



Access to and Use of Medicines by Households in Armenia: Impact of Current Policy on Reimbursement of Medicines

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HISTORICAL BACKGROUND

- 1991 – Independence declaring, reforms in the health care system and the pharmaceutical sector (decentralization, privatization, market and prices liberalization).
- 1992 – Establishing Medicines Agency as a National Regulatory Authority.
- 1998 – Law on Medicines.
- 1999 – Basic Benefits Package.
- 2006 – Government Decree “*On adopting the list of diseases and social groups of population entitled to free or privileged purchase of medicines*”.





OBJECTIVES AND METHODOLOGY

- 864 randomly selected households from all 11 regions of Armenia participated in the survey in November 2010.

Objectives

1. to evaluate access to and use of medicines by households,
2. to identify the impact of the policy on medicines reimbursement.

Methodology

- WHO household manual and specific indicators.





RESULTS

- 50 % of respondents agreed that they can usually afford to buy all the medicines they need.
- More than 90% of all medicines were bought out-of-pocket.
- Patients with certain diseases eligible to receive pharmaceuticals free of charge got without payment only 23% of medicines used .
- Less than 25% of medicines for children under the age of 7 were reimbursed.
- Approximately 43% of medicines were included in EML.
- 68% of Prescription Only Medicines, including antibiotics, were sold without prescription.
- Only 36% of all households were aware of the current regulation on reimbursement.





POLICY RECOMMENDATIONS

In short-term

- To revise the current list of social groups eligible for free and discount medicines and include poor and very poor households in it.
- To develop and adopt a new medicines reimbursement procedure, covering the restricted provision of only essential and orphan medicines for reimbursement.
- To accept a new policy requiring all the medical organizations to establish Drug and Therapeutic Committees.
- To implement public education campaign related to medicines reimbursement policy to increase awareness of populations on this issue.

In long-term

- To design and introduce a mechanism for estimating medicines requirement at the national level.
- To increase public pharmaceutical expenditures in order to cover all the vulnerable groups and chronic diseases .





ISSUES FOR THE FUTURE STUDY

- To estimate the extent to which the Government covers household needs, as well as funding to meet requirements for vulnerable groups.
- To identify unmet medicines need among chronically ill patients in order to include them in the positive list.
- To compare the situation in Armenia to other countries.
- To evaluate the impact of strategies recommended after their introduction.

