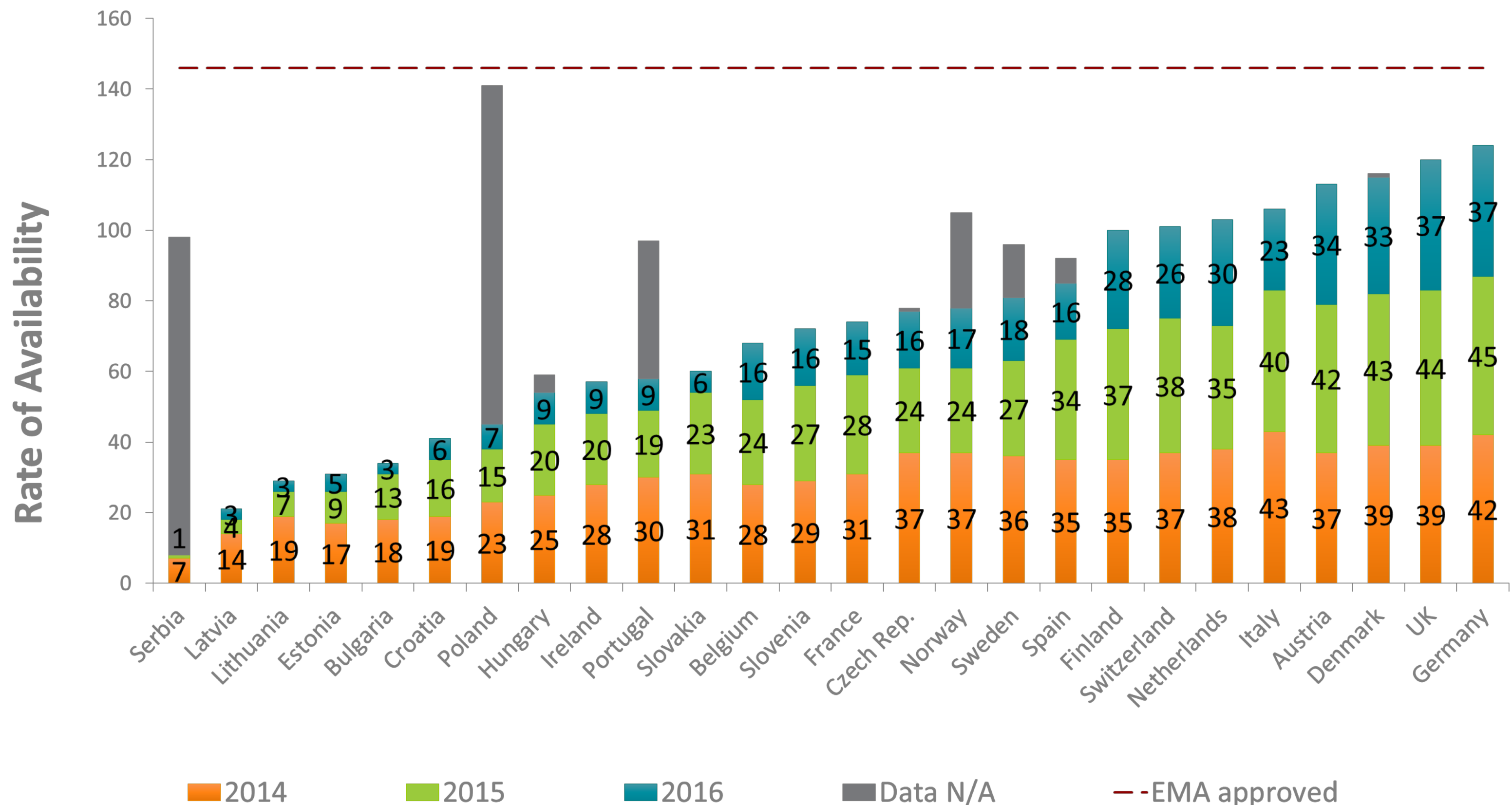
The Patients W.A.I.T. Indicator gives a snapshot of the 2 parameters at a cut-off date (December 2017)– data from medicines cohorts dropping out of the reference period are not updated in subsequent surveys.

Waiting times reflected in the Patients W.A.I.T. Indicator include any delay, whether attributable to companies or to competent authorities.

