

A woman with brown hair, wearing a white lab coat, is shown from the chest up. She is holding a white paper bag with both hands. The bag has a large green logo on it, which is a stylized swan or bird inside a circle, set against a green background. The woman is looking slightly to the right of the camera with a neutral expression. The background is plain white.

THE ASSOCIATION OF
FINNISH PHARMACIES

2012

Contents:

A year of reforms	3
Involved in a range of activities . .	4
New services for customers	6
Tools for pharmacies	8
Across the year	10
The pharmacy system	14
The AFP's companies	16
The Board and the Experts	18

THE ASSOCIATION OF FINNISH PHARMACIES

(AFP) develops and promotes high standards of ethical and professional competence in pharmacy services within the broader health sector. It also produces services for its member pharmacies to support the running of their business.

A YEAR OF REFORMS

Proposals were made to reform the medicines reimbursement system, the medicine tariff and the pharmacy fee. A national medicines information strategy was also drawn up.

The medicines reimbursement working group of the Ministry of Social Affairs and Health completed its work at the end of the year. The group proposed that the three existing categories of reimbursement should remain, and that those chronic and severe diseases which are currently entitled to special reimbursement should in the future be based on medical grounds, too.

The working group proposed improvements for those who use several medicines by lowering the co-payment ceiling by €140. The health insurance costs arising would be covered by an annual initial co-payment of no more than €50, after which subsequent purchases of medicines would be reimbursed by the Social Insurance Institution of Finland (SII). Initial co-payment would not, however, apply to those under 18 years. In this way the reform does not put unreasonable pressure on families with children. Moreover, having an initial co-payment would allow for a higher reimbursement percentage in the future.

The working group also proposed enhancing multi-professional cooperation, in order to engage patients more actively, along with control measures to promote rational prescription and use of medicines.

In the autumn, Parliament decided to cut a total of more than one hundred million euros from medicines reimbursement and wholesale prices. These reductions were required by the current government's programme of proposed policies and legislation, and were prepared by the working group accordingly. The basic reimbursement was lowered from 42 per cent to 35 per cent and the lower special reimbursement from 72 per cent to 65 per cent.

Wholesale prices on SII reimbursable medicines outside the reference price system were cut by five per cent. The cuts were set to be implemented in February 2013.

UPDATING THE MEDICINE TARIFF

In July, the Finnish Medicines Agency (Fimea) published its proposal for a reform of the medicine tariff. It proposed that the tariff should be amended to make a pharmacy's sales margin less dependent on the wholesale price of a medicine. This would be achieved by raising the dispensing charge for prescription medicines from €0.39 to €2.17, and at the same time by reducing the coefficients and fixed components of the medicine tariff.

This reform would ensure the maintaining of nationwide comprehensive pharmacy services, and more effectively take into account the pharmaceutical expert work in pharmacies and patient-specific medicine guidance.

SEPARATE PHARMACY FEES

Fimea also proposed reforms to the pharmacy fee system. Under these changes, the pharmacy fee would be levied separately for community pharmacies and their subsidiary pharmacies, in cases where a community pharmacy and its subsidiary pharmacy together have a total turnover of less than €3.5 million. The reform would increase the attractiveness of a subsidiary pharmacy in sparsely populated areas, and thereby ensure the availability of pharmacy services nationwide.

Fimea's legislative package also included amendments to the Medicines Act, for example regarding situations in which there are changes in pharmacy ownership,



STT-Lehtikuvu

↑ Outi Antila (right), chairman of the medicines reimbursement working group handed over the final report to minister for Social Affairs and Health Paula Risikko, in January 2013.

a use of agency-hired labour, dose dispensing of medicines, and centralisation of the production of medicines. These amendments were based mainly on proposals put forward by the pharmacy development group in 2011.

RELIABLE MEDICINE INFORMATION

In February, Fimea published the first national medicines information strategy, drawn up in cooperation with healthcare and pharmaceutical partners. The main aim of the strategy, to be implemented in 2012–2020, is to increase evidence-based, impartial and reliable information about medicines for the population and healthcare professionals.

In August, the Finnish Competition Authority published its report in which it proposed several changes to the Finnish pharmacy system. The government outlined, however, that the development of pharmacy operations will continue to follow both the guidelines of its Medicines Policy 2020 and the proposals of the pharmacy development group, under the leadership of the Ministry of Social Affairs and Health.

INVOLVED IN A RANGE OF ACTIVITIES

The Association of Finnish Pharmacies (AFP) participated in the preparation of pharmacy reforms, and diversified its own operations.

