

Case for the European Commission revision of the Pharma Package:

Ensuring patients across the EU have timely and equitable access to safe, effective, and affordable medicines



Accessability

- Despite medicines receiving a marketing authorisation for the EU-27 when receiving European Medicines Agency (EMA) approval, very few are launched across all Member States within the initial years after approval
- Often, this means that western EU countries have access to more innovative therapies while eastern EU countries wait longer to access the newest treatments
- While there is no single market for medicines, due to national healthcare systems, this situation goes against EU's value of fairness and equality between EU citizens



Affordability

- Publicly funded healthcare systems in Europe are under increasing budgetary constraints while new medicine prices are on the rise, with some reaching well over the million euro-per-patient
- 'Me-too' medicines and 'salami slicing' of medicines' indications to maximise intellectual property (IP) are fuelling frustrations of policy makers and national health authorities, who called for an overhaul of the framework
- Growing criticisms on the lack of transparency over medicines development cost, 'society paying twice' for the research and development (R&D) and the drug

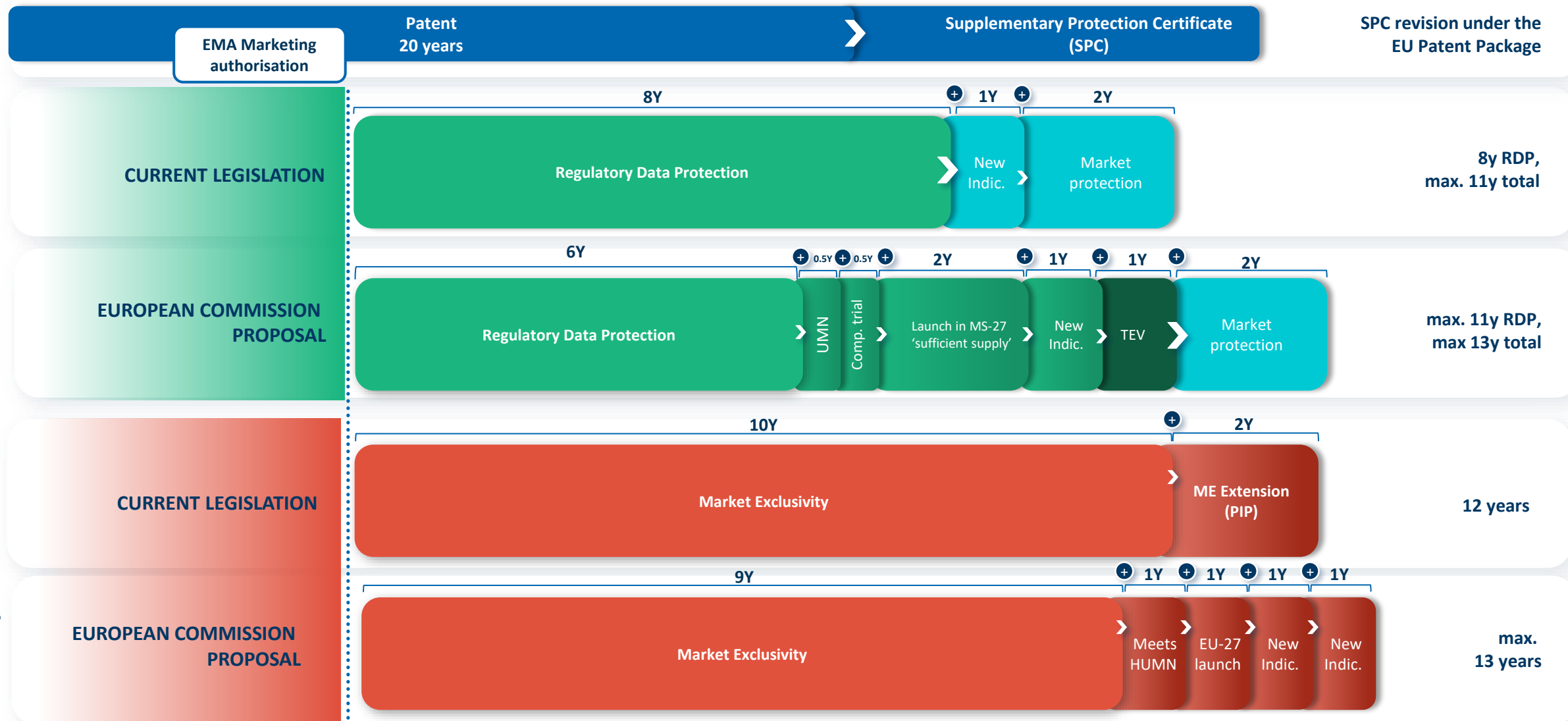


Availability

- Hundreds of generic medicines are currently not available equitably across European countries
- The lack of access to off-patent medicines is a growing concern and highlights the EU's dependence on the global pharmaceutical supply chains and API production in India and China
- Many of the older APIs for antibiotics and pain medication are no longer manufactured in Europe, making Europe vulnerable and reliant on imports, especially from Asia

