

Features of development and functioning of the formulary system in Morocco

Zhadko S.V., Laghyati M.

National University of Pharmacy, Kharkiv, Ukraine
Pharmaceutical Marketing and Management Department
svzhadkopharm@gmail.com

Introduction. For every health system, medicines are a central and essential factor. When they are economically available, of good quality, and used well, they will respond properly to several health problems. This would build trust in the services offered to the community within public health systems. Recent studies and analyses reported on pharmaceutical spending in hospitals have shown that this spending has become a growing financial burden due to epidemiological and demographic changes and the rising clinical costs. Drugs represent 31.7 % of the total Moroccan health expenditure.

Aim. This thesis aims to describe the drug formulary and purchasing system in Morocco.

Materials and methods of research. We analyzed publications in scientific journals, websites, and papers of the World Health Organization (WHO) and statistical information from the Moroccan Ministry of Health.

Research result. Every two years, the WHO Model List of Essential Medicines is revised and reviewed by the WHO Expert Committee on Medicines Selection and Usage, serving as a guide for developing national and institutional essential medicine lists. The Moroccan Ministry of Health is engaged in a pharmaceutical policy whose primary purpose is to ensure a sustained and harmonious health development based on the availability of essential medicines. The Moroccan national list of essential drugs is structured by levels of care (basic health care facilities, provincial hospital centers, regional hospital centers). This list is

regularly completed to cover the majority of the priority pathologies and to solve the leading public health issues. It is periodically updated and published and distributed to all healthcare institutions and healthcare professionals. Despite this, the penetration rate of the essential medicines concept in some Moroccan medical centers is still meager.

In Morocco, the reimbursement of drugs is decided by the Transparency Commission of the National Health Insurance Authority. It acts on a request by the manufacturing companies asking for the inscription of their drugs on the national list of reimbursable medicines. The reimbursement rate is usually set at 70 % of the base price; in some cases, it can be increased up to 100 % (for drugs used in chronic diseases such as diabetes and hypertension). The choice of drugs to be reimbursed is based on the actual benefit (AB) criterion. Some studies showed that in Morocco, many drugs have a significant AB, but the reimbursement rate is only 42.8 %.

Formularies are another common way to help manage rising drug costs. There are a lot of drugs available for a variety of health conditions, but also there are a lot of drugs that work the same way for the same condition, and the only difference may be price. Today the main function of the prescription formulary is to specify particular drugs that are approved to be prescribed under a specific policy of insurance. The development of prescription formularies is based on the evaluation of safety and efficacy and the cost-effectiveness of drugs depending on the individual formulary.

It may also contain additional clinical information.

Morocco has three major types of public hospitals. University Medical Centers (UMCs), the first category, including many hospitals, run within a largely decentralized public system with their own budget and elected board of directors. The second group includes an independent government service – the SEGMA Hospitals (Services de l'Etat Gérés de Manière Autonomy). These bodies are categorized by budgetary autonomy for their operating expenses, although the Ministry of Health still controls their spending budgets. The third that do not have any financial autonomy includes Governed Hospitals managed directly by the Ministry of Health. Procurement is carried out mainly through calls for tenders, with a centralized procedure based on a national formulary established by the Ministry of Health for Governed Hospitals and SEGMA Hospitals. For the UMCs, procurement is done autonomously for each center and is based on each establishment specific formulary.

The number of generic drugs in the Moroccan pharmaceutical market keeps increasing. The objective of the current national pharmaceutical policy

is to promote the use of generic medicines of assured quality, intending to maximize the efficiency of medical expenses of both the state and the individual patients. The rate of penetration of generics is still low; this is due mainly to the fact that several drugs for hospital use do not have generics on the domestic market.

Analysis of the purchasing process at a Moroccan university medical center revealed that its formulary includes 830 drugs from 14 classes according to the ATC-classification. Class N (21.8 %), class B (13.5 %), and class J (12.6 %) were respectively predominant. The route of injection was dominant (46 %). Drugs had a significant AB in 70 %, reimbursable in 42.8 %, and essential in 29.2 % of cases.

Conclusions. Procurement of drugs in public health structures faces a significant financial challenge connected with a huge amount of epidemiological, demographic, and economic factors. Optimizing the drugs procurement process has become an indispensable element in the face of this challenge. In order to promote the rational use of drugs, it is recommended that the lists of essential medicines be respected and that the AB be evaluated.

“ Zhadko S.V., Laghyati M. (2020). Features of development and functioning of the formulary system in Morocco. *Фармакоекономіка в Україні: стан та перспективи розвитку : матеріали XII наук.-практ. INTERNET-конф., м.Харків, 22 травня 2020 р.* 234-235. ”