

# MEDICAL DEVICE MARKET ACCESS IN GERMANY

**BEST PRACTICES, REGULATORY, AND REIMBURSEMENT  
UPDATE**

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# GTAI Healthcare Team at your Service



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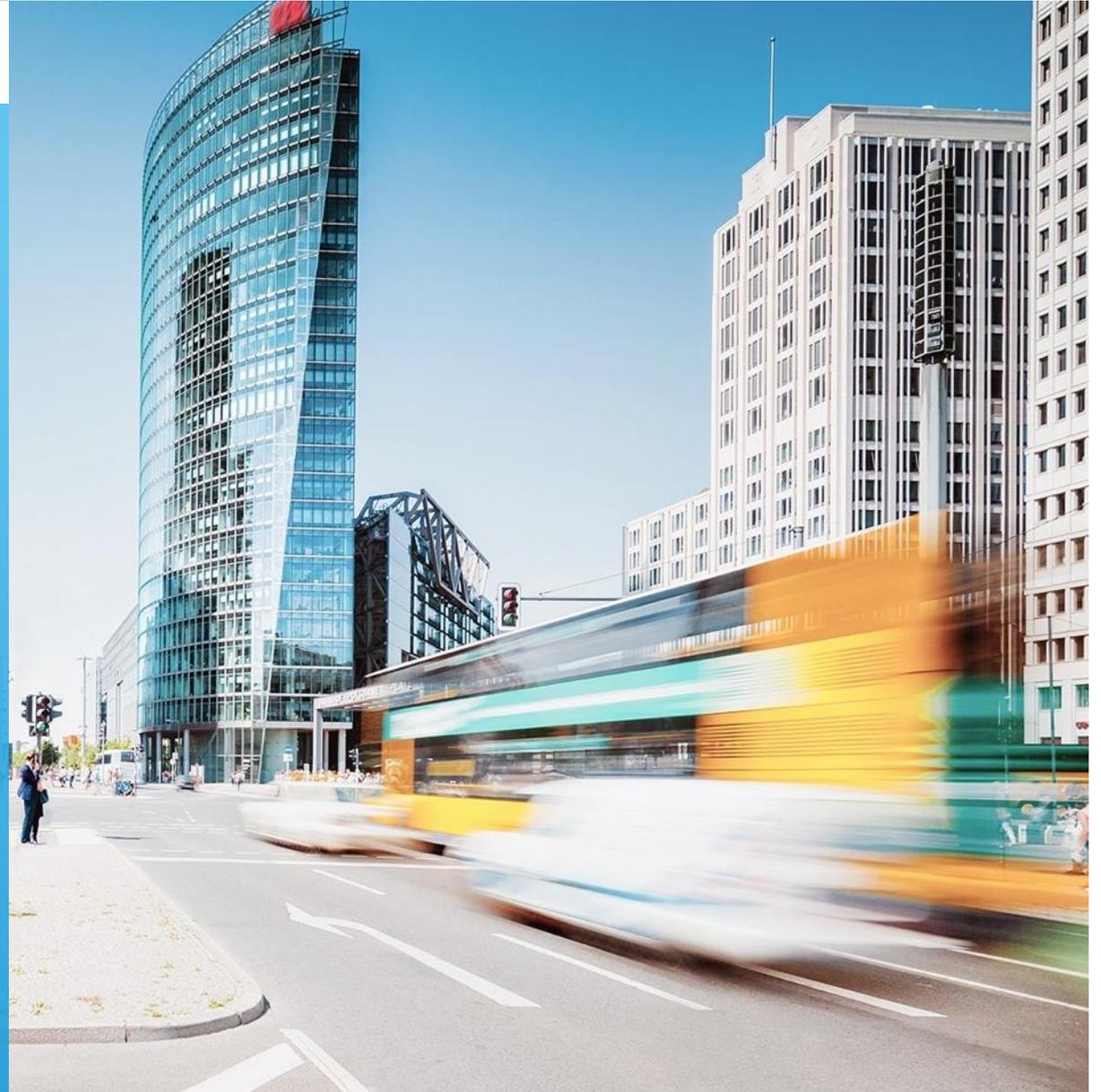
**Julia Albrecht**  
Medical Aids



