

OPPI NEWSLETTER

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**#BharatKeLiye
#PowerofPartnership**

**Power Of Partnerships:
Celebrating 60 Years
Of Collaborative Progress
In Indian Pharma**

**OPPI Summit: Partnerships
Pivotal To Propel India's
Pharma Transformation**

**Toward A Level Playing Field
In New Drug Approvals**

Map not to scale



Anil Matai Director General, OPPI

Welcome to the seventh edition of the OPPI Newsletter!

This edition closes a landmark year for Organisation of Pharmaceutical Producers of India (OPPI) as we mark 60 years of sustained engagement with India's healthcare ecosystem. Rather than looking back through milestones alone, this issue reflects on how India's pharmaceutical journey has been shaped by something less visible but more enduring: partnerships built on trust, evidence, and shared responsibility.

Over six decades, OPPI has evolved alongside the industry it represents. From early dialogues on pricing and quality to today's conversations around innovation, regulatory reform, and global capability building, progress has consistently depended on collaboration across government, industry, academia, and society. That collaborative approach has helped India move from manufacturing scale toward greater scientific ambition, even as important gaps in research capacity, funding, and translation remain.

This edition brings together perspectives that examine these tensions with clarity. It explores how initiatives such as PRIP are attempting

to strengthen the innovation pipeline, how regulatory frameworks are adapting to create a more level playing field, and how Global Capability Centers are reshaping India's role in global research and development. It also steps back to reflect on the broader system – where India stands today, what the data tells us about its innovation readiness, and what alignment will be required as the country advances toward its *Viksit Bharat 2047* goals.

Taken together, the articles in this issue reinforce a central idea: sustainable healthcare progress is cumulative. It depends not only on new policies or technologies, but on continuity of dialogue, institutional trust, and the ability to connect ambition with execution.

We hope this edition offers useful context and encourages continued engagement on the issues shaping India's healthcare future.

Wishing all the readers a very happy new year!
May the year ahead be filled with new opportunities, continued growth and prosperity.

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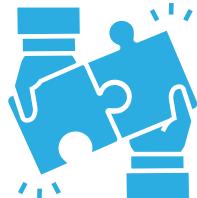
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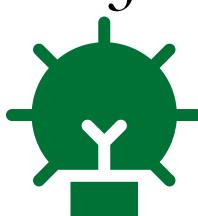
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Power of Partnerships: Celebrating 60 Years of Collaborative Progress in Indian Pharma

Bhushan Akshikar, President – OPPI, Vice President & Managing Director, GlaxoSmithKline Pharmaceuticals Limited

Key Highlights:

- OPPI's 60-year legacy reflects the central role of collaboration in shaping India's pharmaceutical ecosystem
- Partnerships have evolved from early regulatory foundations to ongoing engagement on access, pricing, and innovation
- OPPI's role as a bridge between industry, government, and global stakeholders has supported evidence-based policy dialogue
- Collaboration with R&D ecosystems and Global Capability Centers is strengthening India's contribution to global science while keeping patients at the center
- Sustained partnerships are positioned as critical to building a transparent, innovation-ready healthcare future

For six decades, the Organisation of Pharmaceutical Producers of India has stood at the heart of India's pharmaceutical evolution—driven by a simple but transformative belief: that progress in healthcare is only possible when partnerships thrive. As OPPI marks 60 years of service, the theme "Power of Partnerships" is not just a celebration, it is a reaffirmation of the collaborative spirit that will shape the future of India's healthcare ecosystem.

The inception of OPPI brought together research-based pharmaceutical companies under one unified, credible voice. What set this institution apart from the very beginning was its commitment to fostering a platform where industry leaders, scientists, regulators, and policymakers could sit together, challenge ideas, and find solutions rooted in science and integrity.



POWER OF PARTNERSHIP

This collaborative ethos laid the foundation for India's early pharmaceutical framework—supporting regulatory evolution, quality standards, and scientific dialogue at a time when the country was shaping its healthcare identity. OPPI became the meeting point of innovation and governance, enabling an industry capable of both global competitiveness and deep local impact.

As the sector entered a more complex phase—marked by rising expectations in drug accessibility, pricing, import regulations, and industrial growth—partnerships became even more essential. The healthcare ecosystem was expanding, and so were the challenges. OPPI's role evolved accordingly: from being a representative body to becoming a bridge between diverse stakeholders.

The organisation led informed, trusted discussions that helped shape national regulatory thinking. It championed responsible communication and evidence-based policy advocacy. This spirit of collaboration enabled OPPI to engage with the government and regulators in the areas of Regulatory Reforms, Pricing Reforms, and have a continuous dialogue for valuing and recognizing innovation. Partnerships with global and national think tanks and industry associations deepened India's strategic dialogue on innovation, access, and trust, positioning the nation as a crucial contributor to global healthcare discussions.

This collaboration-driven approach is equally reflected in OPPI's engagement with Global Capability Centres, innovation hubs, and emerging R&D ecosystems. Together, these partnerships reinforce India's growing influence as a global leader in scientific innovation while ensuring that national health priorities and patient well-being remain at the centre of every decision.

A 60-year legacy—and a future built on collaboration—defines OPPI's journey as India stands at the crossroads of scientific innovation, digital transformation, and expanding healthcare access. Today, the need for collaboration is more urgent than ever, with the future of healthcare set to be shaped by partnerships across industry and government to create transparent, predictable, and innovation-ready policies; industry and academia to build a skilled, future-ready workforce; industry and patient communities to design solutions rooted in lived experience; and India and the world to ensure equitable access to global scientific breakthroughs. At OPPI, we believe collaboration is not just a strategy—it is the lifeline of progress, strengthening trust, accelerating innovation, and ensuring healthcare remains centred on patient wellbeing.

As we celebrate 60 years of OPPI, we honour every partner – government bodies, industry, academia, media, patient groups, scientific institutions, global organisations, and the many individuals whose commitment has shaped our journey.

The Power of Partnerships is not merely our theme; it is our legacy and our path forward. Together, we will continue to build an ecosystem where innovation thrives, healthcare becomes more equitable, and India strengthens its position as a global pharmaceutical leader.





OPPI Annual Summit: Partnerships Pivotal To Propel India's Pharma Transformation

Anju Ghangurde, Executive Editor of APAC, Citeline

Key Highlights:

- OPPI Annual Summit underlines the role of collaboration, trust, and digital innovation in India's journey towards emerging as a global innovation powerhouse
- Discussions covered emerging opportunities in biopharmaceuticals and the importance of faster pathways to market for innovations.
- India's role as a reliable partner to the world, its contributions to global healthcare, and the need to preserve health sovereignty highlighted
- The need to further mobilize the power of partnerships, where all stakeholders work together around shared incentives, was also emphasized

The OPPI's flagship annual summit saw top government functionaries, regulatory officials, industry leaders, patient support groups, and academia underscore the pivotal role of partnerships across the ecosystem as India seeks to position itself as a global biopharma innovation hub.

The summit, while celebrating the many advances enabled by the collective strength of alliances in the past, emphasized that India's transition from the 'pharmacy of the world' to a global pharma powerhouse will require sustained partnerships built on the edifice of trust, transparency, and shared purpose.

Shri Amit Agrawal ji, Secretary, Department of Pharmaceuticals (DoP), Government Of India, stated that India believes in partnerships, in fraternity and the principle of 'Vasudhaiva Kutumbakam,' [which means 'the world is one family'] and is not a nation which is 'hegemonic'.

"We value partnerships. We have been a reliable partner to the world, a resilient partner and supplier to the world, and we seek to be a partner not just in manufacturing and supply but also in innovation and discovery," Agrawal ji asserted in his keynote address at the summit.

