


PRICING METHODS FOR INNOVATIVE HEALTH TECHNOLOGIES

Work Package 4 (WP4), led by **Gesundheit Österreich GmbH (GOEG), the Austrian National Public Health Institute**, focuses on developing **new approaches for pricing innovative health technologies**. Its aim is to design elements, principles, and algorithms for novel pricing policies that integrate both **value and cost perspectives**. A central challenge lies in finding the right **balance between improving patient access and supporting innovation and entrepreneurship**.

Partners from academia, patient organisations, professional associations, industry, and payers contribute their expertise to ensure a **broad and balanced perspective** on pricing policies for innovative technologies.

A decorative graphic consisting of two large, stylized chevrons pointing right, one in blue and one in red, located at the bottom left of the page.

This position paper summarises the key findings from scoping literature reviews, outlines recommendations derived from the evidence, and explains how ASCERTAIN addresses these through concrete actions.

WHAT DID WE LEARN ABOUT PRICING METHODS?

SUMMARY OF FINDINGS FROM REVIEWS

A **scoping review on price determinants and pricing policies** conducted by researchers in WP4 highlighted various access-related issues of current pricing interventions. Most OECD countries apply **external price referencing**, particularly in Southern and Central/Eastern Europe. Across countries, **price negotiations** are common. While **value-informed pricing** based on clinical and economic evaluations is often viewed positively, it can involve substantial administrative burden and may create uncertainty for manufacturers about predictable returns on R&D investments. Moreover, there is a **lack of empirical evidence** on which price determinants stakeholders consider most relevant or how they prioritise them. Evidence is also limited for **medical devices** and **environmental sustainability** considerations.

A second review focused on existing definitions for “fair” pricing of innovative health technologies and found that such definitions often varied across stakeholders. Still, four key concepts were mentioned in the majority of definitions:



Affordability and financial sustainability



Costs of bringing a medicine to market



Value of new health technologies



Profits for companies

However, identified definitions reflected diverse interpretations of these concepts among stakeholder groups. This diversity indicates that a **unified understanding of how pricing should balance incentives for developing new medicines with affordable patient access has not yet been achieved**. When mapped against the **ACCESS2MEDS Framework** (a conceptual framework developed within the project), current definitions show gaps concerning **societal value preferences, equity, cyclical financial sustainability**, and environmental sustainability.

A consistent prerequisite for determining a “fair” price across stakeholder groups is **affordability** within the healthcare system. Complementary literature suggests that **value-based pricing alone does not ensure affordability**: while comparative pricing elements have led to **price increases** (e.g. in Germany, France, and Japan) through “premiums” for added therapeutic benefit there is limited scope for price reductions.

Both reviews revealed **empirical gaps** in understanding current pricing practices and in identifying ways to improve access to innovative diagnostics, particularly **in vitro diagnostic (IVD) medical devices**.

Pricing approaches vary widely and lack consistent evidence and definitions.

HOW TO BALANCE AFFORDABILITY AND INNOVATION?

RECOMMENDATIONS BASED ON EVIDENCE

- › As the reviews revealed a lack of empirical evidence on which price determinants stakeholders consider most relevant, **eliciting stakeholder views** on these determinants is essential to align pricing with stakeholder perspectives. Such research can inform the design of access-oriented pricing models and support **evidence-based policy-making**. Identifying commonalities across groups may also facilitate **price negotiations** for innovative products.
- › Since **value-based pricing** was generally viewed positively in the literature but also showed important limitations, pricing models aiming to improve access should include **value-based determinants** – but carefully, and in light of stakeholder input. The known **limitations of value-based pricing**, such as an upward trend of pricing based on existing treatments, administrative burden, and uncertainty around R&D returns, must be explicitly addressed..
- › Because both reviews revealed empirical gaps and limited frameworks concerning medical device pricing, further research should **explore key concepts and models** in this area, complemented by stakeholder elicitations on relevant determinants.
- › Given the limited evidence and attention to environmental sustainability in existing pricing policies, additional studies should assess how to **incorporate environmental aspects** into pricing models – for example, by considering the **ecological footprint** of manufacturing and product use.



**Pricing that ensures access to
innovative technologies**

HOW DOES ASCERTAIN TURN EVIDENCE INTO PRACTICE?