The AFP participated in the work of the Fimea working groups set up to reform the medicine tariff and the pharmacy fee systems. It was also represented in the medicine reimbursement working group of the Ministry of Social Affairs and Health.

The AFP produced financial calculations for Fimea to use and its own model, for the medicine tariff reform. In this model, the charge for dispensing prescription medicines would be raised less than in the Fimea model, and accordingly the coefficients and fixed components of the medicine tariff would be reduced less.

For pharmacies, the most important proposal in the report of the medicine reimbursement working group was that the medicine tariff reform would come into force in 2014. The AFP was pleased that the working group was able to conclude a proposal to reform the medicines reimbursement system in such a way that it lowered medicine costs to those who use several medicines. The proposal was in line with the government's programme.

During the year, the AFP issued several statements to the authorities, and developed new services and tools for the pharmacies. Moreover, the AFP's extensive support enabled all pharmacies to introduce electronic prescriptions by the deadline set by law.

The AFP offered training in the areas of management, e-prescriptions, pharmacies' public health programmes and dose-dispensing of medicines. Measures to develop both business activities of the member pharmacies and a common pharmacy brand (APTEEKKI) were enacted.

The AFP was actively involved in the Pharmaceutical Group of the European Union (PGEU) and its working groups, as well as the national programme for patient safety, coordinated by the National Institute for Health and Welfare. The Association also participated in the work of the coordination and communication groups of the Fimea medicine information network.

During the campaign period preceding the municipal elections held in the autumn, the organisation of health services was the number one topic. To support the electoral discussion of this topic, the AFP produced a leaflet about pharmacy matters for municipal decision-makers. The leaflet contained information for the candidates about services that pharmacies can provide to municipalities.

During the AFP annual autumn meeting in November, proprietary pharmacist **Riitta Andersin** was unanimously elected president of the AFP for a second two-year term. Proprietary pharmacists **Marja Ritala** and **Risto Kanerva** continued as vice-presidents.



OUR GOALS

- 1 The distribution of medicines is carried out by a nationwide pharmacy network based on entrepreneurship and professionalism.
- 2 All pharmacies have a sound financial base which enables them to ensure high quality services.
- 3 Self-care and prescription medicines are sold and dispensed to customers exclusively via pharmacies.
- 4 The pharmacy service is customer-based and high quality, and customers trust the pharmacies' pharmaceutical competence.
- 5 Pharmacies offer new services to support the well-being of their customers.
- 6 Pharmacies are perceived as an essential part of the Finnish healthcare system and appreciated by everyone.
- 7 The image of proprietary pharmacies as enterprises is positive and strong throughout the country.



← Proprietary pharmacist Riitta Andersin (left) was unanimously elected president of the AFP for a second two-year term. Marja Ritala and Risto Kanerva continued as vice-presidents.

8 A large number of the AFP members participate in the activities of the Association and its regional associations, and they influence the views of the AFP, not only through traditional channels but new ones as well.

9 The AFP and its companies operate as an effective group.

10 The AFP is — both at national and international level — a competent organisation which attracts pharmacy owners to take up AFP posts, and in which the best experts want to work.

OUR VISION

The AFP is the most member-focussed association in Finland. We further a pharmacy sector strongly based on private entrepreneurship, influence its regeneration and ensure a sustainable economic basis for pharmacy finances. We help our members to offer the best pharmacy service in the world.



NEW SERVICES FOR CUSTOMERS

The AFP created two service concepts for pharmacy customers, together with one for pharmacies to help them set up their own web service.

The Health check reveals the risks

THE PHARMACY HEALTH CHECK IS A SERVICE through which a pharmaceutical assistant, staff pharmacist or nurse assesses a customer's lifestyle and measures descriptive values of the customer's health. This check provides an estimation of the customer's lifespan, as well as the risk of suffering a heart attack or a stroke, or developing diseases such as diabetes. The factors which may impact on the risk of developing a particular disease are then discussed with the customer.

This kind of health check targets people seeking an assessment of their current state of health, who want to identify their risk of developing a disease and, in turn, get support for changing their lifestyle. Specific target groups are recently retired people, those who belong to risk groups and middle-aged men. Also, companies wanting to offer such a service to employees in order to maintain their working capacity. There is a charge for this health promoting service.





← Pharmacists Tuula Teinilä and Johanna Salimäki (right) demonstrated the new services at the Annual Spring Meeting in April.

