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AGENZIA ITALIANA DEL FARMACO

AIFA monitoring of pharmaceutical expenditure January-April 2025

Spending on medicines purchased directly by the Regions slows down

The growth in spending on direct purchases of medicines by the Regions in the period January-April 2025 (+0.1%) has come to a halt compared to the same period last year, when an increase of +14.95% was recorded. In absolute terms, spending on direct purchases is essentially stable compared to the same period in 2024, with a decrease in the percentage of spending on the National Health Fund (FSN) compared to the planned ceiling. This is what emerges from the “Monitoring of National and Regional Pharmaceutical Expenditure January-April 2025” presented to the AIFA Board of Directors. A document that required longer data processing times due to the technical procedures imposed by the update with the latest budget law on the regulation of innovative medicines.

In total, pharmaceutical expenditure (direct purchases + purchases under the approved care regime) in the first four months of the year amounted to 8 billion 166 million, with a deviation from the planned ceiling of 18.10%, stable compared to the 18.13% recorded in 2024.

In absolute terms, total direct purchases (A, H and C) in the first four months of the year amounted to 5 billion 850 million, 5.3 million more than in the same period last year (+0.1%). Although the new regulations on innovative medicines have expanded to include formerly conditional innovative medicines, monitoring of the ceiling for direct purchases was affected by a decline from 393 to 233 million (-40.7%) in spending on innovative medicines, while spending on non-innovative medicines rose by +2.9%, from 5.191 billion to 5.340 billion.

The deviation in expenditure from the planned ceiling for direct purchases is 1 billion 461 million, but the impact on the National Health Fund has fallen, albeit slightly, from 11.80% in the first four months of 2024 to 11.72% in the same period this year. It should be noted that the first four months of the year historically record higher expenditure volumes than other periods of the year, both due to the higher incidence of seasonal illnesses and the tendency of the Regions to concentrate the procurement of medicines for healthcare facilities in the first part of the year.

This monitoring also highlights significant regional differences in terms of expenditure on direct purchases, with expenditure as a percentage of the National Health Fund fluctuating from 13% and above in Sardinia and Umbria to 9.81% and 9.36% in Lombardy and the province of Trento, respectively. Although there is also wide regional variability in the difference between the incidence of expenditure on the FSN in 2025 compared to 2024.

With regard to pharmaceutical expenditure under the approved care regime, i.e. expenditure on medicines paid for by the NHS and dispensed through pharmacies open to the public, the Monitoring has long highlighted a change in consumption trends, with a +0.8% increase in the number of daily doses dispensed, corresponding to a +0.6% increase in gross expenditure under the approved care regime, amounting to €3 billion 326 million. Net expenditure borne by the Regions increased by €110.9 million (+4.1%) compared to the previous year. However, the change in expenditure was affected by the absence of the new pharmacy remuneration for three months of 2024. In absolute terms, expenditure for the ceiling under approved care regime (6.38% FSN), which contributes to the planned ceiling (6.8%), amounted to €2 billion 879 million, corresponding to a surplus of €188.4 million compared to the ceiling.

This report also highlights significant regional differences in terms of expenditure under the approved care regime, with eight Regions exceeding the 6.8% ceiling and four Regions well within the ceiling (<5.4%). However, there is also considerable regional variability in this area of pharmaceutical expenditure, with opposite trends in the difference between the incidence of expenditure on the FSN in 2025 compared to 2024.