Agrawal ji discussed the shifting industry landscape towards biopharmaceuticals, the role of AI in reducing discovery costs and time, and the huge emerging opportunities for India in areas like biosimilars, while also acknowledging the need for faster pathways to market for products. "We are deeply engaged with that thought on how to enable and create pathways, systems, and capacities for that. Collectively, it would mean that a lot more can happen in India today than has happened in the past. That is really the opportunity, and partnership is the way to unlock it," he stated at the summit.

OPPI Director General, Anil Matai, in his opening address, highlighted the recent goods and services tax (GST) rationalization measures and the Promotion of Research and Innovation in Pharma-MedTech Sector (PRIP) scheme, India's ambitious R&D incentivization initiative. "These are big changes and, if implemented in the true sense and spirit, will be big enablers to take the industry to the next level," Matai observed.

Matai also said that India's journey towards becoming a global healthcare powerhouse will be defined by how effectively stakeholders work together, breaking silos, aligning goals, and ensuring that innovation reaches every patient in need. OPPI, he underlined, remains committed to enabling these partnerships, which are not just about collaboration and progress but also about co-creation and purpose.

'Partnership Driven Development Model'

Union Minister of Health and Family Welfare and Minister of Chemicals and Fertilizers, Shri JP Nadda ji, in a video message at the summit, highlighted India's role in supplying medicines to over 200 countries, providing 40% of US generic medicines and 60% of global vaccine requirements, as well as the "Vaccine Maitri" effort during the COVID-19 pandemic. Government initiatives like Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB PM-JAY) and Jan Aushadhi kendras have also improved healthcare access and affordability.

Nadda ji also noted that India is now home to over 1,600 global capability centers (GCCs), including

many in the pharma and life sciences segment, establishing itself as a hub for research, digital innovation, and high-value jobs. These achievements result from "strong political will, policy stability, and a partnership-driven development model that places India's citizens at the center," he underlined.

"But the next decade will be even more decisive. The question before us is not whether India will grow, but whether we will innovate for the world? Will we shape the future of global health? For that, the power of partnership is essential more than ever before," he declared.

The minister also stressed that India's health sovereignty is "non-negotiable" and called for reducing dependency on imported critical APIs and technologies. Transitioning from being a 'pharmacy' to a 'laboratory' of the world, with more cutting-edge research coming from India while also prioritizing affordability and equity in healthcare, were the other key aspects he emphasized.

Reflecting a similar assessment, Dr Vinod K Paul, Member-Health, Niti Aayog, said that self-reliance is critical for India and drew attention to the COVID-19 pandemic years where the country had to manage "a large population, such big requirements, complex topography and ecosystem".

"We have to have solutions that are available here, are made in India, and – as much as possible – are developed in the country for India and for the world," Dr Paul stated.

As India moves toward the Viksit Bharat vision by 2047, Dr Paul urged industry to "reshape its agendas, its thematic areas of work to be able to think big both for the economy as well as for human and animal life, welfare and health".

Collaboration continued to be the underlying theme at the summit with Smt Punya Salila Srivastava ji, Secretary, Ministry of Health and Family Welfare, in her keynote address, highlighting the impact of partnerships in tackling public health challenges in India, particularly in areas like tuberculosis.

Prof. Ajay Kumar Sood, Principal Scientific Advisor to the Government of India, similarly noted that OPPI's collaboration with the public sector has been instrumental in expanding access to care, promoting preventive health, and responding effectively to national health priorities, referring in particular to the

COVID-19 pandemic where industry and government work hand-in-hand to build resilience.

Prof. Sood, in his video message at the summit, also lauded the OPPI's efforts over the years in connecting diverse stakeholders, fostering dialogue, advancing research, and "ensuring ethical practices and supporting policies that strengthen our health systems".

Regulatory Streamlining, GCCs

Srivastava ji, like the DoP Secretary Agrawal ji, signaled ongoing efforts by the government to introduce regulatory measures that can streamline, strengthen, and promote innovation.

"It can promote transparency, predictability of the Central Drugs Standard Control Organization's processes," Srivastava ji said in her keynote address and sought industry's feedback on how things can be done "effectively without impacting public safety". India has also launched the State Health Regulatory Excellence Index (SHRESTH) to benchmark and strengthen state drug regulatory systems through a transparent, data-driven framework.

The Secretary, Ministry of Health, and Family Welfare also further urged OPPI to facilitate technical assistance to help micro, small, and medium enterprises (MSMEs) advance, while also moving towards making India a manufacturing hub for the "entire spectrum of medicines".

"You have already opened GCCs in India. Now how would you like to enhance your R&D footprint in India so that we can switch from volume to value?" she added.

Prof. Sood emphasized that partnerships will be more important than ever in future and noted that GCCs are driving innovation and R&D in India while generating employment and upskilling talent. "Together, we must continue to harness innovation, digital health, and sustainable models of care to ensure that quality healthcare reaches every citizen leaving no one behind," he stated.

The summit also marked the launch of OPPI's benchmark thought leadership report: 'Fueling Innovation, Advancing Equity: The Power of Partnerships and Digital-First Strategies Driving Indian Pharma's Global Dominance', developed in collaboration with EY Parthenon. In addition, OPPI

unveiled the 'Essays on Innovation' publication and a Coffee Table Book celebrating milestones in India's healthcare journey.

Opportunity To Reimagine Healthcare

Industry leaders also stressed the need for companies to adapt and create impactful solutions as next generation therapies reshape treatment paradigms.

Bhushan Akshikar, President OPPI and Vice President and Managing Director, GlaxoSmithKline Pharmaceuticals Limited noted that as the sector evolves with advancements like cell and gene therapies; what worked for industry in the past won't necessarily take it to the "next orbit".

"The call to action for member companies is what needs to get unlocked to continue to create that same impact at scale, because at the core of it, our primary responsibility is to those 1.45 billion Indians who live here," Akshikar explained.

Referring to AB PM-JAY, the country's mammoth publicly funded health assurance scheme covering almost 600 million Indians. Akshikar emphasized the need to "unlock value" by integrating innovative medicines and vaccines into the system, so that all eligible patients have access to those treatments.

The OPPI President also maintained that partnerships are the catalysts that turn scientific discovery into meaningful impact. Combining the strengths of industry, government, academia, and the medical community, can accelerate innovation, strengthen healthcare delivery, and create sustainable solutions that reach those who need them most.

"Together, we have the opportunity to reimagine healthcare – one that is data-driven, digitally enabled, and deeply human in its purpose. The power of partnership will define how effectively we translate today's ideas into tomorrow's healthier, more resilient India," he stated.

Dr. Monica Puri, chief commercial officer of Roche Products India Pvt Ltd, similarly reiterated the importance of working together to advance healthcare in India, whether it's fast-tracking innovation, strengthening research capabilities, building early detection programs, or ensuring equitable access across geographies.

"The industry brings science and innovation, regulators create pathways of trust and speed, and academia builds evidence that grounds our progress. Civil society ensures accountability, inclusion and reach. Each one of us is a vital piece of a much larger puzzle and only when every piece aligns do we unlock the full promise of a healthier and a more prosperous India," Dr Puri stated.

David Reddy, Director General, IFPMA, underlined the need to further mobilize around the power of partnerships, where stakeholders work together around shared incentives, aligned responsibilities, mutual accountability, and a focus on delivering healthier futures for people everywhere.

Reddy pointed out that breakthrough advances in medicines and vaccines had driven over a third of the gains in life expectancy worldwide, transforming global health and building the foundation of more resilient and secure future. "Central to this is preserving the conditions where innovation can thrive and enabling the research-based pharmaceutical industry to do what it does best," he said in a video message.