Inhalation treatment check-up for asthmatics

THE INHALATION TREATMENT check-up service is for those suffering from asthma or chronic obstructive pulmonary disease if there is reason to believe a problem exists with the inhalation treatment. Another target group is children and young people who have chosen to take responsibility for their own medication.

It is difficult to inhale medicine effectively into the lungs: even at best, only 40 per cent of the dose reaches the bronchi. Despite this, inhalation techniques are rarely checked in primary healthcare.

Consequently, monitoring of asthma treatment falls short of the desired level.

The service requires an appointment at the pharmacy, and the procedure is simple. First, the customer demonstrates how they use their own inhaler. After that, the pharmacy professional, either by way of a video film or using a demonstration device, shows how to use the inhaler appropriately. At the same time customers receive advice on asthma self-care, prevention of adverse effects in the mouth and how to maintain their devices.

The service requires no special training of the pharmacy staff: all pharmaceutical assistants and staff pharmacists who have already learned about the treatment of asthma can provide the service.



Web service concept

PHARMACIES WANTING A LOW-COST, easy-to-use web service should seriously consider introducing eAPTEEKKI, a concept created by the AFP and Anders Inno Oy. The concept includes the pharmacy's own web service, as well as the eAPTEEKKI.fi portal.

This network service comes with instructions for managing and paying internet orders. In addition, it offers ready-to-use product images and product texts that are updated directly from the AFP's database to the pharmacy's own web service.

At the same time as a pharmacy adopts this concept, it is automatically linked to the eAPTEEKKI web portal. This is a site maintained by the AFP, and which opens the door to all online shops in the AFP member pharmacies.

Each pharmacy is responsible for its own web service. Pharmacies can design their web service according to their needs by using pictures and banners.

A web service platform for pharmacies was opened at the beginning of March 2013. Initially, the product range will include all non-prescription medicines. In the next phase, it will be complemented by other self-care products and general commodities sold in pharmacies.

Later, also prescription medicines will be dispensed, via an electronic prescription.

TOOLS FOR PHARMACIES

The AFP created new, labour-saving electronic tools for its member pharmacies.

Help with medication reviews

THE AFP CREATED the Salko database to enable quick and accurate comprehensive medication reviews and also lighter checks of medication. This database compiles information about properties of the medicinal substances relevant to the medication review.

The database is especially designed to assist comprehensive medication reviews, but can also be used for lighter checks of medication.

The results of the reviews are displayed in an easy-to-read table.

Salko is the first medicine database to provide information about the risks of accumulated side effects. Thus, Salko makes it easy to determine, for instance, whether the medication of an elderly patient or a patient taking several medicines might lead to drowsiness and an increased risk of falling over, or whether the medicines cause dryness of the mouth.



Information system for pharmacy contracts

THE AIM OF THE PHARMACY contract procedure is to assist substance- or drug-dependent patients during their withdrawal process by means of systematic medical treatment. The patient agrees by a written agreement to undergo treatment prescribed by a single doctor or healthcare unit, and to use only a specified contract pharmacy when buying medicines that can be misused.

The doctor or the health unit sends a copy of the agreement to the specified pharmacy, which then forwards the details of that agreement to other pharmacies. This ensures that no other pharmacies dispense the medicines that can be misused to these patients.

The AFP created a contract information system that allows a pharmacy which has joined the system to record its own contracted patients in the proxy server. Other pharmacies are only alerted when those patients attempt to buy medicines containing central nervous system-influencing substances or narcotics that can be misused. When this happens, the patients are always directed to the specified contracted pharmacy.

Dispensing deviations included in the database

VERY RARELY DO PHARMACIES make errors in dispensing of medicine to a patient or in the method of administering it or the amount, but once in a while an oversight occurs. A dispensing error also refers to a medicine that is dispensed with incorrect dosage directions.

To help the pharmacies report any dispensing deviations, the AFP developed an electronic reporting system.

Systematic recording and analysis of deviations, followed by remedial action ensure that the entire staff learns from the experience. At the same time, the system provides nationwide information about circumstances in which deviations occur and which medicines are involved.

Tool for financial planning

A NEW SITE, TALOUSSALKKU, was opened on the AFP's Salkku web service. It contains a great amount of essential information about the economy of a pharmacy along with material to support proprietary pharmacists in their financial management.

The content of TalousSalkku is mainly produced by the AFP. Some of the material is based on economic data from the AFP member pharmacies.