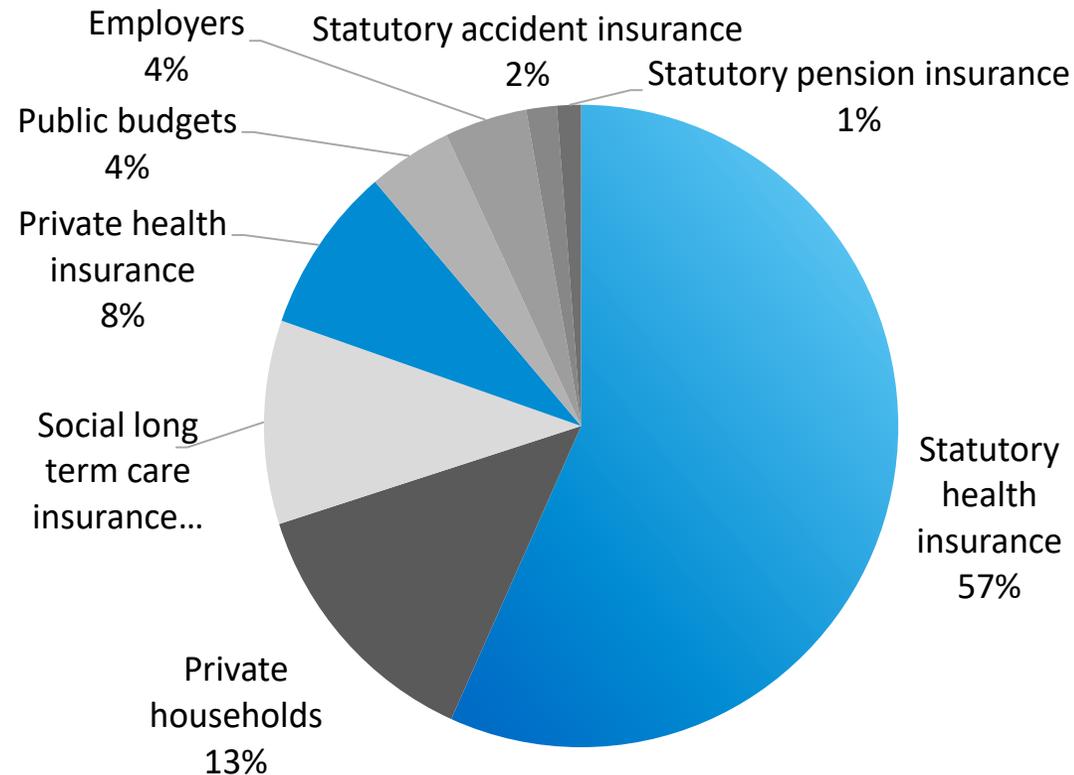
**Julia Pietsch**  
Digital Health

# Investor Consulting

- Information about key industries
- Legal information
- Tax information
- Incentives and financing information
- Introduction to local partners
- Site selection support



