1. **Indian pharma industry fears tougher US stance on IP** – Business Standard

Indian pharma industry is fearing a tougher US government stance on intellectual property rules after US President Donald Trump asserted that foreign countries must pay a fair share for drug development costs. Trump made the remark and reiterated his call to lower drug prices for American consumers and said he will encourage local manufacturing. Trump who met senior executives of pharmaceutical companies including Novartis, Merck, Johnson & Johnson and others said foreign countries have been “freeloading” on the United States with price controls that limit what can be charged on their citizens for medicines. According to D G Shah, secretary general of Indian Pharmaceutical Alliance, Trump's remarks indicate a hardening of stance by US government on intellectual property rights issues. “This was anticipated and I believe US will put pressure on India to amend its intellectual property rules to allow longer exclusivity for patented products and making generic versions difficult,” he said.

2. **The right priorities for healthcare spending** – Mint

What do patients actually want? Will they settle for compromised, sub-standard healthcare as long as prices are affordable? Or does the vast majority prefer the best quality possible at rational cost? This question needs to be pondered upon and answered correctly before priorities are decided, strategies fixed and actions taken by policymakers and service providers. Today, India is experiencing a dramatic transition in disease burden, with non-communicable diseases taking centre stage. With this transition, we need to recognize the threat posed to the social and economic well-being of the country and find sustainable solutions to address it. The only sustainable solution lies in robust infrastructure, effective resource mobilization and capacity-building within our states. We must improve the quality of doctors and nurses, healthcare delivery systems, better hygiene and sanitation levels, and not just focus on controlling the prices of drugs. Simply fixing the prices of medicines will not help anyone, least of all the patient. Patented medicines are a small percentage of medicines used in India. Off-patent medicines represent over 90% of the medicines on the World Health Organization’s (WHO’s) list of essential drugs, yet millions lack access to quality medicines in India. Solutions need to be holistic, far-reaching and inclusive, and must be decided after discussion with all stakeholders, including patients and patients’ organizations.
3. **Donald Trump’s call to pharma firms to move back to US could hit Indian exporters** – The Financial Express

Foreshadowing “Buy American” moves that could affect the largest market for Indian pharmaceutical companies, US President Donald Trump told drug makers on Monday to bring back manufacturing to the United States. “I want you to manufacture in the United States,” he told leaders of seven major pharmaceutical companies. “I want you to move your companies back into the United States.” To facilitate this, he said: “We’re going to be lowering taxes, we’re going to be getting rid of regulations that are unnecessary.” India exported $6 billion worth of drugs to the US in 2015 and restrictions on pharmaceutical imports and manufacturing abroad could impact the industry in India. Trump also hinted at the possibility of ending a multi-layered pricing system for medicines by which rates are often set lower for drugs sold abroad than in the US. “Our trade policy will prioritise that foreign countries pay their fair share for US manufactured drugs so our drug companies have greater financial resources to accelerate the development of new cures,” he said. “And I think it’s so important. Right now, it’s very unfair what other countries are doing to us.” The meeting was part of a series of meetings he has been holding with leaders of different sectors to get them to increase jobs and investment in the US to further his campaign promises. The CEOs of Amgen, Novartis and Eli Lily were among those who attended.

4. **Donald Trump calls drug pricing ‘astronomical’ and promises changes** – Mint

President Donald Trump told drugmakers at a White House meeting Tuesday they were charging “astronomical” prices and promised to get better bargains for government health programs, in addition to finding ways to get new medicines to market faster. “The pricing has been astronomical,” Trump said to chief executives of some of the world’s biggest drugmakers, who came to Washington after Trump’s criticism of the industry earlier this month sent drug and biotechnology stocks plunging. “You folks have done a very great job over the years but we have to get the prices down.” Trump has threatened to have the government negotiate prices directly with the industry on behalf of Medicare and Medicaid, which are some of the world’s biggest purchasers of health-care products and services and cover tens of millions of Americans. “Competition is key to lowering drug prices,” the president said. At the same time, Trump promised to slash regulations, get new treatments to market faster at the Food and Drug Administration, and increase international competition. “We’re going to streamline FDA; we have a fantastic person” that will be announced to lead the agency soon, Trump said. He also promised to cut taxes on business and lure companies back to the US.

5. **India’s public spending on health well below global avg: Survey** – The Times of India

The country's public spending on health is "little over" 1 per cent of GDP, the Economic Survey said today, adding that there are "insufficient" instances of good models in the health sector. "Given the pressing need to redistribute, India did not invest sufficiently in human capital for instance, public spending on health was an unusually low 0.22 per cent of the GDP in 1950-51. "This has risen to a little over 1 per cent today, but well below the world average of 5.99 per cent," the survey tabled in Parliament said. It said that as per Reserve Bank of India data, expenditure on social services by Centre and states, as a proportion of GDP was 7.0 per cent during 2016-17 (Budget Estimate), with education and health sectors accounting for 2.9 per cent and 1.4 per cent respectively. "The year 2014-15 in respect of which latest actual figures are available showed a significant decline from the RE level following a large decrease in actual social sector expenditure of the states from the revised estimates," it said. It said that on state capacity, delivery of essential services such as health and education, which are predominantly the preserve of state governments, remains "impaired". "But on health and education there are insufficient instances of good models that can travel widely within India and that are seen as attractive political opportunities. Competitive populism needs a counterpart in competitive service delivery," it said. The Economic Survey said that a second distinctive feature of the Indian economic model is the "weakness" of state capacity, especially in delivering essential services such as health and education.
6. **Health Ministry Likely to Get Increased Funding in Budget 2017-18** – The Wire