The webpage Toimialan markkinatieto contains the most important macro-economic indicators in the pharmacy field and the Oma Talous page contains material to support proprietary pharmacists in their financial planning, as well as financial calculation tools.

→ **Financial Consultant Monna Apajalahti-Markkula is in charge of maintaining and developing the TalousSalkku.**



ACROSS THE YEAR



Apteekkari celebrated its 100th anniversary

AROUND ONE HUNDRED former and current contributors, advertisers, others connected with the Apteekkari journal along with readers celebrated its centennial year at the AFP, in January. For a long time, the magazine was a professional and organisational journal typically targeting only proprietary pharmacists.

However, in the last few decades the readership has expanded to embrace pharmacy staff and various actors in the pharmacy field, and today, decision-makers, those who draft the decisions and the media are among the readership as well. Apteekkari reaches all of Finland's nearly 600 proprietary pharmacists, and, in addition, almost all (97%) staff pharmacists and the majority (82%) of pharmaceutical assistants in pharmacies.

Apteekkari.fi online, which complements the paper version, is an open-access journal, and its news, blogs, and columns can also be followed via the newsletter, on Facebook and on Twitter.

Pharmacies ensure medication safety

IN A JOINT INITIATIVE, key actors in the pharmacy field launched Apila, a four-year project to improve medication safety via the pharmacies. The aim is to reduce the number of harmful effects associated with medical treatment.

This is to be achieved by improving the quality and availability of self-care advice, increasing access to medical advice for special needs groups, promoting medication safety activities carried out by pharmacy staff and other healthcare staff. In addition, the risk assessment of medical care for patients who use several medicines will be strengthened.

The Apila project is part of the national programme Patient Safety with Skills, coordinated by the National Institute for Health and Welfare. The key players in the healthcare sector at national level are participating in this programme.



APILA

Apteekien
lääkitysturvallisuushanke

The introduction of electronic prescriptions meets the deadline

PHARMACIES INTRODUCED electronic prescriptions by the end of March, as planned. The AFP facilitated the introduction by providing several training courses and tools. It also arranged registration of the smart cards.

The electronic prescription significantly increased cooperation between pharmacies and the wider healthcare sector. By the end

of the year, pharmacies in a number of localities nationwide were already issuing most of their prescriptions in electronic format.

The electronic prescription has brought costs for pharmacies, too, as they have had to make investments in new equipment required by the system. Further improvements had to be made in 2012 to ensure a smooth pharmacy service.



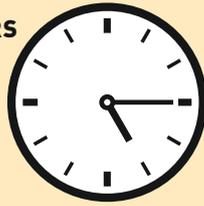
PHARMACY DENSITY
(inhabitant/pharmacy)

Finland 6 600
Sweden 7 800
Norway 6 960



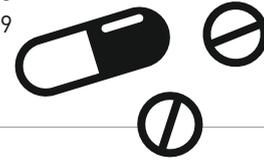
OPENING HOURS
(hours/week)

Finland 57
Sweden 53
Norway 53



MEDICINE DISPENSED ON THE SPOT
(% of prescriptions)

Finland 98
Sweden 89
Norway -



PRIVATE COMMUNITY PHARMACIES ACCORDING TO SIZE (2012)

Prescriptions/year	Number of pharmacies
200 000 -	7
180 000 - 200 000	7
160 000 - 180 000	12
140 000 - 160 000	21
120 000 - 140 000	29
100 000 - 120 000	54
80 000 - 100 000	86
60 000 - 80 000	105
40 000 - 60 000	115
20 000 - 40 000	118
- 20 000	30

Source: The Association of Finnish Pharmacies (i.e. 95% of all pharmacies)

TURNOVER OF PRIVATE COMMUNITY PHARMACIES

Year	€ millions
2002	1 548
2003	1 640
2004	1 753
2005	1 835
2006	1 806
2007	1 897
2008	2 038
2009	2 041
2010	2 026
2011	2 051
2012	2 128 estimate

Source: The Association of Finnish Pharmacies

STAFF IN COMMUNITY PHARMACIES (31.12.)

Figures include staff in university pharmacies

	2008	2009	2010	2011	2012
Proprietary pharmacists	582	594	594	585	588
Staff pharmacists	807	802	813	780	749
Pharmaceutical assistants	3 830	3 844	3 840	3 635	3 664
Technical staff	3 070	3 071	3 032	3 456	3 486
Total	8 289	8 311	8 279	8 456	8 487

Sources: The Association of Finnish Pharmacies, University pharmacies, Pharmacy Pension Fund

High availability of medicines

PHARMACIES GUARANTEE almost 100 per cent same-day dispensing of prescription medicines, according to a survey conducted in March.

