

**Access to Healthcare**

1. [Price control ineffective in improving access to drugs: IMS Study](#) – Pharmabiz.com
2. [IPA to work closely with MCGM in its fight against TB in Mumbai](#) – Pharmabiz.com

**Medical & Regulatory**

1. [SC asks government to review its market-based drug pricing policy within six months](#) – The Economic Times
2. [We've written to Centre over regulation of stent prices: Minister](#) – DNA India
3. [Bill makes distinction between drugs and medical devices: AdvaMed](#) – The Economic Times
4. [NPPA fixes price of 39 drug formulation packs](#) – Business Standard

**Others**

1. [AHPI, IMA find compensation for medical negligence cases very high in India](#) – Pharmabiz.com

**Access to Healthcare**

1. [Price control ineffective in improving access to drugs: IMS Study](#) – Pharmabiz.com  
Price control is neither an effective nor sustainable strategy for improving access to medicines for Indian patients, according to a new report by The IMS Institute India. The study, 'Assessing the Impact of Price Control Measures on Access to Medicines in India', is based on both extensive quantitative data analysis of growth and volume trends and in-depth qualitative interviews with industry stakeholders and policy makers.
2. [IPA to work closely with MCGM in its fight against TB in Mumbai](#) – Pharmabiz.com  
In a strategic move aimed at strengthening its TB control and awareness initiative in Mumbai, the Indian Pharmaceutical Association (IPA) will be working closely with the Municipal Corporation of Greater Mumbai (MCGM), the primary agency responsible for urban governance in greater Mumbai. This move is to spread its pharmacist PPP TB model throughout the city through active collaboration with all the district TB officials (DTOs) under the MCGM and with chemist association.

**Medical & Regulatory**

1. [SC asks government to review its market-based drug pricing policy within six months](#) – The Economic Times  
The [Supreme Court](#) on Wednesday asked the government to review its market-based drug pricing policy within six months, endorsing a non-governmental organisation's charge that the earlier cost-based pricing was better and the new one only legitimises profiteering and pushes drugs out of reach of the poor.

2. [We've written to Centre over regulation of stent prices: Minister](#) – DNA India  
The state government has written to the National Pharmaceutical Pricing Authority (NPPA) asking it to bring the prices of cardiac stents under control and decide the profit margins. Once implemented, this will regulate the prices of these life-saving devices and prevent overcharging.
3. [Bill makes distinction between drugs and medical devices: AdvaMed](#) – The Economic Times  
A medical device makers body today said that the Drug and Cosmetics Bill which is awaiting passage in Parliament will enable the industry to serve the needs of Indian patients in a better way. AdvaMed, an association of medical device manufacturers that provides 40 per cent of the medical technology said that currently out of the 14,000 types of medical devices that exist, only 22 are on the government's list and even these are treated as drugs.
4. [NPPA fixes price of 39 drug formulation packs](#) – Business Standard  
National drug price regulator NPPA has fixed the prices of 39 formulation packs including drugs used to treat diseases such as diabetes, infections, digestive disorders and pain among others. In a statement, National Pharmaceutical Pricing Authority (NPPA) said it "has fixed/ revised the prices in respect of 39 formulation packs..."

## Others

1. [AHPI, IMA find compensation for medical negligence cases very high in India](#) – Pharmabiz.com  
Association of Healthcare Providers India (AHPI) and the Indian Medical Association (IMA) have observed that compensation for medical negligence is far more expensive than the medical care which is provided to patients. Following the huge increase in the number of cases filed against doctors and significant rise in the premiums paid to insurance companies, healthcare providers view this as huge expenditure. Hospitals and doctors are now reluctant to take on complicated cases for fear of medico-legal issues and many have stopped practice.