**The Patients W.A.I.T. Indicator is not a measurement of the delays as defined in the “Transparency” Directive.** Delays under the “Transparency” Directive reflect the number of days that national competent authorities need to make their decisions regarding price and inclusion of medicines in the positive list, where applicable. These delays do not include the time needed to prepare submissions under relevant national regulations, which may also include clock-stops for supply of additional information during the process; neither do “Transparency” Directive delays include time required to complete other formalities before a new medicine can be made available in a given country.

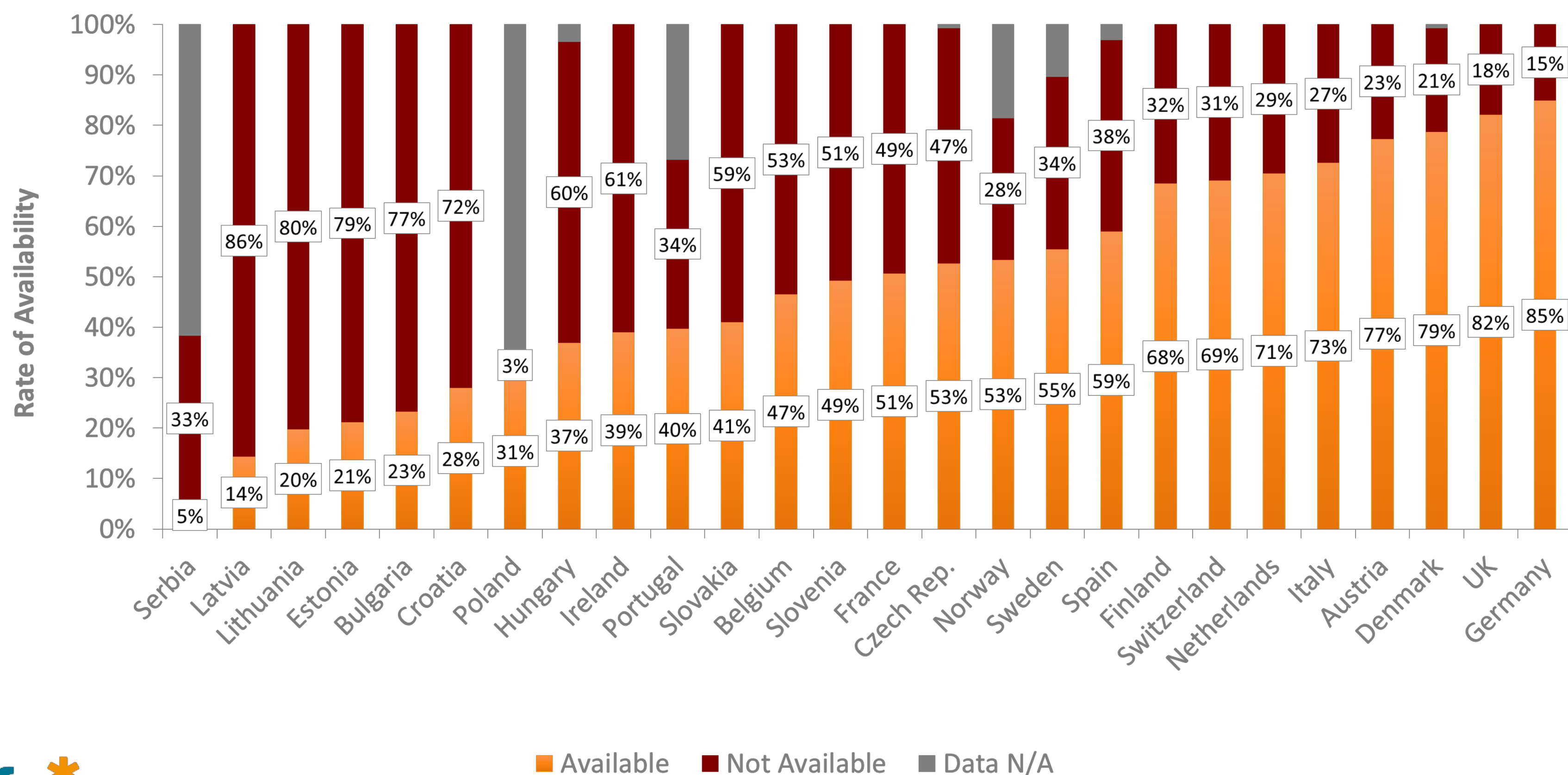
# Rate of Availability

The rate of availability, measured by the number of medicines available to patients in European countries as of 2017: for most countries this is the point at which the product gains access to the reimbursement list.