With over 700 medicines anticipated to be launched by 2035, the future, the executive added, holds incredible promise.

Power Of Partnerships

The summit also featured a high-profile panel discussion focused on the power of partnerships and some of the challenges and opportunities as India builds capacity and capabilities to innovate while also ensuring healthcare accessibility.

Panelists pointed to the "stepwise" approach in that direction, where contract research development and manufacturing organization (CRDMO) are partnering for global R&D and manufacturing, signaling 'what can be done' along India's journey of transitioning to innovation-driven growth. "Fail fast" approaches and faster response times that match Chinese peers could help set CRDMOs in India up for success, one panelist maintained. Building a strong biotechnology ecosystem and efforts to support startups were also emphasized.

Several measures to accelerate innovation were discussed, including developing regulatory expertise and capabilities to assess applications for innovative drugs. For instance, a dedicated team of reviewers

is in place for IND molecules with review timelines being "strictly monitored". India had earlier approved two CAR-T therapies – the first indigenously developed CAR-T therapy from ImmunoACT was greenlighted in October 2023, while Immuneel's partnered autologous CD19 CAR-T cell therapy got the go-ahead in 2024.

The role of GCCs, which represent the "convergence of data and scientific innovation", as enablers of innovation within India's pharma ecosystem was a key talking point, as were funding models including the need for a venture fund supported by government or public-private partnerships to support young Indian scientists accelerate drug discovery. Panelists also called for a "predictable" overall environment to foster innovation including policies that support R&D and faster clinical trials and a strong intellectual property rights regime.

Experts also emphasized the critical role of technology, patient engagement, and industry-academia partnerships to drive innovation in healthcare. Stakeholders need to move out of their silos and work together in a concerted manner, while industry was urged to reach out to academia outlining opportunities and gaps that can then be addressed cohesively. While promising experiments are underway at institutions like NIPER, a panelist lamented that translating these academic efforts into practical solutions remains a challenge. The need for collaboration to address specific, pre-defined challenges and build trust was emphasized to foster innovation and create impactful outcomes in the industry.

The importance of an inclusive approach was also stressed, advocating for patient involvement in the design and development of healthcare solutions. Pharmacological or technological solutions that don't involve patient groups won't achieve their true value.

Panelists also discussed India's efforts to transition from producing generic medicines to becoming an innovation hub, with the domestic industry confident of moving up the value chain and aspiring to deliver 100 new drugs for global markets by 2047, backed by improved R&D initiatives. Glenmark arm IGI's global licensing pact with AbbVie for IGI's trispecific antibody for multiple myeloma that included an upfront payment of \$700m and potential milestone payments of over \$1.2bn signals the potential of Indian players in the innovation arena.

Huge emerging opportunities in the biosimilars segment against the backdrop of regulatory updates from US FDA to simplify "biosimilarity" studies and reduce unnecessary clinical testing" were also outlined. As India continues to evolve, the goal is to build on its manufacturing strengths with improved research capabilities to become a world leader in biopharmaceuticals.

The Annual Summit honored exceptional contributors and innovators in the healthcare sector with the prestigious OPPI Awards. These awards, presented during the event, celebrated excellence, innovation, and a strong commitment to improving healthcare in Bharat. The awardees included:

OPPI Lifetime Achievement Award 2025:
Dr. D. Nageshwar Reddy, Founder and Chairman, Asian Institute of Gastroenterology & AIG Hospitals.

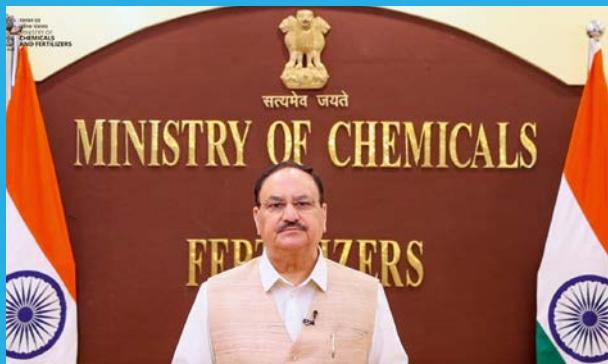
Young Scientist of the Year: Dr. Chinmoy Kumar Hazra, Associate Professor, Department of Chemistry, Indian Institute of Technology, Delhi.

Woman Scientist of the Year: Prof. (Dr.) Sheffali Gulati, Faculty-in-charge, Child Neurology Division, Department of Pediatrics, All India Institute of Medical Sciences, New Delhi.

Scientist of the Year: Dr. Malla Reddy Chilla, Professor, Department of Chemistry, Indian Institute of Technology, Hyderabad.

OPPI Excellence in Innovation Award for Healthcare Start-up of the Year 2025: Aarca Research India Pvt Ltd.







OPPI Prelude Gala: Reflections On Leadership, Progress, And The Road Ahead

Anju Ghangurde, Executive Editor of APAC, Citeline

Key Highlights:

- Former OPPI presidents shared insights on the pharma industry's evolution and the importance of stakeholder partnerships in healthcare access
- Current OPPI President outlined goals for responding to India's healthcare dynamics, emphasizing the need for impact at scale in a population of 1.5 billion
- Leveraging technology, including AI's potential to enhance healthcare delivery and the role of global capability centers (GCCs) in fostering innovation, were other key talking points
- The event concluded with a musical performance by renowned artists Ustad Amjad Ali Khan and his sons, Amaan Ali Bangash and Ayaan Ali Bangash, celebrating the cultural facet of the gala

The prelude gala event at OPPI's Diamond Jubilee Celebrations featured a striking blend of reflections by industry leaders, pointed discussions on future opportunities, and a mesmerizing musical performance by revered maestros.

Former OPPI Presidents and industry heavyweights – Mr. Ranga Iyer, Mr. Annaswamy Vaidheesh, and Mr. Sharad Tyagi – reminisced about their years at the helm, the evolution of the pharma sector, challenges along the way, and the pivotal role of partnerships among stakeholders in driving healthcare access. The former OPPI Presidents were joined by the current OPPI President Bhushan Akshikar, who emphasized the industry body's future goals, including how it hopes to respond to evolving healthcare dynamics in India and create "impact at scale" in a country of about 1.5 billion people.



Mr. Iyer, who was the OPPI President from 2007 to 2009, recounted past challenges in areas like intellectual property rights and "drug pricing battles", some of which persist even today, but underlined the wider "commonness" among domestic and multinational players despite having differences on topics like patents.

"We could have differences but still work together. That was a big thing, and that helped us go a long way," said Iyer, at a panel discussion steered by Amitabh Dube, OPPI President Elect and Country President and Managing Director, Novartis India.

Reimbursement Framework

Industry veteran Annasawamy Vaidheesh, who led OPPI from 2017 to 2020, highlighted the need for a clear reimbursement framework for innovative drugs, which face sales constraints in markets like India largely due to access issues.

"We put together a big access program; we also put together a very robust system of collaboration with insurance companies where I spent a lot of time," said Vaidheesh. He asserted that without an effective reimbursement mechanism - what he

termed as "syndicating the risk" - patients can't be expected to fork out large sums to buy drugs.

"There must be an innovative way in which financing happens. Until it's fixed, you will only have a few people accessing key drugs," he said, referring to obesity drugs and how companies are trying to figure out models to widen access.

The executive also underlined the "very specific role" OPPI must play, ensuring that members get "maximum value" in a very dynamic environment.

"I don't think we should try to boil the ocean; we should take a couple of big issues and challenges that address the requirements of OPPI members," he suggested.

COVID Years And Working Together

Sharad Tyagi, who was the OPPI President during the COVID pandemic years in 2020-21, recalled "trying to navigate the ship when everything was virtual".

