

# Revenue guarantee models to secure availability of antibiotics – national approaches and the international context

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# Where are we after 16 years of analyzing incentives in this space...



## Critical attributes to fix the market:

- -Delinked
- -Credible
- -Magnitude in line with value
- -Magnitude in line prices of other drugs
- -Pre-established
- -Medium-to-long-term commitment

#### Revenue guarantee models



- 1. Subscription "Netflix" model (UK scheme)
  - EEPRU/NICE valuation methods
  - Shifted to simplified scoring
- 2. Opt-in model (DRIVE AB)
  - Caveat in name
  - Dependence on HERA top-up to be credible
- 3. Swedish model
  - Sums intended to maintain some stocks in-country

# **Impact** will depend on design



UK Subscription model ————— Novel antibiotics

- EEPRU/NICE valuation methods
- Shifted to simplified scoring

> Sums intended to maintain minimal stocks of antibiotics already on the market

## Moving forward in Switzerland...



- We will only get what we pay for
- Joining forces amplifies the market signal
- Joining forces amplifies leverage surrounding access-related demands
- Variety in incentive models increases administrative waste
- Design <u>can</u> combine innovation and access to older, generic drugs
- Don't be afraid of major changes in health technology assessment Instead remove the need for it!
- Timing for implementation is important given the scientific challenges ahead
- Leadership needed from RTA, FOPH, clinicians, small and large pharma
- Let's learn from the last 16 years... please