According to the survey, customers received all the requested prescription medicines on the spot with 97.9 per cent certainty and during the same day with 98.5 per cent certainty.

The main reason for a particular medicine being unavailable was that it was not held in stock and thus ordered only when needed.

Reliability levels of dispensing in pharmacies have remained very high throughout the 2000s, despite difficulties experienced with stock management which are caused by generic substitution and the reference pricing system.

The survey embraced 79 pharmacies and covered approximately 86 000 prescriptions.



ACROSS THE YEAR

The AFP at the SuomiAreena event

SUOMIAREENA is an event arranged by the city of Pori and MTV3, a commercial TV station in Finland, in July. As part of this event, the AFP together with a number of proprietary pharmacists in the Pori region had a tent, named JazzApteeikki, in the market square.

Visitors to the tent could have their blood pressure measured and a test showing their risk of getting diabetes. Many availed themselves of this free-of-charge service, along with the opportunity to ask the AFP experts and those from pharmacies in the Pori region about their medicines. During the SuomiAreena event the AFP arranged a panel discussion about the dangers of counterfeit medicines.

Medicines reimbursed without the SII card

IN THE FUTURE, pharmacies will be able to electronically check the customers' right to reimbursement from the Social Insurance Institution (SII). The new system was tested in the autumn.

The checking is carried out electronically as an enquiry between the pharmacy's data system and the SII data system. The enquiry will enable the pharmacy to view the customer's rights to special reimbursement, any membership of workplace sickness funds, limitations, if any, to medicine reimbursement and the accumulated annual co-

payment for medicines.

Customers, when buying medicines, will be asked for their SII card, as before. However, in the event of the customer not having it with him/her, the pharmacy will, with the customer's consent, check the information electronically in the SII data system.

The advantage of an electronic enquiry is that the information always is up-to-date. In addition, it makes it possible to purchase via the pharmacy's online service medicines eligible for direct reimbursement.

Know your medicines

PHARMACIES MARKED the first national medicines day, held in November. The theme of the day, "Know your Meds", was designed to encourage both users of medicines and healthcare professionals to pay more attention to successful medical treatment.

Studies show that there is much room for improvement in how medical treatments are carried out. Patients may sometimes not know how to use medicines correctly because they lack sufficient information.

During this day, customers were encouraged to talk about to their medication, and it was pointed out to them that they can always turn to a pharmacy in matters regarding medicines. Some pharmacies also had lectures and events about medical issues, which they arranged together with either local health centres or patients' organisations.

The National Medicines Day is an initiative launched by **Paula Risikko**, Minister of Social Affairs and Health, and it was arranged by actors in the pharmaceutical and healthcare sectors together with healthcare authorities.



Pharmacies acted responsibly

THE UNIVERSITY of eastern Finland caused a stir in October when its research indicated that a significant number of vitamin D preparations on the market in fact contained clearly less vitamin D than the amount indicated on the label. The uproar lasted for several days in the media.

At the request of the AFP, their member pharmacies removed from the shelves, pending further investigations, all vitamin D preparations in which, according to the

study, the vitamin content was less than 80 per cent of that stated on the labels. However, the measurement method used by the university proved to be flawed, and the pharmacies returned the vitamin supplements to the shelves as soon as an accredited laboratory had verified their vitamin D content.

The University of Eastern Finland apologised for the furore caused by the erroneous results.





BREAKDOWN OF SALES IN COMMUNITY PHARMACIES 2012
(estimated)

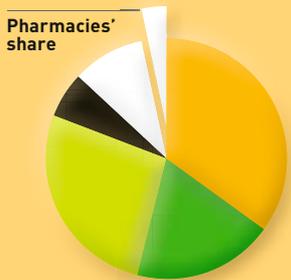
● Prescription medicines	80%
● Non-prescription medicines	14%
● Others	7%

Source: The Association of Finnish Pharmacies
Because of rounding up, the total exceeds one hundred per cent.