OUR CONTRIBUTION AND NEXT STEPS

- › Based on identified research gaps, we conducted **semi-structured interviews** with key stakeholders involved in pricing newly authorised medicines. These interviews explored which determinants are considered relevant, how perspectives align or diverge across stakeholder groups, and what "fair" pricing means in practice. In addition, participants discussed pricing challenges, approaches to address them, and the application of innovative pricing methods. The findings from this research are of critical importance for this work package, as they provide essential input on which price determinants should be included in **ASCERTAIN's access-based pricing model**. This work is complemented by expert interviews and a **stakeholder survey** focusing on how to operationalise the relevant determinants within the model.
- › The development of the pricing model will carefully consider the role of a medicinal product's clinical value — based on its added therapeutic benefit — and how this can be aligned and operationalised with other determinants identified through stakeholder view elicitations. To address and mitigate the known shortcomings of value-based pricing, the **ASCERTAIN pricing model** is designed to combine both cost- and value-based price determinants, thereby supporting the overall objective of **developing a model that improves patient access**. The inclusion, application, and interconnection of these determinants is based on the findings from the literature, elicited stakeholder preferences across relevant groups, and a **stakeholder survey**.
- › To advance the understanding of key concepts and frameworks in **medical device pricing**, we focused on **next-generation sequencing (NGS) tests for precision medicine in oncology** as a use case. **Semi-structured interviews** with selected stakeholders — including manufacturers and an **HTA institute** — have already been conducted. The **qualitative insights** gained from these interviews informed the development of a **survey** designed to capture a broader range of stakeholder perspectives and to better understand current pricing systems, as well as the **barriers and facilitators** that influence the use of NGS tests in precision oncology. The results from both the interviews and the survey will be used to **develop guiding principles and recommendations** for different stakeholder groups to improve access to these tests.

The work in ASCERTAIN Work Package 4 provides a solid basis for developing transparent and evidence-based pricing models. By combining stakeholder perspectives with empirical research, it supports a balanced approach to value, cost, and access. Future efforts will focus on refining an access-based pricing model for medicinal products and translating findings into practical guidance for decision-makers.



ASCERTAIN transforms research and stakeholder insights into practical pricing models.



PAPERS

Read more about our findings in the publications below.

Price Determinants and Pricing Policies Concerning Potentially Innovative Health Technologies: A Scoping Review

Authors: Nicolas Xander, Tom Belleman, Maximilian Salcher-Konrad, Anne Hendrickx, Jeffrey Chen, Anne-Sophie Klein Gebbink, Peter Schneider, Kate Morgan, Oliver Groene, Isabelle Durand-Zaleski, Frederick Thielen, Carin A. Uyl-de Groot

Note: This scoping review was published as an open access article in the European Journal of Health Economics on 6 September 2025.

Link: <https://doi.org/10.1007/s10198-025-01834-y>



Bridging affordability and sustainability of health innovations via novel pricing, cost-effectiveness, and reimbursement models to improve patient access: The ASCERTAIN project. Health Policy and Technology, 15(2), 101155.

Authors: Carin A. Uyl-de Groot, Nicolas S.H. Xander, Tom Belleman, Emily A. Burger, Robin Doeswijk, Isabelle Durand-ZALESKI, Benjamin P. Geisler, Oliver Gröne, Anne Hendrickx, Pia S. Henkel, Renaud Heine, Mirjana Huić, Mauro Melli, Kate Morgan, Monica Racovița, Gauthier Quinonez, Maureen P.M.H. Rutten-van Mölken, Tomáš Tesař, Frederick W. Thielen, Peter Schneider, Eline Aas

Link: <https://doi.org/10.1016/j.hlpt.2026.101155>



HPR164 What Is a Fair Price? A Review of Definitions for Fair Prices of Health Technologies

Authors: Maximilian Salcher-Konrad, Nina Zimmermann, Peter Schneider, Anne Hendrickx

Note: This review was published as a conference abstract for ISPOR Europe 2023.

Link: <https://doi.org/10.1016/j.jval.2023.09.1482>



Key Findings from a Scoping Review on Fair Pricing Definitions for New Health Technologies

Authors: Maximilian Salcher-Konrad, Anne Hendrickx, Nina Zimmermann

Note: This review was published as a pre-print on OSF.

Link: <https://doi.org/10.17605/OSF.IO/UDSG4>



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