"You suddenly realize that when you are in a once-in-a-lifetime crisis, all discussions relating to pricing, patents, RDP [Regulatory Data Protection], go away. It tells you that if you have a single-minded/focused goal, everyone works together," Tyagi pointed out.

Issues relating to supply chain, procurement, and stockouts, he noted, were 24/7 discussions at the time, with emails going back and forth and emergency meetings scheduled to ensure that industry could support the government, people, doctors, and sales reps, etc.

"For me, that was a phenomenal learning, and a great experience indicating you can actually do things extremely well together," Tyagi said. He also touched on the role of over-the-counter (OTC) drugs to widen access to treatments especially in tier 3 and 4 cities and villages across India.

Ecosystem Development

OPPI's current President Bhushan Akshikar brought another dimension into the discussion, pointing to the industry body's role in creating and fostering the early ecosystem enabling India to embark on its journey to emerge as the 'pharmacy of the world'.

"If you were to split the 60-year journey of OPPI into two parts, the first was all innovation-led on the supply chain side," said Akshikar.

He spotlighted the efforts of multinational companies in putting up manufacturing networks and "really creating the ecosystem to serve the healthcare needs of half a billion Indians". The country's population in the 1960s was around 490 million. Today, India ranks third worldwide by volume of pharma production, with Akshikar asserting that a large part of that progress is "because of what [OPPI] member companies did and stayed committed".

Mr Iyer also reiterated the role of partnerships and India's capabilities as it gears to move up the innovation value chain. "Most of the innovative drugs during some stage of innovation are manufactured in India," he said, also noting that frontline Indian firms are already moving beyond branded generics towards developing novel drugs.

Leveraging Technology, GCCs

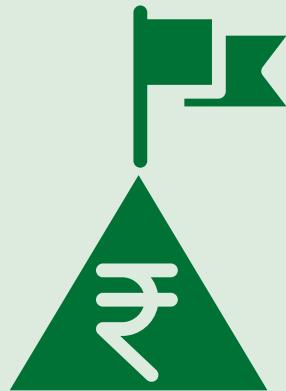
Discussions also revolved around leveraging technology, artificial intelligence, and digitization for better healthcare delivery, with Vaidheesh noting how things are moving at a "breakneck speed", with the Indian government at the forefront of some of these efforts. He referred for instance to how AI-powered platforms can facilitate learning in multiple local languages.

"There is a huge amount of tailwind, and particularly in the area of healthcare, you are going to see a big impact," he predicted.

On OPPI in the next decade, with respect to innovation, the current President Akshikar emphasized that the next 60 years should look very different in terms of what industry brings in terms of upscaling the ecosystem. He referred to important advances made by the India global capability centres (GCCs) of large multinational pharma firms, as they tap into local talent pools to drive efficiencies and innovation across the value chain.

"There's a lot of exciting work happening in many of the member companies of the OPPI in terms of early R&D and clinical operations. If you want to have the next set of antibody drug conjugates coming out of India, that ecosystem must get unlocked," he declared.

The prelude gala event ended with a soul-stirring performance by Ustad Amjad Ali Khan, a global music icon whose genius has defined the sarod for the modern world and his sons, Amaan Ali Bangash and Ayaan Ali Bangash, also accomplished musicians, who also showcased their exceptional talent.



Bharat Ke Liye And The Power Of Partnerships

Izabela Chmielewska, Editor in Chief of Custom Content, Citeline

Key Highlights:

- OPPI's coffee table book *The Power of Partnerships* captures how collaboration between policy, science, and society has shaped India's healthcare landscape over six decades
- The publication invites reflection on the role of collective action in balancing innovation with affordability and strengthening long-term public trust
- As India advances toward *Viksit Bharat 2047*, the lessons of this legacy reinforce that healthcare progress depends not only on new technology, but on consistent dialogue and shared accountability

Partnership As The Engine Of Progress

The Power of Partnerships – A Journey of Progress, 1965–2047 traces the development of India's pharmaceutical sector through the lens of shared purpose. The book positions collaboration as a quiet but steady force behind one of India's most resilient industries.

The early chapters underline how structure and trust became foundational to policy development. After OPPI's formation in 1965, early pricing and patent frameworks reflected a dual commitment to access and scientific growth. Programs such as OPPI Medical Hour and public health awareness initiatives began to reframe healthcare as a joint responsibility across government, industry, and citizens.



Rather than presenting advocacy and accountability as competing interests, the narrative illustrates how the two evolved together. Through the 1980s and 1990s, structured engagement helped India move from a fragmented market toward a more cohesive and globally recognized pharmaceutical base. Collaboration emerges not as a supporting detail but as the mechanism through which the sector found both direction and credibility.

The Maturity Of Collective Action

As the sector expanded, OPPI's role shifted from consultation to co-creation. Initiatives to strengthen ethical standards, improve quality, and address intellectual property concerns helped bring uniformity to a rapidly growing industry. Good Manufacturing and Laboratory Practices, and efforts to address counterfeit medicines, are presented not just as regulatory milestones but as signals of a more confident and outward-facing ecosystem.

The book highlights how OPPI's influence extended beyond policy submissions. By championing evidence as the foundation for decision-making, the association helped bridge gaps between innovation

and regulation. Initiatives such as the Health Index of States and knowledge-sharing workshops brought data into policy discussions. Recognition programs, including the Healthcare Access Awards and Women Scientist Awards, reinforced that progress should be measured shifted attention toward integrity, inclusivity, and outcomes rather than expansion alone.

Throughout these developments, one theme remained constant: collaboration grounded in knowledge. It was this shared commitment to evidence-based action that allowed India's healthcare ecosystem to evolve, despite differing interests and priorities.

A Blueprint For The Future

The final chapters shift the narrative toward the future, using the Bharat Ke Liye ethos as a guide for what sustained progress might require. The book suggests that India's healthcare system advances most effectively when institutions remain connected and engaged, a point underscored by the way the pandemic tested and revealed the strength of those connections.

New areas of development illustrate how the landscape is changing. Global Capability Centers are bringing deeper technical expertise into the country. Digital health tools are beginning to influence care pathways in practical ways. Regulatory reform is slowly helping the system respond with more clarity and consistency. Each of these trends points toward a healthcare environment that depends on alignment across sectors, even as each stakeholder moves at its own pace.

Rather than forecasting specific outcomes, the narrative emphasizes the conditions that allow progress to accumulate. Partnership is presented as one of those conditions, not as a slogan but

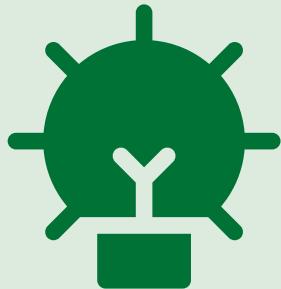
as a working method. It shapes how information circulates, how policies adapt to emerging needs, and how trust is built with the public.

The Power of Partnerships closes with an invitation to look at India's healthcare evolution through the relationships that sustain it. Achievements matter, but the networks and shared responsibilities behind them matter just as much. That balance, the book suggests, will influence how the country moves toward its Viksit Bharat 2047 goals.



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Essays On Innovation And India's Evolving Growth Ambition

Izabela Chmielewska, Editor in Chief of Custom Content, Citeline

Key Highlights:

- The book brings together 39 essays that examine how India can move from manufacturing strength to a more research-intensive, innovation-driven model
- Contributors anchor their arguments in data, including R&D investment of 0.7% of GDP, roughly 260 researchers per million people, and private industry funding only 36.4% of total R&D
- The essays map both structural gaps and areas of momentum, from underused deep-tech financing and concentrated R&D activity to new national programs and a projected \$50bn digital health and AI market by 2030

Reading The System Through Numbers

Essays on Innovation is framed as a curated set of reflections, but its strongest unifying factor is how consistently contributors return to empirical evidence. The ambition is clear in the preface: India wants to evolve beyond its reputation as the “Pharmacy of the World” to a genuine hub for scientific discovery, particularly as an aging population and rising noncommunicable diseases reshape national health priorities.

