National Conference on Pharmaceutical Policies in India Balancing Industrial and Public Health Interests

## **Drug Pricing: Implication of DPCO 2013**

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## **Drug Pricing: Implication of DPCO 2013**

- Enlarged Span of Control
- Deeper Price Cuts
- □ Trade Margin: Industry in Limbo
- □ Retrospective Price Changes
- □ Future Availability at Stake

# **Enlarged Span of Control**

#### **Projected v/s Actual**

	<b>T</b>	NLEM 2011			
Particulars	Total IPM Rs Cr	Value Rs Cr	No of Medicines	Span of Control %	
As Projected in May 2012*	48,200	8,758	351	18.17	
Actual As of Sep 2013^	67,261	9,977	291	14.83	

\*Source: Draft NPPP 2011 (Pg 13) and IMS Health MAT Mar 2011

^Source: NPPA Notifications and IMS Health MAT May 2012

Total No. of Medicines in NLEM is 654

# **Enlarged Span of Control**

#### **Inclusion of NDDS Products**

- *"The Span of Price Control shall be as per the dosages and strengths as listed in NLEM 2011"* [Para 4 (iii) of NPPP 2012]
- □ NDDS Products Specified in NLEM 2011 are:
  - Acetyl Salicylic Acid as *Dispersible* Tabs,
  - Nifedipine as *Sustained Release* Tabs/Caps,
  - Glyceryl Trinitrate as *Sublingual* Tabs
- However, Inclusion of All Non-specified NDDS Products will Enlarge Span of Control

## **Deeper Price Cuts**

#### **Distribution Analysis of Price Reduction**

Reduction from Highest Price	As Projected in May 2012*		Actual As of Sep 2013^		
	No.	%	No.	%	
Upto 5%	140	52	9	3	
Between 5% and 10%	19	7	20	7	
Between 10% and 15%	14	5	30	10	
Between 15% and 20%	11	4	27	10	
Over 20%	86	32	205	70	
Total	270	100	291	100	

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<b>Reduction from Highest Price</b>	Actual As of	Sep 2013^	
	No.	%	
Between 20% and 35%	94	32	
Between 35% and 50%	74	26	
Over 50%	37	13	
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\*Source: Draft NPPP 2011, Page 28

^Source: NPPA Notifications and IMS Health MAT May 2012

## **Deeper Price Cuts**

#### **Analysis\* of Price Reductions**

Particulars	Total	Reduction	Impact	
No. of SKUs	6,307	2,521	40%	
MAT May 2012 Value (Rs Cr)	9,199	6,461	70%	

\* Covers Prices Notified Up to July 2013, i.e. 291/652 Products

Revenue Loss to Industry for 291 Products Only: Rs 1,614 cr

## **Deeper Price Cuts**

#### **Impact on Profitability**

Based on Notified Prices of 291 Medicines Only	Rs Cr
PAT Net of P&E Before Price Reduction Price Reduction	13,469 1,614
PAT Net of P&E After Price Reduction	12,862
Loss of Profit	12%

Impact of 291/654 Medicines Only

## Trade Margin: Industry in Limbo

#### Loss of Trade Margin

No	Particulars		Sales Value - Rs Cr	
			@ PTR	Gain/(Loss) Rs Cr
1	Coming-In: 319 Products (approx 9,000 SKUs)	12,409	10,697	-1,176.70
2	Going-Out: (6,094 SKUs)	10,806	8,645	687.00
3	Net Loss	1,603	2,052	-489.70
4	Net Loss as % of Sales @ MRP			-3.95%

Source: IMS Health MAT MAY 2012

Raise Margin to Support Small Chemists

## Trade Margin: Industry in Limbo

**Coercive Action by Trade Impacting Access** 

- The Boycott of NLEM Products and Selective Boycott of Companies by the Trade for Inadequate Margin is Hurting the Patients as the Supply of Essential Medicines is Affected.
- All Efforts by the Government to Discipline the Trade have not Succeeded as Small Chemists are Unable to Absorb the Loss of Margin

## **Retrospective Price Changes**

#### A Messy Exercise, Benefits None

"...in case of scheduled formulations produced or available in the market before the date of notification of ceiling price, the manufacturers shall ensure within a period of forty-five days of the date of the notification that the maximum retail price of such scheduled formulation does not exceed the ceiling price (plus local taxes as applicable)." [Para 24 (i) of DPCO 2013]

- □ Unlike Past Practice, the Price Changes are Made *Retrospective*.
- Manufacturers are Obliged to Reduce Prices of Goods Cleared on Payment of Excise Duty and VAT.
- By This Logic, in Case of Price Increase, Authorities can Demand Differential Excise Duty & VAT on Cleared Goods Also.
- Logistical Nightmare for Trade & Industry.
- □ No Gain for Consumer, as Old Stock is Sold at Old Prices.

All Price Changes Should be Made Prospective

# Future Availability at Stake

**Questions to Ponder** 

- Universal Healthcare, Better Infrastructure and Population Growth Will Drive Demand for Essential Medicines.
- □ How Will Supply Keep Pace with the Growing Demand?
- Would Companies Make New Investment for Raising Production of Essential Medicines?
- □ Is Supreme Court Going to Ensure Availability?

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# THANK YOU

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