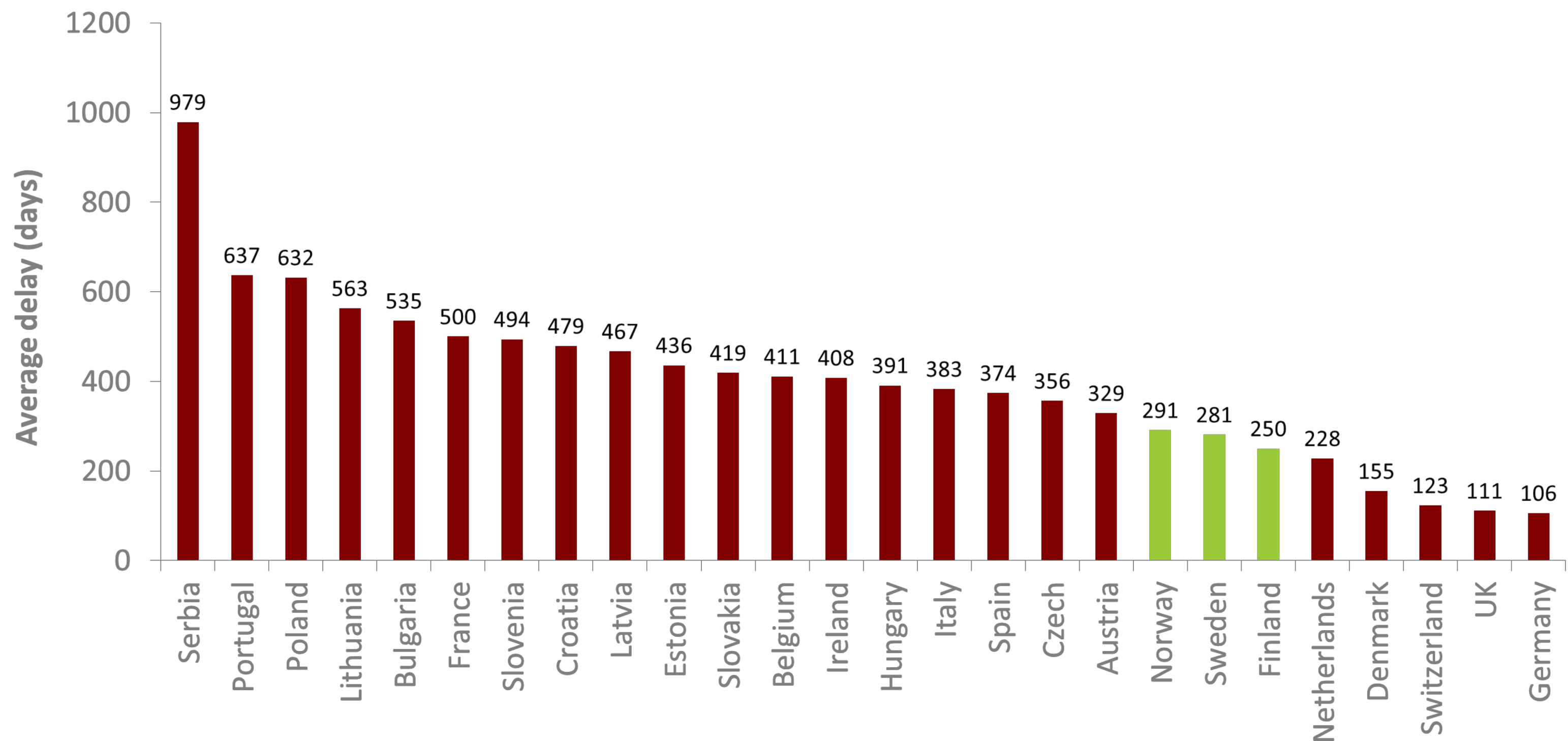
# Rate of Availability (%)

The rate of availability, measured by the number of medicines available to patients in European countries as of 2017: for most countries this is the point at which the product gains access to the reimbursement list.