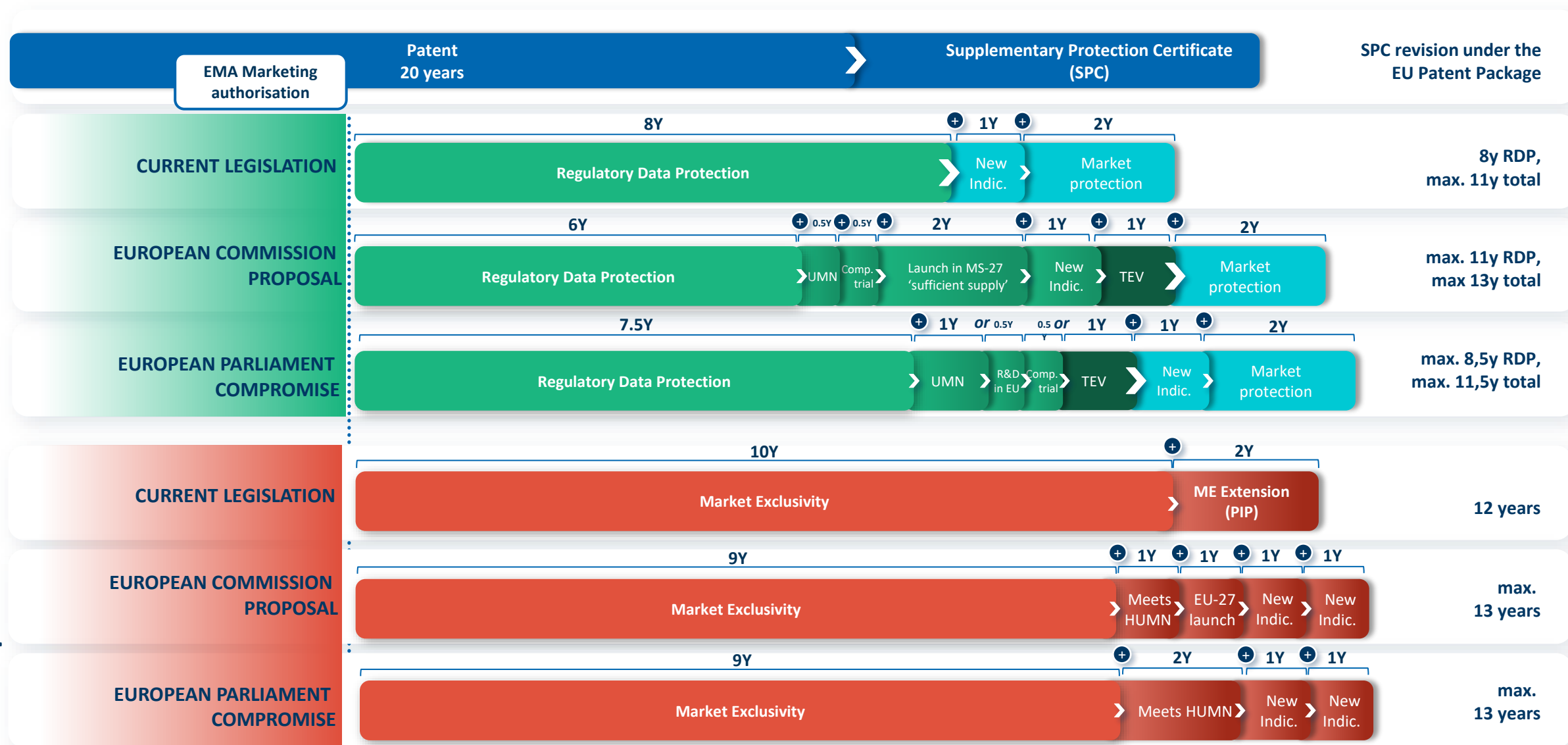
Current legislation comparison to European Commission proposal on regulatory data protection (RDP) and market protection for (orphan) medicinal products

Medicinal products



European Commission proposal, European Parliament compromise on regulatory data protection (RDP) and market protection for (orphan) medicinal products

Medicinal products Orphan Medicinal products



Which proposal best addresses the needs of patients and Member States' healthcare systems?





Thank you!

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Why was a compromise so difficult to reach in the European Parliament?

- A brief overview of the political group's priorities and asks, as expressed in their first negotiation position



Regulatory Data
Protection



Availability of new
medicines across EU-27



Transparency
provisions



Sustainability

Main coalition

European People's Party
EPP; centre-right



Proposed 9 years
of RDP

Against an incentive to launch linked
to RDP (to delete art. 82)

Socialists & Democrats
S&D; centre-left



First negotiation
position was 4 years RDP

Supporting an incentive to launch,
linked to RDP (to keep art. 82)

Stronger provisions, obligation to
report all public funding received

Renew Europe
RE; centre



Proposed 8 years RDP, would like
to keep regulatory sandbox

**Greens/ European Free
Alliance, Greens/EFA**



Could support 6
years of RDP

Would support an obligation
to launch

Strict ERA provisions across
entire medicine life cycle

**European Conservatives &
Reformists, ECR; right**



Could support 6
years of RDP

**Identity and Democracy,
ID, right**



Proposed 9 years
of RDP

**The left;
left**



Could support 6
years of RDP

RDP: Regulatory Data Protection; ERA: Environmental risk assessment

How did the European Parliament land on a compromise?

-A short recap of some of the political group's victories in ENVI vote on 19 of March 2024



**Regulatory Data
Protection**



**Availability of new
medicines across EU-27**



**Transparency
provisions**



Sustainability

European People's Party
EPP; centre-right



*Asked for no less than
8Y, gave up 0.5Y*

*Got a new article on obligation to file for
P&R, decoupled from RDP (deletion of article 82)*

Socialists & Democrats
S&D; centre-left



*Asked for no more than
7Y, accepted 7.5Y*

*Asked for stricter provisions
on transparency of funding*

*Asked for stricter ERA
provisions*

Renew Europe
RE; centre



*Could support 8Y, 7.5 is reasonable.
Kept the regulatory sandbox*

**Greens/ European Free
Alliance, Greens/EFA**



*Asked for strict ERA provisions across entire
medicine life cycle, including manufacturing*

**European Conservatives &
Reformists, ECR; right**



**Identity and Democracy,
ID, right**



**The left;
left**



*Asked for stricter provisions
on transparency*

*Asked for stricter ERA
provisions*

Y: Years; RDP: Regulatory Data Protection; ERA: Environmental risk assessment