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Response to the letter after the meeting of the Health, Welfare and Family Committee of the Baltic Assembly

Dear Members of the Health, Welfare and Family Committee of the Baltic Assembly

Estonian Ministry of Social Affairs would like to thank the Committee for its dedication and continuous support to the Baltic States's partnership regarding Baltic Partnership Agreement.

Kindly find the responses to the questions raised.

1. What have been the main challenges in implementing joint medical procurements across the Baltic States, and what steps are being taken to address these obstacles?

The primary challenge in implementing joint medical procurements across the Baltic States is the allocation of sufficient resources to expand the scope of cross-border procurement. So far, collaborative procurement efforts have been limited to vaccines, which have been successfully coordinated and remain ongoing. This success is largely attributed to the uniform structure of vaccine procurements, the standardized management processes, and the presence of a consistent group of sellers and marketing authorization holders across all three countries.

Expanding joint procurement to new medical areas, such as hospital medicines, calls for a dedicated Working Group. As a minimum requirement, a team of project manager and an expert from each participating country should be assigned to oversee the process. Hospital medicines, in particular, present additional complexities due to differences in procurement systems and pricing regulations across the Baltic States. Identifying potential new categories for joint procurement demands a significant investment of time and expertise from procurement specialists, particularly those in project management roles. Comprehensive market research, market dialogue and frequent consultations among national experts are essential to understanding market dynamics and the procurement options available to each country.

In Estonia, centralized procurement efforts over the past four years have been focused on broadening national procurement activities and improving internal procedures. At present, no additional personnel are available to manage cross-border procurement initiatives. However, the Estonian Health Insurance Fund, which oversees centralized procurement within the healthcare sector in Estonia, is working to strengthen its procurement unit by recruiting new specialists. This expansion plan is expected to take approximately 12 to 18 months. Consequently, discussions regarding the initiation of new cross-border joint procurement projects could commence in the second half of 2026.

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2. Given the existing project-based cooperation, what steps could the governments of the Baltic States take to establish a dedicated personnel structure to oversee and coordinate the Baltic Partnership Agreement?

A key prerequisite for the effective coordination of the Baltic Partnership Agreement is the appointment of a project manager and a designated expert from each participating country to form a dedicated Working Group. These representatives must be provided with adequate resources to fulfill their responsibilities in accordance with the activities and timelines outlined in the jointly approved Working Procedure of the Working Group. Their duties should include attending meetings with a notice period of few weeks, responding to information requests within three to five business days, and conducting market research within their respective countries.

In addition to executing the tasks and priority actions specified in the Working Procedure, the Working Group must adhere to a clearly defined schedule and set objectives for each phase of the procurement process. To ensure the effective implementation of joint actions, it is essential to prioritize and secure a formal mandate from the management bodies of the centralized purchasing organizations in each country. This endorsement would facilitate effective coordination, streamline decision-making processes, and strengthen cross-border collaboration.

3. What steps could the governments of the Baltic States take to jointly develop a clear investment plan with realistic timelines and milestones to guide and structure the progress of the Baltic Partnership Agreement?

To make our health systems resilient to various crises and to guarantee long-term sustainability, we must actively seek opportunities for collaboration not only at Baltic level, but also by strengthening partnerships with other like-minded countries (for example Nordics, Ukraine) as well as EU level. Our experience with Baltic vaccine procurement has demonstrated that success depends on setting a clear focus, establishing priorities, and defining realistic goals.

In the changed geopolitical environment, it is crucial to enhance security of supply for critical medicines. Therefore, the first milestone is obtaining a mandate from our Parliament for the upcoming EU Council negotiations regarding the Critical Medicines Act which sets out a framework for strengthening the availability and security of supply of critical medicinal products for which insufficient supply results in serious harm or risk of serious harm to patients. The main aim for the new regulation is to improve the availability, supply and production of critical medicines within the EU. The Critical Medicines Act foresees to facilitate joint procurement initiatives, allowing the European Commission to act on behalf of Member States or alongside them to procure critical medicines. This approach is designed to leverage collective purchasing power, ensuring equitable access and addressing supply vulnerabilities across the Union. We see strong potential in EU-level collaboration to achieve our goal: better access to medicines and stronger supply chains. We are looking forward to the upcoming discussions on this topic at EU Council as strengthening EU's position in the global arena needs systematic and strategic approach that also reflects the interests of small markets. We see the need to identify at EU level those substances for which dependency on third countries is the highest and supply risks are most critical. Estonia considers it important that the selection and evaluation of most critical medicines and strategic projects are carried out transparently and that access to EU funding is fair and equitable, particularly for small Member States and for small and medium-sized enterprises. Ensuring a common position among the three Baltic States at the EU Council is necessary to advancing our shared interests. After priority areas have been identified and the necessary personnel is in place the next steps can be initiated.

4. What collaborative negotiation strategies are being considered for procuring medicines, particularly for rare diseases and innovative treatments?

Joint negotiations lie outside the scope of joint procurement, as they involve distinct strategies and objectives. Consequently, a different approach is required, potentially including the establishment of a separate dedicated working group to collectively assess and identify previously unrecognized opportunities. To date, joint negotiations for the procurement of medicines related to rare diseases and innovative treatments have not been undertaken. A significant challenge in this area is the variation in criteria (incl. levels of willingness to pay) used by different countries to assess health technologies, which directly influences pricing and reimbursement decisions. Due to these discrepancies, establishing a unified negotiation framework requires the harmonization of assessment methodologies across the Baltic States.

In Estonia, recent advancements include the renewal of the <u>national guideline for health technology assessment</u>, which provides updated principles for evaluating medical innovations. For joint negotiations to be initiated, a coordinated effort is necessary to standardize assessment parameters, ensuring consistency in decision-making processes across all participating countries.

However, we need to acknowledge that even with a combined Baltic population of around 6 million, some rare diseases may still have only 5-10 patients across our three countries. This leaves Baltic market still unattractive to pharmaceutical companies. Therefore, the European Commission's proposal for the Critical Medicines Act presents a timely and valuable opportunity to elevate Baltic collaboration to a new level as it foresees new collaborative procurement mechanisms to improve the availability of new medicines that the market does not sufficiently provide. By leveraging EU-facilitated cross-border procurement and not only pooling the bargaining power of the three Baltic countries, we have the possibility to bring these essential treatments to our region faster and potentially also at more affordable prices. We are hopeful that our colleagues in Latvia and Lithuania are also supporting the European Commission's proposal on this matter.

Yours sincerely,

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