The data shows why this transition is challenging. India invests only 0.7% of its GDP in R&D. Countries that dominate global innovation spend many times more, with Israel and South Korea exceeding 4.5%. Researcher density reflects a similar gap: around 260 researchers per million people in India, compared with figures in the thousands in several advanced scientific economies.

The composition of R&D funding adds another layer. Government remains the primary engine of research, contributing more than half (55%) of total spending, while private industry accounts for 36.4%. In economies with strong innovation pipelines, business investment tends to carry the bulk (70%) of R&D activity. The essays treat this not as a critique of public spending but as a sign that India's commercial research base has yet to mature at scale.

Alongside these national figures, contributors bring in more granular data. Private R&D is heavily concentrated: 90% is clustered in just five states. Fewer than 15% of public laboratories collaborate internationally, limiting exposure to global projects and markets. Deep-tech start-ups attract less than 1% of total venture capital, while consumer technology absorbs most of the available funding.

Taken together, these details make it difficult to argue that India's innovation system lacks talent or ideas. Instead, they suggest that capacity, funding, and opportunity are unevenly distributed and often poorly connected.

Gaps, Signals Of Movement, And What Needs To Change

Many of the essays focus on a familiar set of structural gaps. Academic and industry collaboration is one example – India ranks 86th globally on this metric. Contributors describe technology transfer offices that are either missing or under-resourced, long delays between invention and market, and limited support for scientists who want to build companies around their work.

The same pattern shows up in infrastructure and regulation. Several writers describe an “innovation policy in transition,” where new schemes exist on paper but have not yet shaped everyday practice. They call for clearer routes from lab to market, more predictable patent and data protection, and better-resourced regulators – especially AI-enabled tools and similar fast-moving technologies.

Yet movement is visible. The Production Linked Incentive Scheme (PLI), with an outlay of \$150m, has already supported 55 APIs and more than



20,000 jobs. Programs such as PRIP, BioE3, the Atal Innovation Mission, and the Anusandhan National Research Foundation are cited as attempts to build more coherent research platforms and upgrade scientific infrastructure. Together, they indicate that policy groundwork for a more innovation-focused economy is beginning to form.

The essays also look beyond near-term reforms. Projections suggest that digital health, AI, Internet of Things, and related technologies could constitute a \$50bn market by 2030, growing at close to 20% annually. Contributors point to emerging work in gene therapy, botanicals, biologics, and region-specific translational research as early signs that scientific inquiry is becoming more diverse and more responsive to local needs.

Several writers argue for a shift from scattered projects to platform-level thinking. Suggestions include lifting R&D investment to at least 2% of GDP, strengthening intellectual property enforcement and data protection, decentralizing innovation support to district-level hubs, and improving evaluation of public R&D through competitive grants and third-party review.

The collection's strength lies in how it frames innovation as a cumulative process. No single policy or program will guarantee India's transition to a research-led economy. Progress will depend on the alignment of funding, regulation, talent development, and regional capability with the ambitions India sets for itself ahead of 2047.



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India Pharma's Innovation Roadmap: Powered by Purposeful Partnerships

Anju Ghangurde, Executive Editor of APAC, Citeline

Key Highlights:

- A new OPPI-EY report charts the course for transforming India's biopharma sector from a generics powerhouse to becoming a global innovation leader
- The report emphasizes the importance of an integrated, innovation-ready ecosystem that fosters strategic partnerships among various stakeholders
- It spotlights the rise of collaborations extending beyond traditional roles, with Indian pharmaceutical firms, CRDMOs, and GCCs working cohesively to enhance capabilities
- CRDMOs are shifting from purely transactional outsourcing to value-based partnerships.
- Big pharma's Global Capability Centers (GCCs) seen connecting local talent with global expertise, improving governance and compliance within the industry

A new OPPI-EY report spotlights the journey and roadmap of India's biopharma sector as it shifts gears from being the world's pharmacy to becoming a global innovation powerhouse.

While manufacturing generics and vaccines at scale, contract research development and manufacturing organizations (CRDMOs) and global capability centers (GCCs) remain core to India's global standing; these converging pillars can also, together, potentially script India's next chapter of innovation-driven growth.

"The next wave of growth will depend on creating a more integrated, innovation-ready ecosystem – one that harnesses purposeful partnerships, strategic alliances, and cross-sector collaboration to position India at the forefront of global healthcare innovation," the report said. It underlines the rise of "purposeful collaborations" that transcend licensing or supply partnerships.

Global and Indian pharmaceutical companies, CRDMOs/CDMOs, and GCCs are increasingly working together with academia, research institutions and start-ups to nurture talent, embed global best practices, and "raise the bar by building cutting-edge capabilities".

"These collaborations are strengthening the foundation of the ecosystem, enabling co-development of next-generation global platforms and accelerating the translation of science into market-ready innovations," the report stated.

OPPI Director General Anil Matai urged all stakeholders –industry, government, academia, investors, and start-ups– to "converge and act cohesively" to accelerate India's innovation journey. "Strong public-private alliances, purposeful digital

integration, and ecosystem-wide investment in R&D are essential to building a future-ready healthcare sector that serves India and the world," Matai said.

The report results are informed by primary research with a cross-section of industry leaders, patient advocacy groups and academic institutions, among others, and supplemented by secondary research, industry data and analysis of global benchmarks presented to assess current strengths, growth levers and important gaps across the sector. Regulatory agility, increased R&D investments (companies are urged to raise spending to upwards of 10% of revenues), and talent development are seen as critical areas for fostering a robust pharmaceutical ecosystem.

CRDMOs Share "Strategic Responsibilities" With Clients

CRDMOs and CDMOs are driving partnering and invigorating the wider ecosystem as India moves up the innovation value chain.

Indian CRDMOs are moving from "transactional outsourcing" to integrated, value-based partnerships with global biopharma. They are making significant



investments in advanced manufacturing, analytics platforms, and biologics capabilities, while adopting AI-enabled tools to speed up drug discovery and development.

This convergence of scientific depth and digital sophistication has enabled Indian CRDMOs to move beyond traditional outsourcing roles, offering comprehensive end-to-end solutions and sharing "strategic responsibilities" with clients, the report highlighted.

The outsourcing momentum is also being shaped and accelerated by global policy shifts and geopolitical compulsions as global supply chains realign with changing dynamics. The CEO of an Indian CRDMO had last year, for instance, indicated that large biopharma firms were generally evaluating additional options even if they've got "great partnerships" with some Chinese vendors, and don't want all of their supply coming from one geography, "particularly one that's the focus of all sorts of discussion and legislation in the US."

Deal Flow Tilts Towards New Modalities

Notably, Indian CDMOs/CRDMOs are no longer just vying for deals in plain-vanilla generic active pharmaceutical ingredients (APIs) and intermediates, but are instead developing specialized platforms and capabilities to win global pharma business.

Deal flow is leaning towards advanced modalities, including biologics and mAbs manufacturing, ADCs, GLP-1 fill-finish, and cell/gene-adjacent discovery partnerships. Several agreements have been structured as multi-year/strategic partnerships with investments to expand capacity and build new capabilities, underscoring a shift from transactional supply to trusted, capability-led partnerships that prize quality, scale, and tech differentiation.