BREAKDOWN OF THE INCOME FROM MEDICINES SALES 2012
(estimated)

● Industry and wholesaling	61%
● Community pharmacy	24%
● State	15%



BREAKDOWN OF TOTAL HEALTHCARE EXPENDITURE 2011

● Specialised medical and hospital care	35%
● Primary healthcare*	19%
● Other expenditure	27%
● Oral hygiene	6%
● Medicines in non-institutional care	13%

* excluding occupational healthcare, student healthcare and dental care

In 2011, the total expenditure on healthcare was € 17 052 billion (9.0% of GNP), or about € 3 165 per capita. Of the total healthcare expenditure, only 3.2% was spent on maintaining the nationwide and dense community pharmacy network.

Sources: National Institute for Health and Welfare (THL) and the Association of Finnish Pharmacies

Customers satisfied and loyal

ACCORDING TO THE EPSI RATING study published in December, pharmacies have the most satisfied and loyal customers compared with all other businesses in the survey.

Customer satisfaction with pharmacies clearly surpasses that with grocery stores. According to the study Finns are also significantly more satisfied with their pharmacies than Swedes are with theirs.

EPSI Rating is an international analytical method for measuring intangible capital in businesses and organisations. Benchmark studies are conducted in more than 30 different business areas.



HOW THE PHARMACY SYST

1

THE PHARMACY LICENCE

TO ESTABLISH OR RUN a community pharmacy in Finland requires a pharmacy licence, granted by the Finnish Medicines Agency (Fimea). When a pharmacy licence becomes vacant, Fimea announces that it can be applied for, and grants that licence to the best qualified applicant.

Fimea also makes decisions, based on means tests, regarding the establishment of new pharmacies and subsidiary pharmacies. To qualify for a pharmacy licence, the applicant must be both a citizen of a country in the European Economic Area and an authorised pharmacist.

A community pharmacy licence is granted for a specific catchment area, typically a municipality but, in a city, there may be several such catchments. Within a particular catchment area a pharmacy may be relocated freely, for example close to an existing pharmacy. However, the siting of a subsidiary pharmacy is more strictly regulated.

A proprietary pharmacist may hold only one pharmacy licence and up to three subsidiary pharmacy licences at one time. Fimea can also grant a licence to establish pharmacy service points within the outlying districts of the pharmacy's own catchment area or beyond into a neighbouring municipality or a village centre. These service points may only be established in areas where there are no preconditions for running a pharmacy or a subsidiary pharmacy.

A subsidiary pharmacy can be turned into an independent pharmacy only if granted by Fimea. Establishing of a pharmacy chain is impossible in Finland.

A pharmacy licence is granted to a specified individual and it may not be sold on or leased out. The proprietary pharmacist has both professional and financial responsibility for that pharmacy. The pharmacy licence is terminated when the holder reaches 68 years.

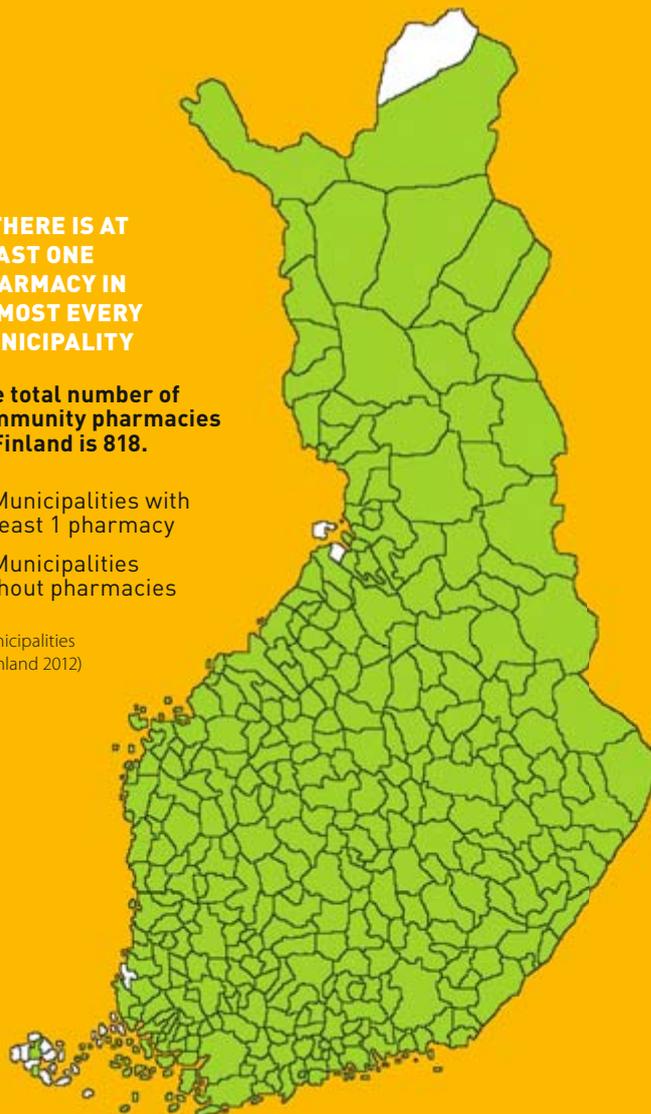
Several duties are attached to the pharmacy licence, the most important being to ensure good availability of medicines.