# Length of market access delays (average)

The average time between marketing authorisation and patient access - the number of days elapsing from the date of EU marketing authorisation (or effective marketing authorisation in non-EEA countries) to the day of completion of post-marketing authorisation administrative processes

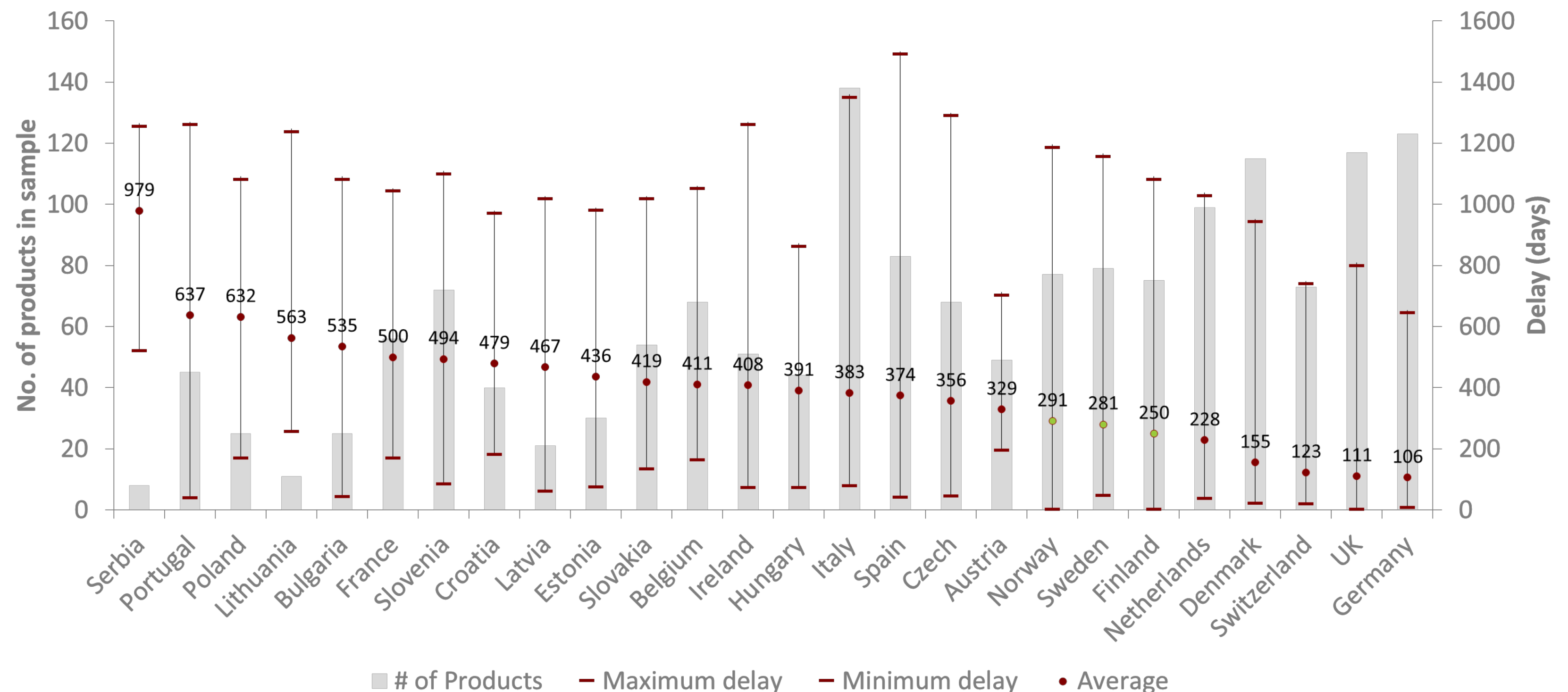


■ For most countries patient access equates to granting of access to the reimbursement list, except for hospital products in FI, NO, SE where some products are not covered by the general reimbursement scheme and so the zero-delay is artificially declining the median and average.

In France, some innovative products without competitors can be made available prior to market authorisation under the system of Temporary Authorisations. As these are not taken into account in the analysis, the average for France is higher than in reality.

