From: [redacted] (SANTE)
Sent: vendredi 19 juin 2020 16:59
To: [redacted] (SANTE); [redacted] (SANTE)
Subject: BTOR - meeting with AIM on fair pricing and pharmaceutical strategy - 17 June 2020

Date/ place: 17/06/2020, Skype
Participants:

- [redacted] AIM [redacted]
- [redacted] AIM
- [redacted] B4
- [redacted] B4
- [redacted] B4

Summary:
We met with the AIM (International Association of Mutual Benefit Societies), which is an international umbrella organisation of federations of health mutuals and health insurance bodies, on their request and in view of preparing their upcoming meetings with Ms Anne Bucher and with Commissioner Kyriakides on the new EU pharmaceutical strategy. Overall, AIM is satisfied and is preparing with their members a position paper that they would formally send this paper to Anne next Monday.

Discussion:
AIM flagged the following:

- Overall satisfaction by the road map and the questions of the open public consultation of the EU Pharmaceuticals Strategy.
- Agreement on that urgency for structural solutions, based on COVID-19 experiences.
- Calls for the European pharmaceutical strategy to be first and foremost a health strategy. A strategy that shapes a pharmaceutical industry for better health in Europe.
- The Fair Pricing Model is proposed to be at the heart of their perspective (on innovative medicines).

AIM position paper will promote an holistic approach and new ways to deliver on broader issues that public authorities value regarding pharmaceuticals.
The paper focus on 4 axes, inviting for the Commission to consider both regulatory and non- legal actions:

1) **Ensuring access to affordable medicines for all – including the principle of fair prices (e.g. fair** prices based on a model, clauses for public-private funding on affordability, transparency and availability, revise the orphan legislation, offer guidance on access to and the use of off-patent).
2) Ensure the supply of medicines for patients across Europe (e.g. EC plan to address medicines shortages, review Directive 2001/83 Articles 23a and 81, emergency contingency plans, relocation of some parts of production capacity).
3) Getting the therapies that health systems need on the market (e.g. adoption of a balanced HTA, new roles for EMA on generating data on clinical effectiveness, new economic models for AMR).
4) Harnessing the challenge of real-world data for better pharmaceuticals (RWD to complement RTCs, regulatory framework on data, building capacity).

From our part we thanked AIM for their comments, constructive approach and intention to submit concrete proposals in order to support an EU Pharmaceutical Strategy. We invited to send formally the paper to DG, in view of their meeting.

End