■ **THERE IS AT LEAST ONE PHARMACY IN ALMOST EVERY MUNICIPALITY**

The total number of community pharmacies in Finland is 818.

- Municipalities with at least 1 pharmacy
- Municipalities without pharmacies

(municipalities in Finland 2012)



■ **NUMBER OF PHARMACIES AND SUBSIDIARIES** (31.12.)
Figures include university pharmacies

	1970	1980	1990	2000	2010	2012
Pharmacies	561	564	576	595	618	617
Subsidiaries	97	126	173	201	194	201
Subsidiaries	658	690	749	796	812	818

Source: The AFP

EM WORKS

info:

■ AVERAGE PHARMACY 2012 (estimated)

Turnover:	approx. €3.4 million
Prescriptions/year:	71 000
Pharmacy fee to the state:	about €200 000 (about 6% of turnover)
Staff:	11 (proprietary pharmacist + staff pharmacist + 5 pharmaceutical assistants + 4 technical assistants)
(incl. part-time staff)	

■ PRESCRIPTIONS DISPENSED BY COMMUNITY PHARMACIES (millions of prescriptions)

2007	2008	2009	2010	2011	2012*
45.7	48.2	48.7	50.4	48.5	48.5

*estimated/AFP

■ RETAIL PRICE AT PHARMACY

Medicine tariff decided by the Council of State 11.12.2002

Wholesale price (€)	Retail price at pharmacy (€)
0 – 9.25	1.5 x wholesale price + €0.50 + VAT 10%
9.26 – 46.25	1.4 x wholesale price + €1.43 + VAT 10%
46.26 – 100.91	1.3 x wholesale price + €6.05 + VAT 10%
100.92 – 420.47	1.2 x wholesale price + €16.15 + VAT 10%
420.48 –	1.125 x wholesale price + €47.68 + VAT 10%

■ PHARMACY FEE TO THE STATE

Change in the Pharmacy Fee Act 1 334/16.12.2011

Pharmacy's annual turnover (€)	Pharmacy fee at the lower turnover limit (€)	Fee % exceeding turnover at lower limit
871 393 – 1 016 139	0	6.00%
1 016 139 – 1 306 607	8 685	7.00%
1 306 607 – 1 596 749	29 018	8.00%
1 596 749 – 2 033 572	52 229	9.00%
2 033 572 – 2 613 212	91 543	9.50%
2 613 212 – 3 194 464	146 609	10.00%
3 194 464 – 3 775 394	204 734	10.25%
3 775 394 – 4 792 503	264 279	10.50%
4 792 503 – 6 243 857	371 076	10.75%
6 243 857 –	527 096	11.00%

2

MEDICINE TARIFF

PRICES OF MEDICINES are the same in all community pharmacies because the Council of State determines retail prices based on the medicine tariff. In turn, the medicine tariff sets a retail price on a medicine according to a national wholesale price, which is the same for all pharmacies (see table). No discounts on medicine purchases are permitted. The medicine tariff is “counter-progressive”, i.e. the proportion of the sales margin decreases as the wholesale price of a medicine goes up.

PHARMACY FEE

THE PHARMACY FEE, in effect a tax, has a considerable impact on the finances of a community pharmacy. Community pharmacies pay the pharmacy fee to the state. The fee gives the state an income of about euro 150 million per year.

The pharmacy fee regulates the relative profitability of pharmacies of different sizes when the prices of medicines are the same in all pharmacies.

The pharmacy fee is based on the turnover of the pharmacy and it is progressive (0–11% of turnover). The smallest pharmacies do not pay any pharmacy fee (see table). This fee is mainly paid only on sales of medicines to the general public.

The effect of the fee is that a smaller pharmacy, compared with a larger pharmacy, will earn a little more from the sale of medicine when the price of medicine is the same.

3

THE AFP GROUP OF **COMP**

MEDIFON LTD.

