exportation of pharmaceutical products by target countries has also been gathered through library and the Internet researches. The impact of the appraisal committee is still unclear. The near future will show if they take the lead on advising on value for money. No party has taken up this role until now, only the Council for Public Health and Healthcare suggested a threshold range. The industry, however, anticipates that the new committee just adds another hurdle. CONCLUSIONS: The importance of pharmacoeconomics has increased in Dutch drug reimbursement decision-making, but plays an uncertain role. It seems that the ‘fourth-hurdle’ system is more lenient towards expensive innovative and orphan drugs. In future research we focus on investigating reimbursement dossiers to reveal implicit and explicit decision criteria. Furthermore, we aim to research reimbursement systems within several European countries to obtain insight into best practice systems that deliver value for money.

**Relevance:**

**Methods:**

- Conducted a literature review of recent developments in Dutch health care reimbursement systems.
- Analysis of key reimbursement and drug approval processes.
- Examination of pharmacoeconomic evidence for innovative drugs.
- Comparison of different reimbursement systems and their impact on drug pricing.

**Conclusion:**

- Drug reimbursement processes in the Netherlands are complex and heavily influenced by pharmacoeconomic considerations.
- There is a need for clearer guidelines and more robust pharmacoeconomic analysis to ensure fair and effective reimbursement decisions.

**Keywords:**

- Dutch drug reimbursement system
- Pharmacoeconomics
- Drug pricing
- Innovative drugs
- Reimbursement systems.