# German Healthcare is Financed by Multiple Sources



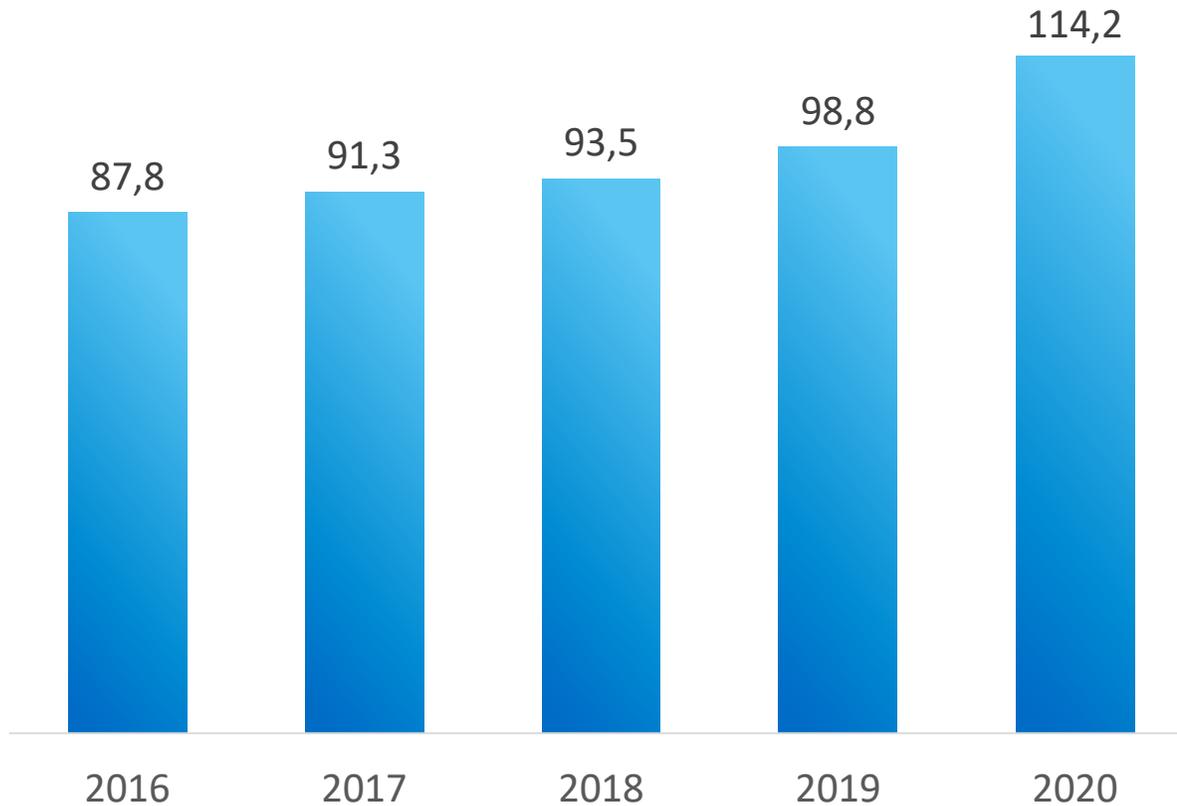
With a share of 57%,  
statutory health is  
most significant  
payer

*Note: The item private households includes non-profit institutions serving households.*

*Source: German Federal Statistical Office 2021*

# German Hospital Spending is Increasing

Total spending of German hospitals 2016 – 2020 (in EUR bn)



- 1900+ hospitals
- EUR 5.088 per case (+5.5%)



# Market Access for Innovative Devices

## CE certification: MDR to replace MDD

- Latest expiry of CE marks via MDD in 2025
- Classification rules: Annex VIII of (EU) 2017/745 MDR
- EUDAMED is postponed
- German implementation “MPDG”
  - medical devices operators ordinance (*MPBetreibVg*)
  - medical product advisor (*Medizinproduktberater §83*)

# Market Access for Innovative Devices

## Clinical trials for CE (MDR) validation: Cash grants available

- For innovative class II/III
- Grant for training phase
- Grant for innovation phase
- Max. 70% of costs applicable

VDI Technologiezentrum

BEAUFTRAGT VOM  
Bundesministerium  
für Bildung  
und Forschung

### Call for applications: Clinical evidence for medical devices

```
graph TD; SME((SME)) --- clinic((clinic / study site)); SME --- IIP((IIP)); SME --- BfArM((BfArM Ethics C.)); SME --- CRO((CRO)); SME --- others((others));
```

Funding rate	Financing volume/(period)
<ul style="list-style-type: none"><li>• Training aid: 50 % + boni</li><li>• Innovation aid: 50 %</li></ul>	<ul style="list-style-type: none"><li>• demand-oriented</li></ul>

Endpoints
<ul style="list-style-type: none"><li>• Modul 1: Application for clinical trial BfArM</li><li>• Modul 2: End of clinical trial</li></ul>

IIP: Industry in Clinic Plattform

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# Reimbursement Pathways in Germany



