

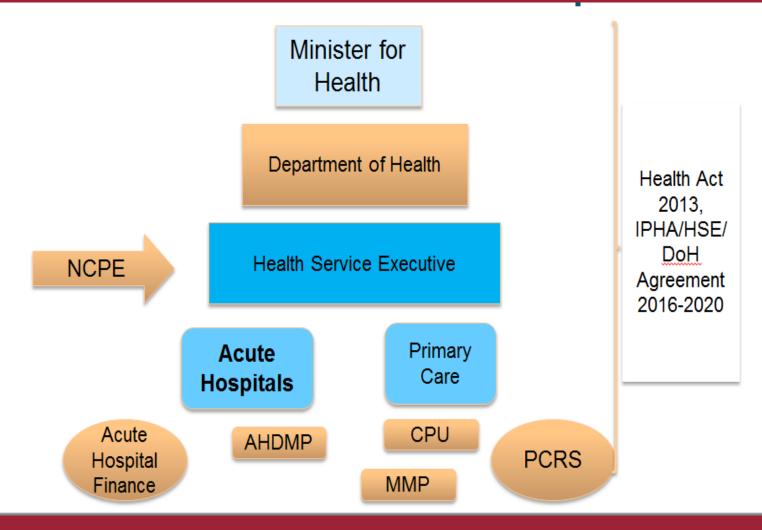
ACUTE HOSPITALS DRUG MANAGEMENT PROGRAMME

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06.06.19

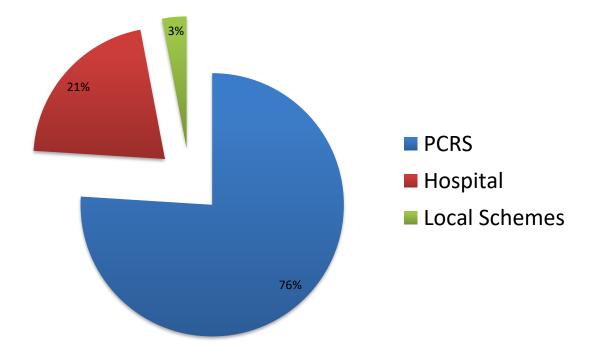


The Irish Healthcare Landscape



Building a Seirbhís Sláinte Better Health Níos Fearr Service á Forbairt

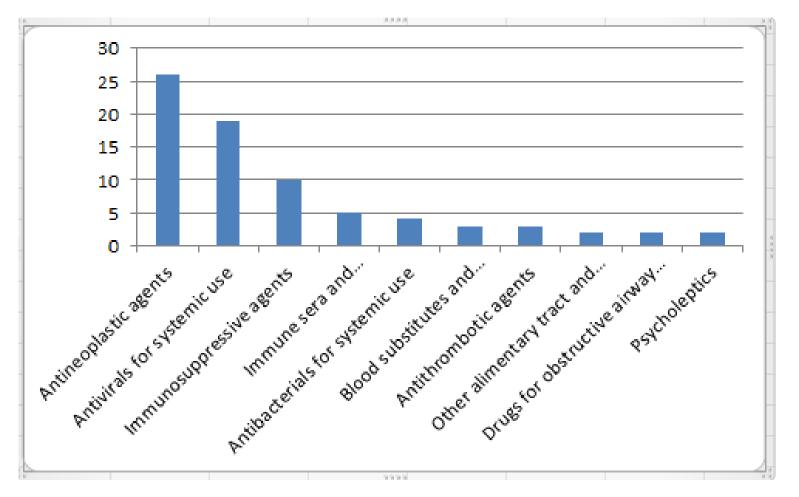
Expenditure distribution







Hospital Drug Expenditure (%)