MEDIFON IS A WHOLESALE business, a distributor and an importer for proprietary pharmacists. The company reorganised its operations and also started its own supply services for pharmacies from its distribution centre located in Pitäjämäki, Helsinki.

The company's product range includes the AFP member pharmacies own private label product lines. Additionally, the company markets for example LUGA foot care products, NUK maternity and child care products, and TEPE dental products.

Besides those products, Medifon distributes a number of free trade products of major suppliers including Berner's pharmacy products and Vitabalans's dietary supplements and other non-medicinal products. The company started distributing these in 2012, and they can be ordered directly via the pharmacies' data systems.

Medifon also supplies pharmacies with special pharmacy products, such as thermal signatures, plastic bags and neon signs. It is the only commercial company that is entitled to use the AFP's member pharmacy logo, the green cross, on its products.

Medifon business operations are expected to grow and diversify significantly. By expanding, the company is better able to meet the challenges of the operating environment and to create added value for the AFP member pharmacies and its principals.

Founded: 1981

Ownership: The AFP (100%)

Turnover 2012: €2.9 million

Staff: 12

CEO: Mika Flink



PHARMASERVICE

PHARMASERVICE PRODUCES services for the pharmacies to support the automated dose-dispensing of medicines. In addition, it subcontracts out the preparation of some nutrient additives for sale in pharmacies.

Nearly 300 pharmacies use the Anja dose-dispensing service and at the end of the year it covered 16 000 customers. Most of these customers use a range of medicines, suffer from several illnesses, and are either home nursing care



PHARMADATA LTD.

PHARMADATA DELIVERS data systems and data communications solutions to pharmacies. Its products are the Salix and pd3 pharmacy systems, Procuero, Presto, Proselecta and the pharmacy network Apteekkiverkko. Pharmadata also offers consultation and training.

Sales of the company's new pd3 pharmacy system began. Pd3 is the first centralised new generation data system to do away with the necessity for pharmacy staff to carry out such tasks as backing up copies and program updates.

The company's older Salix system, which operates in 470

ANIES

The Association's companies complement the AFP range of services to pharmacies.

patients or they live in sheltered accommodation. The service was supplemented by a medication reminder service.

In order to make the Anja dose-dispensing service better known to the public, the company increased its support for the sales and marketing of the service by providing human and material resources. Pharmacies were also offered help to streamline their own dose-dispensing processes. Thus, the ordering procedures compatible with the pharmacy programs, coupled with the Timo ordering interface, now facilitate the pharmacies' dose-dispensing processes.

The Anja dose-dispensing service increases patient safety because it always includes a check of the customer's medication. According to a PharmaService study, this check of interactions between medicines can prevent serious problems and substantially improve patient safety.

Despite an expanded customer base, the number of PharmaService staff remained the same, thanks to improved productivity. The capacity and reliability of dose-dispensing successfully satisfied the increased demand, and the company's financial situation improved.

Founded: 2001
Ownership: AFP (51%), Orion (49%)
Turnover 2012: € 11.2 million
Staff: 48
CEO: Risto Suominen

pharmacy outlets, is the market leader in Finland. It is easy to use, and it has a functional ePrescription feature. The system will continue to operate for several years alongside the new pd3 system.

The company renewed the technical solutions for Apteekkiverkko, and from 2013, pharmacies will be able to order this new, more reliable and cheaper technology.

Founded: 1989
Ownership: The AFP (100%)
Turnover 2012: € 6.9 million
Staff: 23
President and CEO: Jukka Litmanen

PHARMAPRESS LTD.

PHARMAPRESS, the communications and publishing company, produces communications services for both the AFP and its member pharmacies. It publishes the Apteekkari journal and also Terveystiesi!, the pharmacy customer magazine for AFP member pharmacies, plus a number of books, guides and other literature.

The company improved the online services of Apteekkari. A scalable Apteekkari Mobi user interface for mobile devices was created from the journals web pages making it possible to read Apteekkari while on the move. It is also possible to follow Apteekkari news and blogs on Facebook and Twitter.

PharmaPress arranged the exhibition that accompanied the Annual Spring Meeting event, held at the Marina Congress Center in Helsinki, in April 2012.

Apteekkari has been published for a hundred years, and this was celebrated in January.

Founded: 1997
Ownership: The AFP (100%)
Turnover 2012: € 1.3 million
Staff: 4 + 2 (IATOD)
CEO: Erkki Kostiainen



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THE ASSOCIATION OF
FINNISH PHARMACIES
2012

Apteekkariliitto
Apotekareförbundet



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