CRDMOs are also building a global manufacturing footprint, moving closer to key clients, meeting regulatory expectations, and buttressing their global delivery model.

The advancement of CRDMOs also has cohesive ecosystem multiplier effects that strengthen the broader pharmaceutical and life sciences value chain in India.

"By embedding global best practices in quality, safety, and regulatory compliance, they are elevating

industry standards and improving India's credibility as a trusted global supplier," the report maintained.

The CRDMO investments are also invigorating the development of adjacent sectors—from high-precision packaging, analytical and validation services, and cold-chain logistics to automation, digital manufacturing, and data integrity solutions. They also contribute to upskilling human capital and strengthening R&D talent pipelines.

GCC Generating Positive Collateral Benefits

GCCs are emerging as powerful enablers of innovation within India's pharma ecosystem, bridging global expertise with local scientific talent and academic excellence. Their deeper integration with global workflows is fostering stronger governance, communication, and data flow, helping align Indian operations with international quality and compliance standards.

Around 50% of leading global life sciences companies have set up GCCs in India, leveraging local talent and advanced digital capabilities. Novartis was among the early movers in the GCC space in India, though peers like Pfizer, Sanofi, Roche, GSK, Merck, MSD, Novo Nordisk, Ferring, Eli Lilly, Bayer, Bristol Myers Squibb, and AstraZeneca are also either establishing or expanding their India GCCs, backed by significant investments.

"Next generation of GCCs are embedding cutting-edge digital, analytical, and R&D capabilities, transforming India into a global knowledge and innovation engine," noted Bhushan Akshikar, OPPI's president and MD, and vice president of GlaxoSmithKline Pharmaceuticals.

As these sites take on more strategic mandates in discovery and advanced analytics, IP protection, data security, and quality compliance are becoming core priorities—prompting Indian suppliers and partners to elevate their own regulatory and quality frameworks, the report noted. This "reverse pressure" effect is accelerating the ecosystem's alignment with global best practices, it added.

The report also maintains that relying on the generics engine alone isn't sufficient to sustain long-term growth or profitability. As the industry matures, experts that were part of the primary research cautioned that the generics-led model has led to a

structural dependence on low-margin, volume-driven growth and could constrict India's future growth trajectory.

Sustaining momentum will require the industry to transition beyond just cost advantage towards innovation, differentiation, and value creation.

Additionally, increasing global scrutiny around quality and compliance, including data integrity, poses operational challenges, particularly for older manufacturing facilities. Several Indian firms are already advancing NCEs, NBEs, straddling the generics and innovation space with an eye on the long-term growth horizon.



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India's PRIP Push: Galvanizing The Innovation Pipeline

Anju Ghangurde, Executive Editor of APAC, Citeline

Key Highlights:

- India's landmark R&D financial assistance initiative, PRIP, aims to catalyze pharma-medtech innovation
- PRIP facilitates innovation from idea inception to market launch in priority areas
- The initiative includes co-funding options and outlines benefit-sharing mechanisms for successful applicants
- Funding priorities also target areas of public health significance

India's ambitious R&D incentivization initiative appears to have drawn a strong response, setting the stage for concerted collaborative efforts to catalyze the country's pharma-medtech innovation pipeline.

India had in October notified amendments to its landmark Promotion of Research and Innovation in Pharma-MedTech Sector (PRIP) scheme, which has an outlay of INR5000 crore and aims to support innovation through financial assistance for early- and later-stage projects, targeting specific priority areas.

While the basic structure of the PRIP scheme was set out in August 2023, the government made key amendments to that plan. It issued revised guidelines to "enhance the impact of the scheme" and ensure that it is "better suited" to meet the requirements of all stakeholders.

The amended PRIP is structured to enable the 'innovate in India' ecosystem from the idea stage to commercialization. Financial assistance will be provided to industry and start-ups in specific "priority" areas and will support R&D for products and technologies (the outputs) or the "expeditious validation" of such R&D outputs for market launch and large-scale commercialization or both, a government notification said in October.

The priority areas include “new chemical medicines/substances” (including new chemical entities, NBEs (including precision medicines), complex generics, biosimilars, and novel medical devices.

For early-stage projects, micro, small, and medium enterprises (MSMEs) and start-ups can seek financial assistance of up to INR5 crore for projects costing up to INR9 crore. In contrast, for “later” stage projects entailing investments of up to INR285 crore, PRIP offers assistance of up to INR100 crore.

Applicants won't need to co-fund early-stage projects of up to INR1 crore, while for those beyond that sum, half of the project cost above that threshold will be required to be co-funded by the applicant. The scale of financial assistance for later-stage projects is 35% of the project cost, subject to a maximum of INR100 crore.

The Economic Times on November 21 reported a senior government functionary as saying that the scheme had received 700 applications, though the specific categories and split between pharma

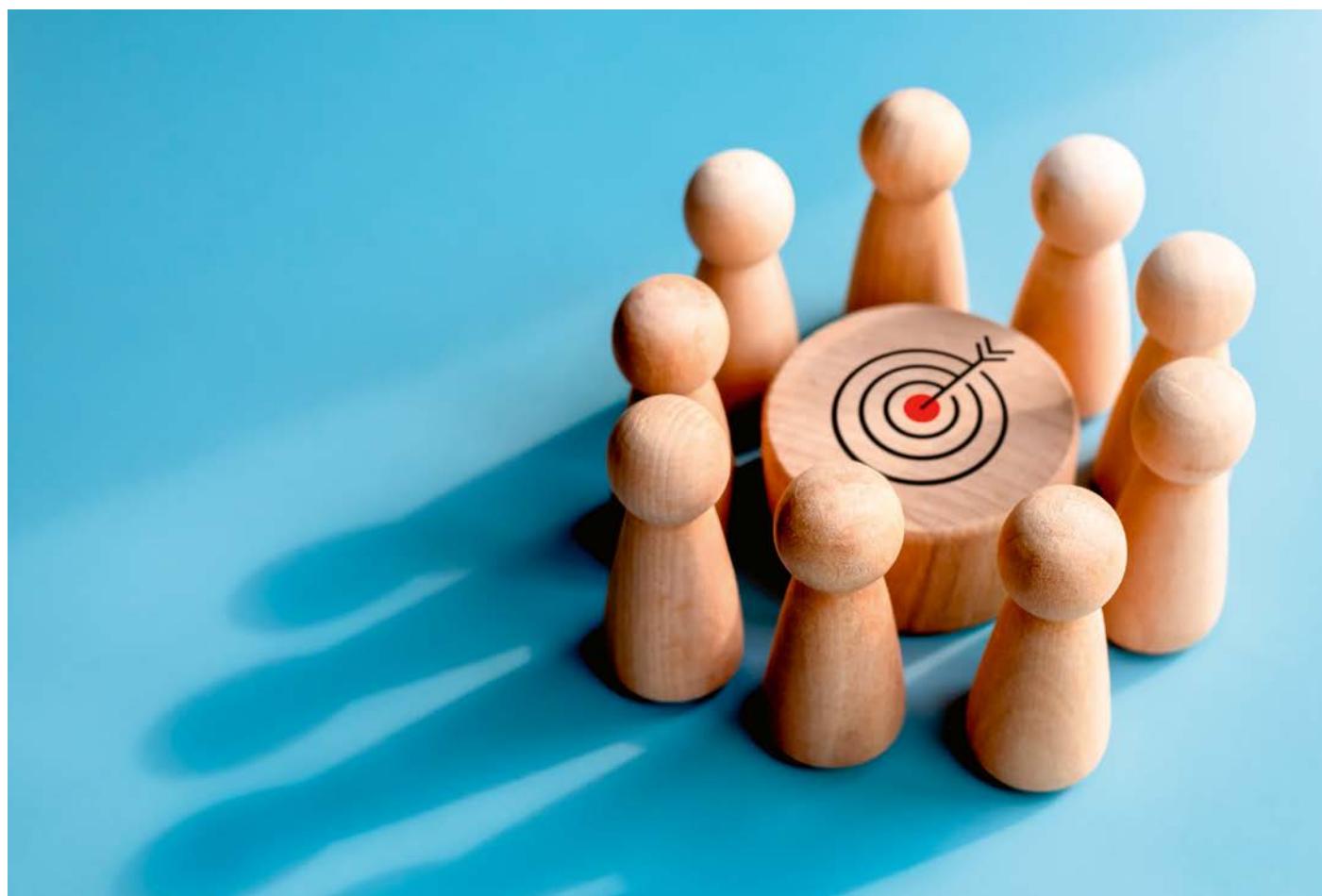
and medtech applicants could not immediately be ascertained.