National Drugs Management Programme

• Established in 2016

– Chief Financial and Clinical Officer of the HSE

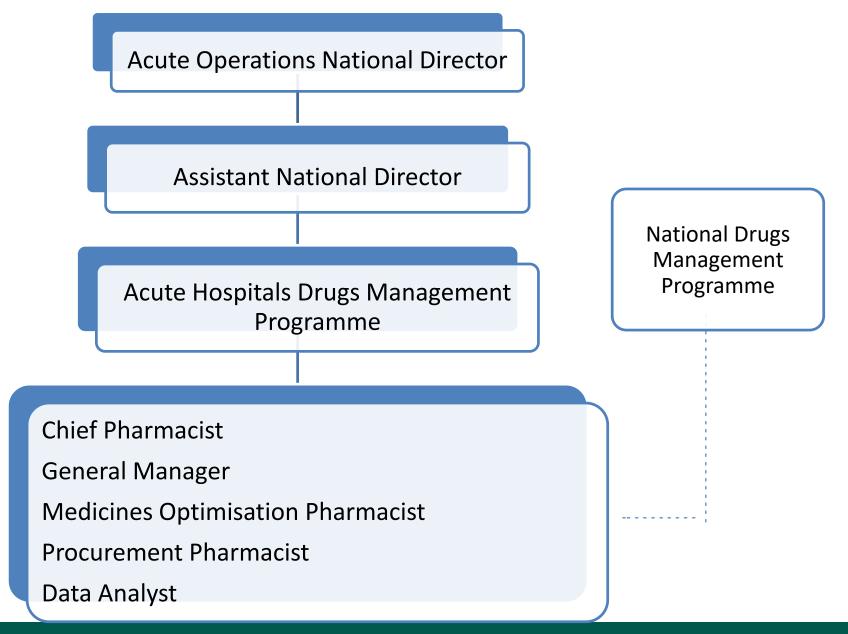
- To draw different medicines units together
- To answer the needs of the IPHA/HSE/DoH
 Agreement around data



National Drugs Management Programme

- Three core programmes:
 - Primary Care
 - Corporate Pharmaceutical Unit
 - Acute Hospital Drugs Management
 Programme (AHDMP)





ACUTE HOSPITALS DRUG MANAGEMENT PROGRAMME



Acute Hospital Drugs Management Programme (AHDMP)

- Reimbursement NDMS
 - Directives on Medicines Use in hospitals

Biosimilars, generic prescribing, new drugs, managed access schemes.

- Audit financial and clinical compliance
- Support for hospitals to be safe, cost effective and efficient in their use of medicines.
- Adopt a strategic approach to medicines use in Irish hospitals.



Funding of hospitals

- Most on "Activity Based Funding" model -all inpatient and day case services.
- Block allocation for other hospital services (e.g. ED / OPD)
- There is no specific **drug** budget.
- The incremental increase is mainly due to demographic changes and new drugs.



Centralised reimbursement

- Administered by the PCRS (Primary Care Reimbursement Service)
 - Hepatitis C
 - -Oncology (ODMS)
 - Multiple Sclerosis (NDMS)

Hospitals purchase the drug and the PCRS reimburse the hospitals for the drug following the registration of patients and claims on a monthly basis.



Reimbursement in hospitals

Three main mechanisms:

- 1. Base budget of hospitals.
- 2. Centralised reimbursement.
- 3. Funding managed nationally via acute hospitals.



Other centralised funding

- Funding from the National Finance Unit to the hospitals outside of base budgets
 - Severe Asthma
 - Enzyme replacement therapy



National Acute Hospitals Procurement Project

- EU procurement directive 2014/25/eu
- Drugs primarily purchased by pharmacists in acute hospitals.
- Ongoing national procurement project exploring the use of a Dynamic Purchasing System to enable more efficient procurement.



National Procurement

- Hepatitis C
- Fabry's Disease
- Blood products for Haemophilia.



Biosimilar Initiatives

- A recommendation for 50% target of biosimilar use in hospitals.
- Publication of "Guidance for Biological Medicines in Acute Hospitals".
- Work has primarily driven by pharmacists and clinicians working together with finance and procurement and patients.
- Collaborative projects between hospital pharmacists and consultants on prescribing of HTDS medicines.







- Major initiative to 'make space' by optimizing current medicines use to enable the use of newer drugs.
- Further use of managed access for both existing products and new.
- MMP initiative BVB
- PCRS- gain share for hospitals



Key Challenges

- Data Fit for purpose medicines management solution that will allow data capture.
- Resources hospital pharmacists key enablers of medicines optimisation in hospitals and beyond.
- Outcomes collection for pay for performance.