## Ambulatory sector (out-patient)

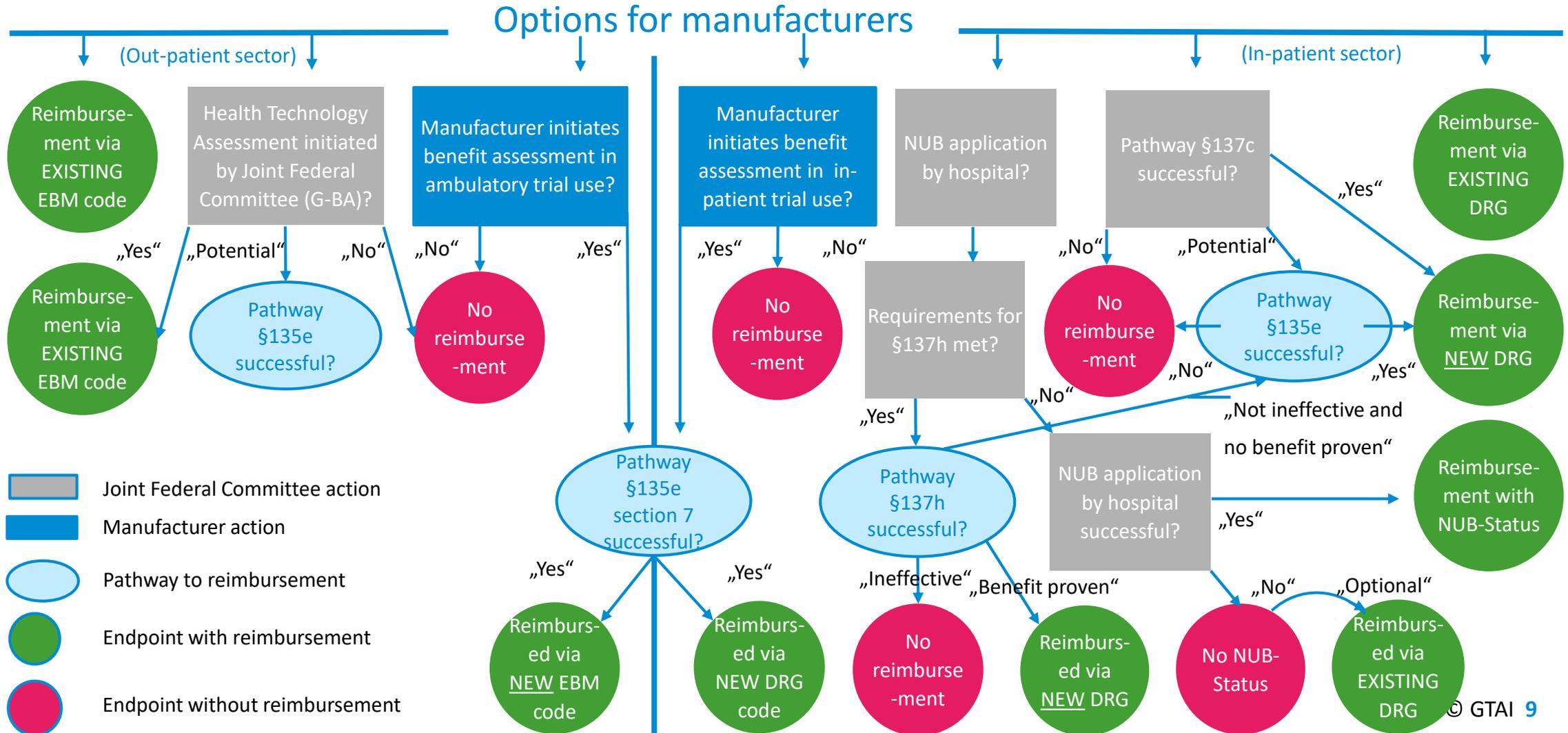
- Doctor practices: reimbursed if listed in uniform evaluation standard (EBM)
- Medical supply stores: reimbursed if listed in medical aids register (HBMV: GKV Spitzenverband)



## Hospital sector (in-patient)

- G-DRG system: reimbursed unless barred
- Joint Federal Committee (G-BA)

# Out-patient and in-patient reimbursement



# Hospital Reimbursement Requires Strategy

Option 1: use existing DRGs+OPS →

Quick access to the market (§137 c, SGB V)

Option 2: NUB track →

Register your individual OPS and DRG in case of new methods (§137 h, SGB V)

Option 3: coverage by evidence →

Receive reimbursement during clinical trial (§137 e, SGB V)

# Clinical Trials can be Necessary

MDR: Class IIb+III



New CE requires more individual clinical data. Equivalence via literature is limited

G-BA: potential to be proven



Need to run clinical trials, will be reimbursed

New class III methods require RCT



Only reimbursed when „HTA“ dossier provided by hospital and manufacturer, benefit assessment by IQWiG

# Contact Us

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