Question for written answer E-005369/2020
to the Commission
Rule 138
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Subject: Innovative payment models for gene therapies

COVID-19 is testing the resilience of European health systems. At the same time, we are facing a new wave of medical innovation: for example, up to 40 gene therapies are expected to be approved in the EU by 2030. These one-time, potentially transformative therapies are expected to cause a peak in healthcare expenses in the short term, while their benefits will be fully realised in the long term and will still be uncertain at the time of administration. One potential solution identified in recent literature would be to explore innovative payment models such as annuity-based instalment payments and milestone-based agreements. Spreading payments across a number of years would help to address the high upfront cost of these therapies. However, EU accounting rules (2010 ESA Regulation) would reportedly prevent Member States from implementing instalment payments, especially if there are issues relating to compliance with EU macro-economic convergence criteria and the fiscal discipline principles.

1. Can the Commission confirm the above problem and clarify which Member States are currently prevented from implementing instalment payments for gene therapies?

2. How can the Commission address issues relating to the 2010 ESA Regulation, thus enabling the implementation of instalment payments and facilitating access to gene therapies for European patients?