A senior industry executive told Citeline that PRIP appears to be off to a “good start” and expects to see things moving in the first quarter of 2026, though the “real impact” will take time to reflect.

Experts have pointed out that while PRIP's initial corpus is modest, going by the capital intensity typically seen in pharma R&D and won't dramatically transform India into a research powerhouse in the short term, but it can play a pivotal catalytic role, if governance, timelines, and transparency are “safeguarded”. They signaled that even modest public funds, if leveraged with private/foreign capital, can create multiplier effects.

Co-Funding, Benefit-Share

The amended scheme elucidates that co-funding may include funds contributed by the applicant or “mobilized from promoters, investors, other government organizations, non-governmental organizations, or any other person.”, though it's not



immediately clear how far the scope of the term investors goes.

Benefit-share structure options that beneficiaries under PRIP need to provide, namely either a "fixed rate payout", a tiered rate payout, or "share allotments" have also been specified. The government holds the right to receive, from every applicant to whom it has disbursed assistance, a benefit share in any commercial realization resulting directly or indirectly from the approved project.

For instance, in the case of early-stage projects under a fixed-rate payout, the benefit-share has been set at 5% of net sales from each commercialized output per year, starting in the first year of commercialization. "The benefit-share obligation will stand discharged once the total payments made by the beneficiary equal the total financial assistance disbursed," the October notification stated.

Strategic Priority Innovation Areas

Importantly, the amended PRIP scheme seeks to bolster innovation in areas of public health significance for India, where the market potential may be relatively lower.

Funding support in these "Strategic Priority Innovation" (SPI) areas, which include rare diseases, antimicrobial resistance (AMR), vaccine-preventable ailments, tropical vector-borne diseases, and pandemic-causing pathogens, would be provided to the extent of 50% of the approved total project cost, subject to a maximum of INR100 crore. Rare diseases covered will be those as listed in India's National Policy for Rare Diseases, 2021, per the guidelines issued for PRIP, which also detail the various other SPI categories.

Similarly, in the case of AMR, the thrust would be towards multidrug-resistant and extensively drug-resistant pathogens listed as critical, high, or medium priority in the India Priority Pathogens List published by the India's Department of Biotechnology.

Collaborative Development

The amended PRIP scheme also provides incentives and encourages industry, MSMEs, and start-ups to collaborate "flexibly" with government academic and research institutions of national repute

specified in the guidelines to develop, translate and commercialize institutional intellectual property, and to augment institutional research capacities in India. The Indian Institute of Chemical Technology, the Indian Institute of Science, and the Indian Institutes of Technology are among the 90 reputed institutions eligible for collaboration, per the guidelines.

A total of nine applications each for projects at early- and later-stages in collaboration with government institutions of national repute are to be given preference subject to the project being assessed as "involving significant collaborative development of product/technology and the strong credentials of collaborative partners/team."

A government statement added that industry, MSMEs, and start-ups may also use the assistance provided under PRIP to in-license research outputs developed by such institutions, facilitating academia's linkage with industry and startups to develop these into viable technologies and products – taking them to all the way to the market.

PRIP also expects to strengthen research infrastructure by establishing Centres of Excellence (COEs) at India's National Institutes of Pharmaceutical Education & Research (NIPERs). Dedicated industry-focused COEs at the seven NIPERs are expected to serve as hubs of advanced research, while the NIPER Academia-Industry Coordination Committee, established under the Secretary, Department of Pharmaceuticals with joint membership from industry associations and the NIPERs, aims to institutionalize industry-institute linkages.

An outlay of INR700 crore has been set for establishing the COEs over a period of five years in specific areas ranging from antiviral, antibacterial drug discovery and development to medical devices. Experts said that the proposed investment plan will also help building "accountability" at the institutions and "is a good starting point".



Toward A Level Playing Field In New Drug Approvals

Anju Ghangurde, Executive Editor of APAC, Citeline

Key Highlights:

- India aims to reform drug approval processes, balancing the regulatory burden between first and subsequent applicants
- The CDSCO is consulting stakeholders to develop a balanced policy to address the discrepancies
- Modifications proposed to the T-license system, while India has also introduced the State Health Regulatory Excellence Index (SHRETH) initiative

India's Central Drugs Standard Control Organization (CDSCO) is seeking to address imbalances in the approval process for new drugs, where first applicants face a higher regulatory and cost burden compared with later applicants.

India's New Drugs and Clinical Trials Rules, 2019, mandate local clinical trials for new drug approvals, though there is a provision of waivers in specific scenarios.

The regulator had, in a recent notice, pointed out that at times there are multiple applicants for a new drug, and permissions are granted to conduct clinical trials and bioequivalence (BE) studies, but oftentimes just one applicant "actively conducts" the trial and study and then seeks regulatory clearance.

Once the first applicant's new drug is approved, the other applicants then "simultaneously" submit the BE study report and secure approval for the same new drug. Approval for such subsequent applicants is essentially granted based on chemical and pharmaceutical data and BE study data.

Drugs Controller General of India (DCGI), Dr Rajeev Singh Raghuvanshi, in the notice, underlined that the current approach leads to a "lack of level playing field" between the first applicant and subsequent ones, who receive approval of the same new drug based on BE study data and "for whom the cost of regulatory compliance is much lesser as they are not required to conduct the clinical trial".



The CDSCO has since initiated consultations with stakeholders and relevant departments and aims to formulate a "balanced policy" that addresses these discrepancies and also fosters R&D for new drugs in the country.

Industry experts told CiteLine that the current lopsided approach needs to be remedied to ensure that some benefit accrues to the first applicant who undertakes trials, versus the subsequent filers, but underlined that there's little value in multiple applicants undertaking trials for the same generics that are "well proven".

On whether India should perhaps consider a policy approach along the lines of the US 180-day exclusivity model to reward the first generic filer, an industry leader instead suggested that requiring the other applicants (who didn't conduct clinical trials after initially seeking regulatory permission for trials and BE studies) to re-apply for BE studies could give the first applicant a "three to four month advantage".

More Regulatory Streamlining

While it remains to be seen how the final contours of the new drug approval policy will shape, such efforts are indicative of broader regulatory reform underway in India.

DCGI Dr Raghuvanshi, at a recent industry event, said that while lot of "interventions, streamlining and improvement" has happened in the regulatory domain, "more rationalization" could be expected in the future.

"There are multiple channels in different parts of the government which are discussing deregulation, regulatory rationalization, or making the regulation 'lighter'. There are at least four to five channels where I am participating as a regulator," Dr Raghuvanshi said at the event. Some of these discussions are

at the level of the Prime Minister's Office, the NITI Aayog (the apex policy think tank of the Government of India), and a few of them at the ministry level.

