

BIOSIMILAR SCORECARD 2020 SWEDEN

CONTRIBUTION OF BIOSIMILARS

MOLECULE	Q ⊗ LEVEL OF COMPETITION	\$ PRICE EVOLUTION	VOLUME DEVELOPMENT
	1=Low, 5=High	1=Low, 5=High	1=Low, 5=High
Anti-TNF			5
Adalimumab	4	5	5
Infliximab	5	5	5
Etanercept	4	5	5
Insulin Lispro	4	4	5
Insulin Glargine	4	3	5
Rituximab	5	4	3
Trastuzumab	4	N/A	3
	Indicator of the amount of competition based on the number of competitors and their respective market shares	Net price reduction from average price of the countries in scope 1 year before first biosimilar entry	Change in biologic volume since biosimilar entry

SUSTAINABILITY SCORECARD

POLICY AREA		SUSTAINABILITY MEASURE	CURRENT COUNTRY STATUS
			1=Low, 5=High
z e	Regulatory environment and clinical guidelines	Time from EMA approval to first biosimilars sales	5
		Treatment guidelines for biosimilar use	3
		Physician switching policies	5
		No biologic pharmacy substitution	5
	Awareness and education	Comprehensive training /education for patient	4
		Comprehensive training /education for physician	5
	Incentives	Patient incentives to promote biosimilar use	3
		Prescription quotas or financial incentives for providers that do not restrict physician choice	3
8	Pricing rules and dynamics	Originator price not subject to mandatory price cuts	5
		Molecule pricing not subject to reference price	5
	Purchasing mechanisms	Length of contracts	5
		Tender timing relative to biosimilar availability	5
		Time from tender award to delivery	5
		Number of winners	4
		Winner decision criteria beyond price	3



BIOSIMILAR SCORECARD: SWEDEN

POSITIVE POLICY ELEMENTS

- Sweden has succeeded in achieving widespread acceptance by payers, providers and patients of biosimilars as an integral part of medicine use.
- The current purchasing model of self-injectable biosimilar within the national reimbursement system is facilitated by a rebate payment which is shared between the government, the County Councils (payers) and in some cases the prescribing healthcare institution (providers).
- The division in 10 tender regions allows multiple manufacturers to operate in the Swedish market.

POLICY CHALLENGES

- Some counties in Sweden use higher cost products unnecessarily. Two factors contribute to this: the benefit sharing scheme between national and county level authorities and the incentives to use products with the highest (confidential) rebates/discounts. Although some products may have a high discount rate, the official list price is also higher, resulting in an overspend for the respective county.
- Manufacturers that win contracts in the national reimbursement system can face competition from other companies that offer price adjustments at certain milestones, leaving the winning manufacturer with less volume than expected when their contract bid was submitted.
- Limited use of biosimilars within the reimbursement system due to favoring of the reference product prescription may lead to manufacturers withdrawing from the market, thereby reducing the level of competition and potentially resulting in prices rising over time.

POTENTIAL POLICY SOLUTIONS

- Awarding multiple tender winners or allocating market shares rather than a single winner can result in higher competition levels at a county level and encourage more manufacturers to enter and remain in the market.
- Re-align the handling of rebates so that incentive to drive savings is aligned with the reimbursement contracts.
- Consider terminating the possibility for negotiation of confidential prices for biologics without patent protection within the reimbursement system and allowing list price competition for equal possibilities for the reference product and respective biosimilars.

Sweden Biosimilar Scorecard prepared June 2020.

All analysis based on 12 months ending Q1 2020. In cases where information is unavailable, scores are left blank.

For information on methodology supporting the scorecard metrics and statements, please see the Appendix document at www.iqviainstitute.org/biosimilarscorecards

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