# New International Healthcare Policies in Making Perspective from India



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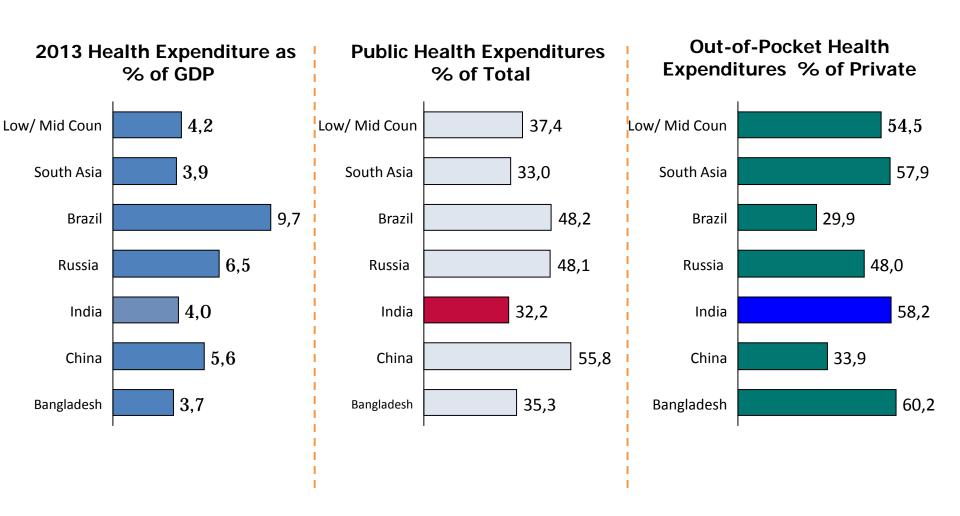
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#### **India Profile**

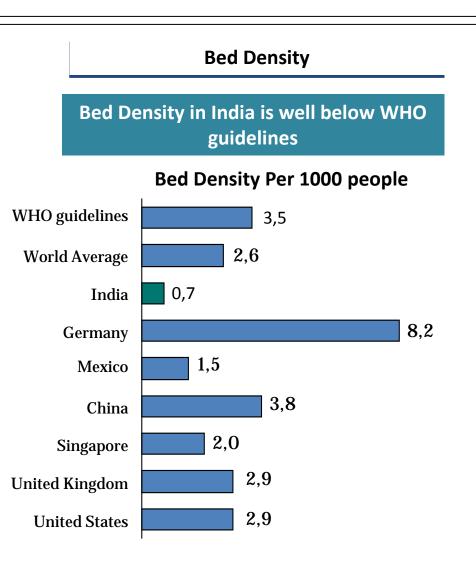
Population	1.35 bn
Population Growth Rate	1.11%
Life Expectancy (Male)	67.6 years
Life Expectancy ( Female)	70.1 years
Literacy	79%
GDP ( at current prices)	USD\$ 2,603 bn
Real GDP growth	7.2%
GDP in PPP ( 3 <sup>rd</sup> largest)	US\$ 10,340 bn
Per capita income (nominal)	US\$ 1,928
Exports	US\$ 303 bn
Imports	US\$460 bn
States	28
Languages/Dialects	

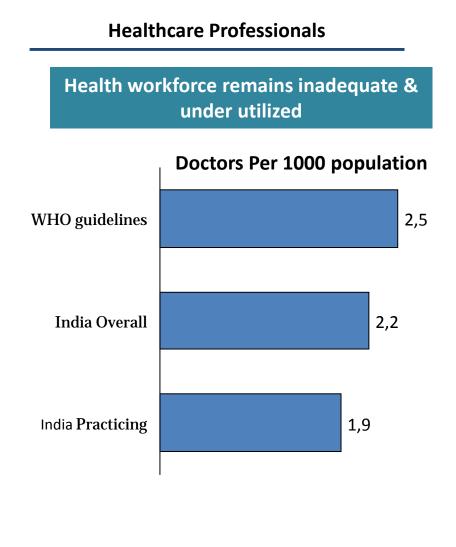


### Low Healthcare Expenditure: Limits Access



#### Access to Healthcare in India is a Challenge





# Healthcare Access Needs to be Viewed in a Holistic Manner



- IMS access study captures 15,000 households across the income group population in 12 states, 36 districts, 12 metros, 64 urban towns and villages
- Data collected on more than 30,000 illness episode

Source of access dimension: IMS access study 2013

#### **Evolution of Pharma Sector – Pharma 4.0**

Pharma 2.0 Pharma 3.0 Pharma 1.0 Pharma 4.0 1980-2005 2005-2018 Pre 1980s 2018 onwards **Post** Post product Prior to process The next decade implementation patent & reforms patent regime of process patent Decades of Globalization Market Thrust on Quality strong growth dominated by and Innovation and 20 % global innovators penetration, generic market **Improving** by Indian Access companies **Building of** manufacturing Export to more capabilities than 200 markets

#### **Access of Medicines: Pricing Policy**

- Drug Price Control Order, 2013: Movement to market-based pricing policy from cost based policy
- ➤ 376 drugs under National Essential List of Medicines accounting for 25% of pharma market
  - Drugs selected through consultative process with medical professionals across country
  - Average price taken of all brands with more than 1% market share
- Price increase in line with inflation for price controlled products and 10% on non price controlled products
- Government can exercise price control in other categories depending on national interest
  - Capping on trade margin on oncology products
- > 95% is branded generic and self pay market
  - Low penetration of biosimilars and patented products

#### **Access of Medicine: Public Procurement Initiative**

#### Janaushadhi Yojana (PMBJP)

- Objective to make available quality generic medicines at affordable prices
- ➤ Covers more than 800 medicines and 154 surgicals & consumables in all major therapeutic categories; pricing is 1/4<sup>th</sup> of branded generics
- ➤ 4,400 retail stores in 35 States/Union Territories of the country with sales of US\$50 million
- Limited response on account of store locations and overall management

Source: <a href="http://pharmaceuticals.gov.in/schemes/pradhan-mantri-bhartiya-janaushadhi-pariyojana-pmbjp">http://pharmaceuticals.gov.in/schemes/pradhan-mantri-bhartiya-janaushadhi-pariyojana-pmbjp</a>

### **Universal Health Coverage**

Pradhan Mantri Aarogya Yojana (PMJAY)

- Hospitalization for secondary and tertiary care
- Provide a cover of US\$ 7000 per family per annum to 100mn family 500mn people
- Sustainable Development Goal 3 ("good health and well-being")

Comprehensive Primary Health Care

- 65% government budget proposed for primary health care
- 150,000 Health and Wellness Centers
- Screening & early detection of NCDs
- Monthly dispensing of drugs
- Point of care diagnostics

## **Way Forward**

- ➤ India is a highly competitive and self pay market
- Strengthening healthcare infrastructure fundamental for improving access
- Government policy and digital technology will play important role in improving access and is a key agenda for new government

# THANK YOU

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