# Recent advances in voluntary European cross-border collaborations in joint HTA and drug pricing/procurement

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**BeNeLuxA-I** 

## **Background and objective**

- Development of high-cost innovative therapies and supply shortages of hospital drugs have led to cross-border collaborations among many European countries to improve access to and secure affordable prices of medicines
- This research aims to explore developments in European cross-border HTA and drug procurement voluntary initiatives, outside the EUnetHTA

## **Methods**

• A literature review was conducted using publicly available resources—the WHO website, national health authorities' websites, MEDLINE, and grey literature (from January 2020 to October 2023)

## Results

Name of collaboration

- Among the 11 European cross-border initiatives established since 2012 (Table 1 and Table 2), only a few have remained markedly active in recent years
- Among these initiatives, recent advances in the **BeNeLuxA** and **Nordic region** collaborations are the most commonly discussed initiatives in literature (Table 2)
- Furthermore, new collaborations among the EU and extra-EU countries have emerged (Table 3)

Table 1. Cross-border initiatives with no developments published since 2020					
Name of collaboration	Countries involved	Start date			
Baltic Partnership		2012			
Romanian/Bulgarian IFA		2015			
Sofia Declaration		2016			
Visegrad+ Collaboration		2017			
Iberia Partnership		2017			
Valletta Declaration		2017			
Southern European+		2017			
France/Portugal Declaration of Intent		2017			





#### NLF

**FINOSE Initiative** 

Countries involved							
Start date			2015	2015			2018
Joint HTA							
Joint negot	iations						
Scope Joint procurement/	rement/tendering	g					
Horizon sca	nning					×	
Information sharing							
Recent advances		lumacaftor/ivacaf betibeglogene au beparvovec-xioi), utotemcel)] have hem (Spinraza <sup>®</sup> a greements (1,2) Dnly Belgium and price negotiations barticipated in join beneldy <sup>®</sup> . Other were not directly lifferences in rein erved as external ome drugs (1) dembers of BeNe	<ul> <li>Iceland has resulted in 2 successful joint tenders for certain hospital medicines (3,4)</li> <li>Iceland has resulted in 2 successful joint tenders for certain hospital medicines (3,4)</li> <li>Two joint negotiations have been completed for new gene therapies (Zynteglo® and Libmeldy®) (3,5)</li> <li>In 2023, the procurement organisations in Iceland, Norway, Sweden, and Denmark agreed on common guidelines and criteria for joint price negotiations for new medicines (5). Furthermore, Denmark, Sweden, and Norway have entered into a collaboration for ATMPs, which will be open for Finland and Iceland to join (3)</li> <li>Negotiations were based on joint HTAs from FINOSE (3,5)</li> </ul>		<ul> <li>In 2023, the collaboration was strengthened by the entry of Danish Medicines Council and prolonged for additional years (6)</li> <li>Four joint HTAs have been published (clinical and applicable parts of economic assessment) for 2 oncology products [Tecentriq® (atezolizumab), Xtandi (enzalutamide)] and 2 gene therapies (Libmeldy®, Zynteglo®) (7)</li> <li>The goal is to reduce the assessment time to only 90 days; however, the first 3 pilot assessments have taken longer, similar to the normal national assessments</li> <li>FINOSE joint HTA advice was followed by individua HTA bodies in terms of clinical assessment; however the economic assessment could be adjusted in line with national decision-making requirements (8)</li> </ul>		
Table 7 Now crocs	border collaborations e	In the joint state ass	ement from 2021, the 2 collaborations ag essment and limited availability of robus	ckle challenges in access to new, high reed to work together on issues related t at clinical data to support these assessme	o cost-effectiveness	<ul><li>Activity wit</li><li>Activity not</li></ul>	hin the scope : in the scope/no information n between cross-border collaboratior
Name of	WHO/Europe Acc		Spain-Cyprus Memorandum of	Canada/European countries		Now Zoolond	UK-Taiwan collaboration agreeme
ollaboration Medicine			Understanding	collaboration	AUS-CAN-UK + New Zealand		
Countries involved	53 count	ries					
Start date	2020		2021	2022	202		2023
Aims/priority areas	<b>s/priority areas</b> <b>s/priority areas</b> The multistakeholder platfing provide <i>neutral</i> environment allowing different stakehol (pharmaceutical industries governments, and patients exchange ideas on how to access to new and expension medicines (10-12)		<ul> <li>The priorities of the memorandum of understanding (13) are focused on collaboration in the following areas:</li> <li>Organ transplantation</li> <li>Tackling antimicrobial resistance</li> <li>Access to innovative medicines</li> </ul>	new, high-priced medicines and sharing of experiences between the organisations (14,15) JCA, future-proof improvement of or regulatory and H1		ing <b>plans for pilot</b> of HTA systems, peration between agencies, and on about COVID-19 n digital health	Focus on experience sharing betwee countries, such as the UK's experience in HTA and financial operations of innovative medicines and cancer dru funds, and Taiwan's advancements in big data management and the utilisation of AI (18)
				Kev.	New EU collaboratio	ns	Transcontinental collaborations

#### Key: New EU collaborations

Transcontinental collaborations

### Discussion

In coming years, a mandatory EU JCA is to be implemented, although the EU HTA regulation leaves the other domains of HTA (including economic analysis) to national bodies and voluntary collaborations. It is expected that European cross-border collaborations will remain more focused on joint economic evaluation and drug pricing/procurement than on joint clinical assessments. The FINOSE collaboration members expect to continue their work beyond 2025 focusing on products not covered by EU JCA and joint development of health economic evaluations (6). Additionally, the BeNeLuxA collaboration is expected to continue conducting joint economic assessments, joint price negotiations, and horizon scanning.

At this moment, it may be too early to estimate the impact of EU JCA on cross-border collaborations and manufacturers. So far, voluntary collaborations have shown that joint assessment of medicines may limit workload of HTA bodies and companies, without additional assessment time. However, initiatives such as the BeNeLuxA or FINOSE include smaller countries that share similarities in their approach to HTA. **It remains to be demonstrated how JCA involving all the EU countries, including larger markets so far not interested in collaboration (like Germany or France), will work in practice.** 

#### Conclusions

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- Some established European cross-border alliances, such as the BeNeLuxA and Nordic collaborations, continue to be active and to seek new partners for pooling resources and bargaining power. However, since 2020, no further developments have been publicly available for other launched initiatives
- With the implementation of the new EU HTA regulation, it is expected that the existing European collaborations will remain more focused on joint economic evaluation and drug pricing/procurement than on joint clinical HTA
- Furthermore, new transcontinental alliances are being established, with plans for joint clinical assessment between the United Kingdom, Australia, and Canada
- It would be interesting to further assess how these collaborations evolve and affect each other at both EU and extra-EU levels

Abbreviations: AI, artificial intelligence; ATMP, advanced therapy medicinal product; AUS, Australia; CAN, Canada; COVID-19, coronavirus disease 2019; EU, European Union; EUnetHTA, European Network for Health Technology Assessment; HTA, health technology assessment; IFA, International Framework Agreement; JCA, joint clinical assessment; NLF, Nordic Pharmaceutical Forum (*Nordisk Lægemiddelforum*); UK, United Kingdom; WHO, World Health Organization



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