India’s health ministry is likely to see a substantial increase in funding, after it warned that its programs were short of cash and sought more than $1.2 billion in additional money, according to government officials and documents seen by Reuters. The final numbers could change when finance minister Arun Jaitley presents the Budget for fiscal 2017-18 on Wednesday, February 1. But one official familiar with the numbers said the health ministry is expected to get a $1.5 billion, or 27%, increase in funding to around $7 billion. The health and finance ministries did not respond to requests for comment. An increase in the budget allocation, if finalised, would signal an acknowledgment from Prime Minister Narendra Modi’s administration that the country needs to ramp up spending on the sector. Successive administrations have faced criticism from public health advocates for spending only around 1% of India’s GDP on public health, less in percentage terms than countries like Afghanistan and Sierra Leone. More than a million Indian children die every year before reaching the age of five. Hundreds of millions of poor people rely on India’s public health programs which provide basic services like vaccinations, disease prevention and free drugs.

7. **Stent price cap alone won’t make angioplasties cheaper** – The Times of India

Will capping stent prices alone make angioplasties cheaper? While it is a step in the right direction, industry experts and health activists say this alone would be hoping for an exceedingly easy solution to a complicated problem involving market dynamics. A debate on stent pricing has been raging across the country since the National Pharmaceutical Pricing Authority (NPPA) proposed regulating the cost that range from Rs 21,881 to Rs 67,272. Currently, hospitals charge anywhere between Rs 50,000 and Rs 2.5 lakh for stents varying in size, quality and type. The cost also differs as per the hospital or the class that a patient opts for. However, some fear the practice of most hospitals, particularly private ones, to bill patients for a complete angioplasty package and not individually for stents, could render the whole exercise ineffective. "Controlling MRP of stents is the right direction but it’s only the first step. Ultimately we need the Clinical Establishment Act or a drug policy not just to regulate costs but also for patient empowerment and awareness," Dr Mira Shiva of the Delhi-based All India Drug Action Network (AIDAN) that has been at the forefront of the fight for stent-price regulation. She added that stents are just one part of the cardiac procedure that includes many other elements such as hospital cost, doctor and bed charges.

8. **Healthcare expected to get Rs 45,000 crore in Budget** – The Asian Age

With the threat of Non Communicable Diseases (NCDs) looming large, a preventive health programme to provide emergency care and management of cancer, diabetes, hypertension and acute cardiovascular diseases is likely to be announced during this Budget. Expecting a 15-20 per cent hike this time, officials say that a newly revamped TB programme, upgradation of over 80 district hospitals to medical colleges are likely to be some of other highlights this health Budget. “A universal screening programme for NCDs is likely to announce in the Budget. Along with this, increasing the outreach of TB programme and introducing daily drug regimen may find space during this year’s Budget announcement,” sources said. Already one of the World’s lowest, officials are expecting a hike in the public health spending from the total of Rs 37,000 crore to Rs 45,000 crore. The officials have a reason for being optimistic. “A total of 72 per cent of the planned budget and 80 per cent of the non plan Budget has already been utilised till December 31. We are optimistic in a view of our performance,” said a senior official.

9. **Health groups call on central govt to urgently make lifesaving TB drug delamanid available in India** – Pharmabiz.com

Even as the country is facing the highest prevalence of both drug-sensitive (DS-TB) and drug-resistant forms of TB (DR-TB) in the world, a large number of NGOs including the DR-TB survivors, networks of people living with HIV and public health organisations have called upon the Union government to incorporate the life-saving anti-TB drug delamanid into its Revised National Tuberculosis Control Programme (TB Programme). In a letter to the Union Ministry of Health, these organisations have urged the government to direct Ostuka Pharmaceuticals Co. Ltd (Otsuka), the
company that holds monopoly control over the drug, to register delamanid in India without further delay. A demand in this regard by the public health organizations is significant as India has some of the highest prevalence of both DS-TB and DR-TB, including multidrug-resistant (MDR-TB) and extensively drug-resistant tuberculosis (XDR-TB), in the world. In most cases, DR-TB patients face a minimum of nine months of treatment, usually closer to two years, during which they must swallow more than 10,000 pills in addition to six to eight months of painful injections. Side effects caused by the drugs are horrendous, ranging from persistent nausea to deafness and psychosis.

10. **Indian healthcare providers pin hopes on classification of the sector under ‘zero percent’ GST – Pharmabiz.com**

   The Indian healthcare providers pin hopes on the Union government for a zero percent GST (goods & services tax), to enable patient affordability that could spur rapid growth of the industry. The industry is also keen to see an increase in the limit of tax exemption for premiums under medical insurance cover to encourage people to invest in sufficient health coverage. They also see that the insurance premiums with nil GST rate would encourage wider subscription. Just a few hours before the finance minister Arun Jaitley presents the Budget 2017, hospitals like Columbia Asia, Vikram and Vaatsalya Dental Care are keenly awaiting lowering of the cost of setting up healthcare facilities via tax incentives by increasing the tax exemption period. Increase in depreciation rates for radiology and lab equipment with additional deductions to accredited hospitals as an incentive to improve the level of quality care for patients. In order to lower the cost of maintaining hospitals, exemption of import duty / customs duty on life saving medical devices and related consumables would give the much needed support.