

Integration of Pharmacoeconomic Analysis and Real Data in Medical Provision for “Privileged” People (War Veterans and Persons Affected by the Chernobyl Accident by the Example of Kyiv Region)

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Legislation to provide medical assistance to people affected by the Chernobyl Catastrophe.

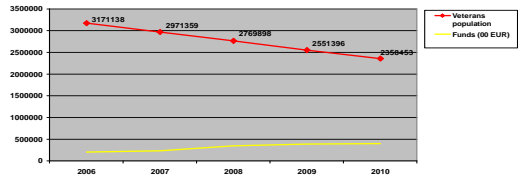
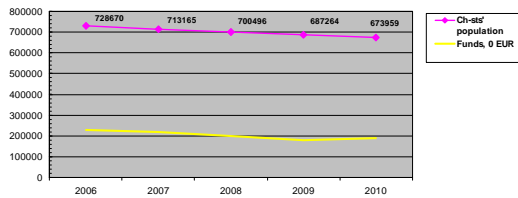
The Laws of Ukraine

- “On Status and Social Protection of People Suffering from Chernobyl Disaster” (№ 796-XII/28.02.1991),
- "On Status of War Veterans and Guarantees of Their Social Security" (№ 3551-XII/22.10.1993).

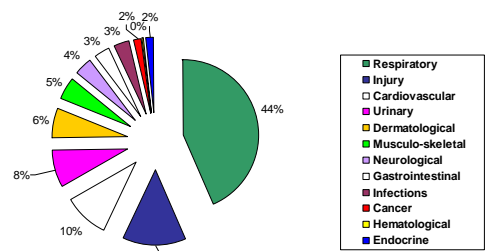
Resolution of the Cabinet of Ministers of Ukraine:

- № 1303 by 1997 “About the free and preferential dispensing of medicines to different groups of patients and populations”.

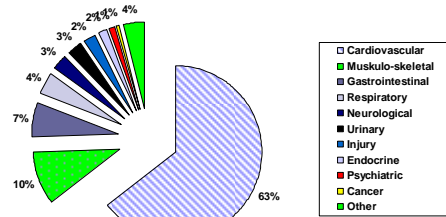
Dynamics of populations and funds (2006-2010)



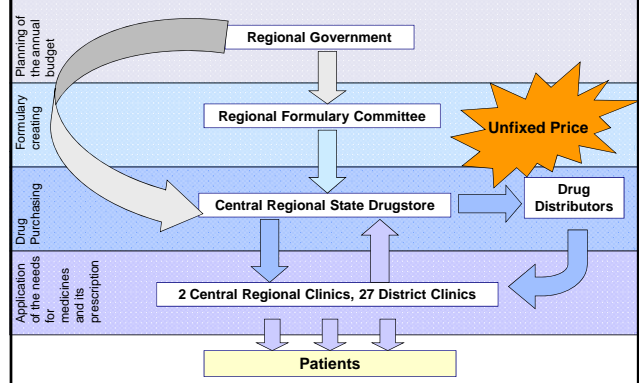
Breakdown of Diseases (by prevalence rate) among the People Affected by the Chernobyl Disaster (Kyiv Region, 2010)



Breakdown of Diseases (by prevalence rate) among the Veterans in 2010



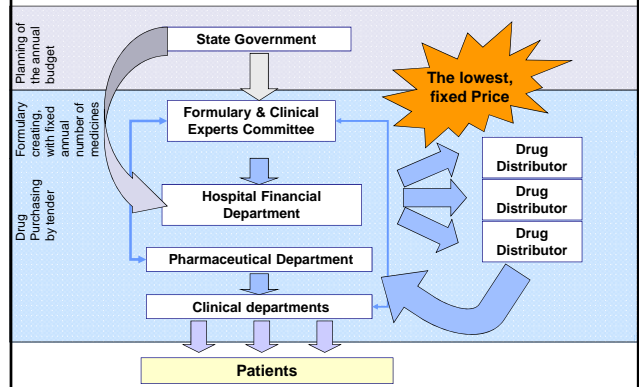
Stages of decision making process and medication supply for outpatient Medical Care for People affected by the Chernobyl Disaster



Sample of the Formulary, Chernobyl Medical Care (Kyiv Region 2010)

Category	Result
Total Sum (€)	1433609,2
Per Person/per year (€)	2.12
Number of INN	398
Number of Brands	582
Average number of brands per INN (± st. dev.)	1.36 (± 0.29)
Share of "original" drugs vs. "generics"	13% vs. 87% (1:7)
Unit (packs) share of "original" medications vs. "generics"	6% vs. 94% (1:15)
Budget share of "original" medications vs. "generics"	36% vs. 64%
Budget share of "N" Category (VEN analysis)	14%
Respiratory (prevalence 44%)	5.51 % of budget
Cardiovascular (prevalence 10%)	11.12% of budget
Urinary (prevalence 8%)	1.83% of budget

Stages of decision making process and medication supply for Veterans Medical Care System



Sample of the Formulary, Veterans Medical Care, 2010

Category	Result
Total Sum (€)	569504,1
Per Person/per year (€)	57
Number of INN	314
Number of Brands	486
Average number of brands per INN (± st. dev.)	1.15 (± 0.47)
Share of "original" drugs vs. "generics"	17% vs. 83% (1:5)
Unit (packs) share of "original" medications vs. "generics"	6% vs. 94% (1:15)
Budget share of "original" medications vs. "generics"	30% vs. 70%
Budget share of "N" Category (VEN analysis)	32%
Cardiovascular (prevalence 64%)	26.59 % of budget
Muscular-skeletal (prevalence 10%)	9.42% of budget
Gastrointestinal (prevalence 7%)	11.66 % of budget

Conclusions

- Ukrainian Medical Care Organizations conclude Formulary Committees and Clinical Expert Committees to improve the clinical and financial effectiveness of medical provision.
- Centralized decision making procedure (by Committee) is more rational than decentralized in case of medical provision for "Privileged" population categories.
- Implementation of HTA tools could increase the effectiveness of Formulary committees' activities and maximize the rationality of health expenditures.



Thank You for
Your attention!!!