



Impact of reimbursement policy on medicines expenditures and co-payment: the case of cardiovascular medicines in Bulgaria

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Introduction

❖ Reimbursement policy for CVMs in Bulgaria was changed by introducing full coverage since 01.04.2024. Health insurance fund reimburses 100% at the reference price (the lowest price per defined daily dose) so co-payment for high priced medicines remains.

Objective

❖ To explore the impact of changes in reimbursement policy on public expenditure and co-payment.

Methods

- ✓ Retrospective macro costing analysis
- ✓ Prices and reimbursed expenditures of CVMs before and after introduction of full coverage were extracted from official sources of National Council of prices and reimbursement and National Health Insurance Fund.
- ✓ Changes in utilization were calculated in defined daily doses per 1000/inhabitants per day during 2022 – 2024
- ✓ ACE-inhibitors, angiotensin II receptor blockers (ARBs), β -blockers, and Ca- channel blockers were included in the analysis.

Results

- ❖ The total reimbursed expenditure grows with 7.3 million Euro for a year.
- ❖ The highest difference in public spending in 2024 compared to 2023 was noted in the group of ARB, accounting 2 511 718 euro.
- ❖ The lowest difference in public spending in 2024 compared to 2023 was noted for ACE inhibitors, accounting 1 290 121 euro.
- ❖ The new policy resulted in a reduction of co-payment, but only the reference product is free of co-payment. The decrease in co-payment was found in the groups of ACE-inhibitors (about 1.6 Euro per package) and ARBs (average 3 Euro per package).

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Results

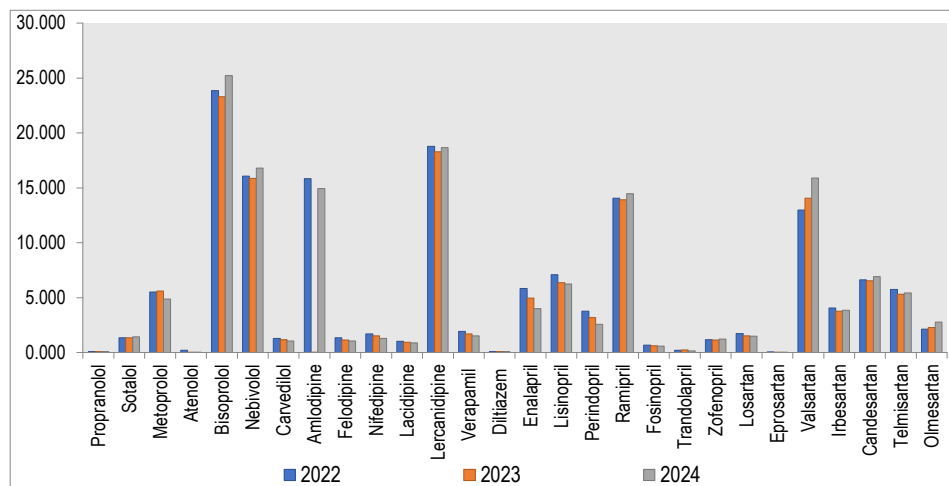


Figure 1: Medicines utilization in DDD/1000 inhabitants/day

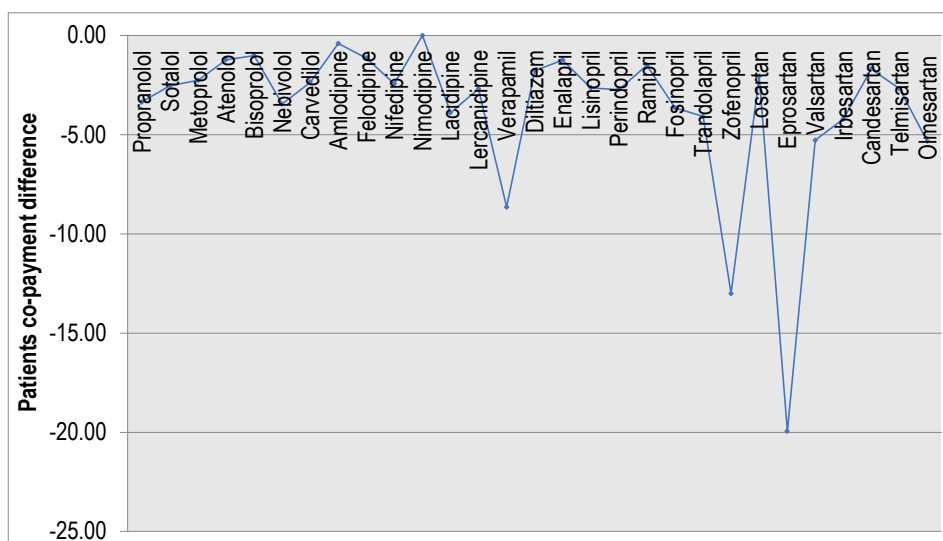


Figure 2: Difference of patients' co-payment in 2024 compared to 2023

- ❖ The total CVMs utilization in 2023 is lower than in 2022, 134.5 and 155.15 DDD/1000 inh/ day respectively.
- ❖ During 2024 utilization increased in comparison with 2023, to 153.37 DDD/1000 inh/day

Conclusion

Increase in reimbursed percent logically led to increase in expenditure and utilization of CVMs most notable for the group of ARBs. Longer time period needs to be created and analyzed the stable tendency.