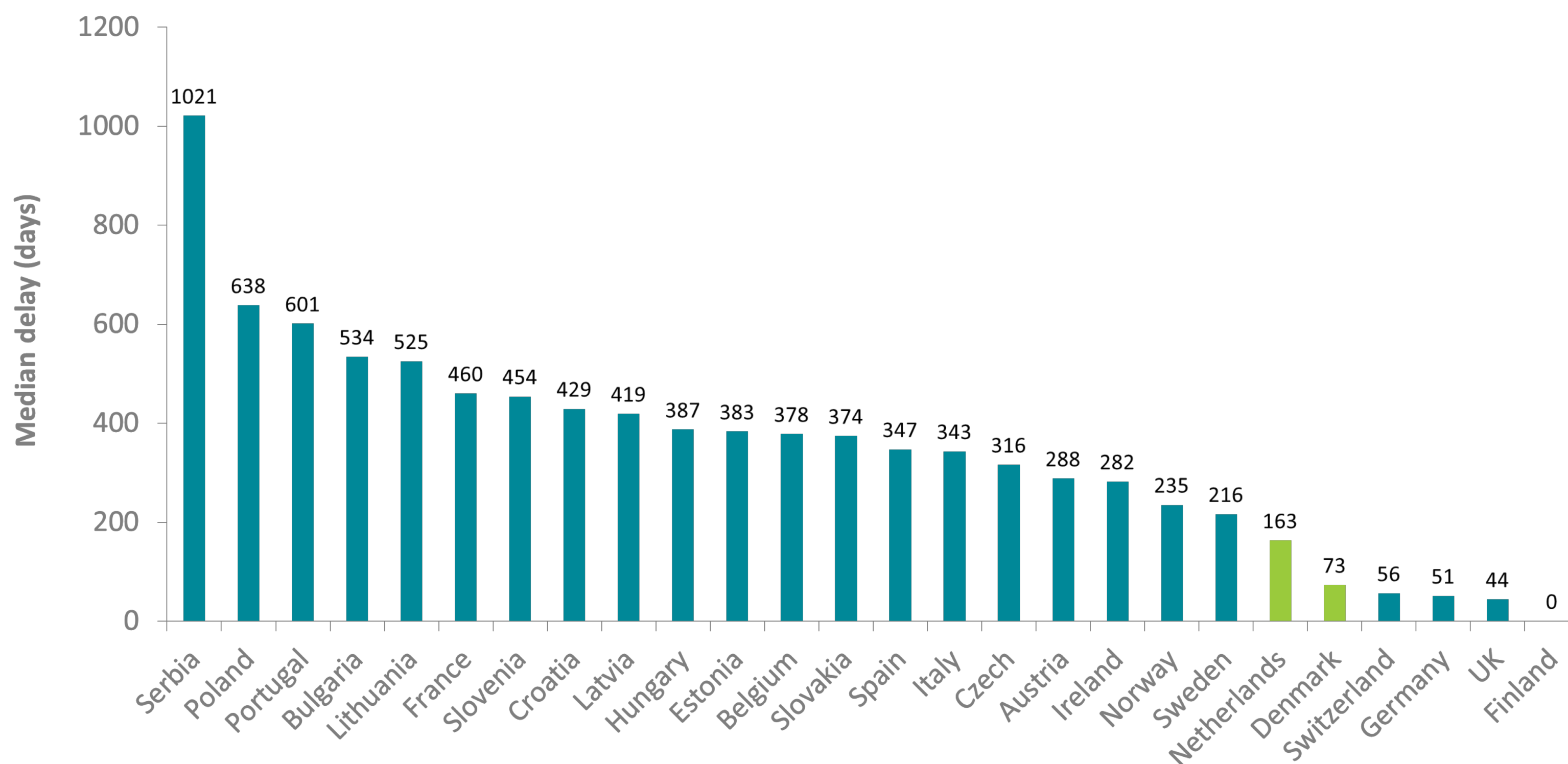
# Length of market access delays (average)

The average time between marketing authorisation and patient access - the number of days elapsing from the date of EU marketing authorisation (or effective marketing authorisation in non-EEA countries) to the day of completion of post-marketing authorisation administrative processes



# Length of market access delays (median)

The average time between marketing authorisation and patient access - the number of days elapsing from the date of EU marketing authorisation (or effective marketing authorisation in non-EEA countries) to the day of completion of post-marketing authorisation administrative processes



■ In most countries patient access equates to granting of access to the reimbursement list, except for hospital products in DK, FI, NO, SE where some products are not covered by the general reimbursement scheme and so the zero-delay is artificially declining the median and average.

In France, some innovative products without competitors can be made available prior to market authorisation under the system of Temporary Authorisations. As these are not taken into account in the analysis, the average for France is higher than in reality.

# Key Observations

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- Patient access to new medicines is highly varied across Europe, with greatest rate of availability in Western European countries and lowest rate in Central and Eastern European countries.
- The average delay between market authorisation and patient access can vary by a factor greater than x 10 across Europe, with patients in Western Europe accessing new products 100-200 days after market authorisation and patients in Central and Eastern Europe between 500-1000 days.
- Even within a country there is a large variation in the speed of patient access to different products and often the level of variation within a country is greater than between countries e.g. shortest versus longest delays in Italy (77 vs. 1349 days), Ireland (71 vs. 1259 days) and Portugal (39 vs. 1259 days).