Some recent key regulatory rationalization efforts include changes to the "T [test]- license" system, while India has also launched the State Health Regulatory Excellence Index (SHRETH) to benchmark and strengthen state drug regulatory systems through a transparent, data-driven framework.

"We have decided to come out of the T-license regime. It is just a notification system which is going to come," the DCGI asserted at the event.

Earlier this year, India notified draft rules that tweaked the T- license requirements, incorporating a provision for "notification" therein. Manufacturing a new drug or an investigational new drug to conduct clinical trials or bioavailability or bioequivalence study or for examination, test, and analysis isn't permitted without obtaining permission or "notification to the Central Licensing Authority, as the case may be, to manufacture such new drug or investigational new drug," the amended draft rules said.

"Provided that in case of manufacture of new drug or investigational new drug for analytical and preclinical testing (excluding the new drug and investigational new drug of category of sex hormones, cytotoxic, betalactum, biologics with live microorganism and narcotics and psychotropic drugs) an online application shall be submitted as notification and the applicant can manufacture such drugs based on the notification," the draft amended rules notified in August said.

The SHRETH initiative is seen as an early step towards India's goal of becoming a member of the Pharmaceutical Inspection Co-operation Scheme (PIC/S).



Pharma GCCs and the Investment Opportunity in India

Anju Ghangurde, Executive Editor of APAC, Citeline

Key Highlights:

- Investments in India's pharma GCCs illustrate their rising significance beyond mere cost-efficiency, as they become integral to the entire biopharma value chain
- The global companies are expanding their GCCs in India, capitalizing on the nation's skilled workforce in areas such as data science and AI
- India is being positioned as the 'capital of talent and skill', bolstered by the annual addition of 2.3 million STEM graduates and 1.5 million engineers
- The growth of GCCs is supported by improved infrastructure, government policies, and life sciences clusters, fostering collaboration and innovation

Pharma global companies are redefining and scaling their Indian global capability centres (GCCs) amid tech advances, the thrust on patient-centric innovation, outcomes, and evolving market dynamics.

The steady flow of investments in India pharma GCCs reflects both the potential and strategic value of these sites and are no longer seen as mere "cost efficiency outposts". GCCs now play a pivotal role across the pharma value chain – from drug discovery and development all the way to supporting commercial excellence – with an industry leader earlier emphasizing to Citeline that these centres aren't a "luxury" anymore, but an integral part of how drug makers manage global innovation.

Amgen, AstraZeneca, Bristol Myers Squibb (BMS) and Sanofi are among those that have over the recent past made or committed large investments to set up or expand their India GCCs tapping into the country's talent pool in data science, artificial intelligence (AI), and the IT segments. Experts have also underlined the value of distinct workflows; roping in talent from diverse sectors and C-suite sponsorship to realize the full potential of GCCs.

Amgen had earlier outlined plans to invest \$200 million through 2025 in Amgen India, with more investments anticipated over the coming years, while BMS's GCC set up in July 2023 entailed an investment of \$100 million. Additionally, AstraZeneca expects to invest INR250 crore to expand its Global Innovation & Technology Centre (GITC) in Chennai with Sanofi similarly set to invest €400 million over the next six years as it expands its GCC in Hyderabad (see OPPI's July - September 2025 newsletter for GCC plans of all other member firms).

Data from ANSR indicated that more than 55 healthcare and life sciences GCCs run over 95 centers in India employing over 300K professionals. Strikingly, more than 55% of these GCCs in India are US-headquartered, with 20% having their centers in three or more cities, per an ANSR April 2025 report.

“Capital Of Talent And Skill”

The surge in GCC action can be attributed to several factors led by the availability of skilled workforce – ANSR described this asset as “talent at scale and a contextually aware workforce”.

India boasts a large cost-effective talent base with about 2.3 million STEM [Science, Technology, Engineering, and Mathematics] graduates and 1.5

million engineers added annually to the pipeline. India's Minister of Commerce and Industry, Shri Piyush Goyal ji, at a recent event, maintained that the global community, more widely, now looks to India as the “capital of talent and skill”, and that Indian deep-tech startups are being recognized among the world's leading innovators. There are an estimated 9,300-plus tech startups in India.

EY in a recent report said that the strong talent pipeline enables GCCs to achieve rapid scalability across the core functions of the value chain such as clinical operations, regulatory affairs, pharmacovigilance, among others.

“In just five years, GCC penetration in enabling functions like finance, HR, supply chain, and IT has crossed ~60%. But what truly stands out is the deepening role in core functions – from drug discovery and regulatory affairs to medical and commercial operations,” said Arindam Sen, partner and GCC sector lead, technology, media and entertainment and telecommunications, EY India.

Infrastructure, Policy Support

The other factors contributing to the uptick in GCC activity in India include improving infrastructure, an evolving wider ecosystem as well as enabling



government policies. Life sciences clusters like Genome Valley in Hyderabad bring together international and domestic life sciences companies, research institutions, and specialized support infrastructure, providing a vibrant environment that fosters collaboration and innovation. Besides Hyderabad and Bengaluru, Pune, Chennai, Mumbai, and the National Capital Region (NCR) also count among the key GCC hubs in India. ANSR noted that India's Special Economic Zones (SEZs) and software technology parks also offer world-class infrastructure, tax incentives, and streamlined compliance processes, positioning the country as a preferred destination for foreign firms with GCC ambitions.

Policy support and targeted incentives such as simplified foreign investment norms, eased entry

clearances, are also supporting momentum across the GCC ecosystem, EY said. Several states including Karnataka, Telangana, Andhra Pradesh, Gujarat, and Tamil Nadu have announced policy frameworks to support GCCs. India's Union Budget 2025-26 also proposed formulating a National Framework as guidance to states for promoting GCCs. It expects to suggest measures to shore up the availability of talent and infrastructure, building-byelaw reforms, and mechanisms for collaboration with industry.

India currently has over 1,700 GCCs across sectors that employ 1.9 million professionals and generated \$64.6 billion in revenue as of 2024. Revenues from the segment are projected to rise to \$105 billion by 2030, with around 2,400 GCCs employing over 2.8 million people, building on India's position as the epicenter for GCCs.



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We would like to extend our sincere thanks to everyone who contributed to this edition of the OPPI Quarterly Newsletter. This issue reflects a collective effort to examine India's healthcare journey with depth, balance, and perspective.

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- **The Citeline Editorial Team**, for their expert reporting, editorial partnership, and content development

Your dedication and hard work have been the driving force behind this success.

To our readers, thank you for your continued engagement. We look forward to sharing further insights and perspectives in the next edition as India's healthcare landscape continues to evolve.

Warm regards,

Asawari Sathaye

Director, Communications and Patient Advocacy, OPPI

About OPPI

The Organisation of Pharmaceutical Producers of India (OPPI) established in 1965, represents the research-based global pharmaceutical companies in India. OPPI has been an integral part of the healthcare journey of the country. We remain committed to supporting the nation's healthcare objectives, putting patients at the core of all decision making and collaborating with all stakeholders to find sustainable solutions to realize the collective vision of Health for All.

Our member companies have been serving the country's healthcare ecosystem since pre-independence and continue to remain committed to patient safety and providing quality care in the future as well. As an association, our advocacy decisions, patient commitment and work are always keeping the country first and we embody the spirit of working for 'Bharat Ke Liye'; driven with innovation to find solutions for unmet medical needs, collaboration with government stakeholders, and co-creation with partners coming together to address the nation's healthcare challenges. We are committed to the Hon'ble Prime Minister Shri Narendra Modi-ji's clarion call of 'Jai Vigyan and Jai Anusandhan'.

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