Healthcare Sector to be accorded 'National Priority' status

ANI | New Delhi [India] January 26, 2017 Last Updated at 13:13 IST

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encourage entrepreneurship and newer business models which are the need of the hour for improving access, availability and quality, especially in Tier II, Tier III and rural areas,"Secretary General, NATHEALTH, Anjan Bose elaborated.

The healthcare body has also urged that the Government could explore making health insurance coverage mandatory for all citizens in a phased manner initially covering the organized sector. Employees could be given the option of either paying their ESI contribution or purchasing insurance from any IRDA regulated insurance company.

Some of the other recommendations include:

- Need for a liberalized FDI regime in respect of investments relating to medical education.

- Exempting the healthcare sector from the mat regime under the income tax act.

- Inclusion of hospital as an industrial undertaking under section 72a of the income tax act.

- Introduction of an insurance policy for elders (aged 55 and above) to cover specific health risks arising from vulnerabilities of old age.

- Instituting a healthcare savings fund for all salaried employees similar to the pf scheme which would be tax deductible.

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Healthcare sector needs rational stent pricing, says NATHEALTH

January 13, 2017 | Published by :

New Delhi [India], Jan. 13 (ANI): With recent government notification to bring stents under the country's drug price control order, the prices of the life saving device would be regulated and capped by the National Pharmaceutical Pricing Authority (NPPA).

In view of the latest notification and its wider implications on healthcare technology providers, Healthcare Federation of India (NATHEALTH) has suggested that the government needs to form a Health Technology Assessment Board for standardising and regulating the stent quality in India.

"Medical procedures in India are among the most affordable in the world, which is a combination of cost of devices and services. Any notification should be considered only if it can bring down the overall cost of treatment for the patient without denying them the options to avail the treatment of their choice. Additionally, such notifications significantly impact the 'Make in India' attractiveness of the country," Mr Rahul Khosla, President, NATHEALTH, said.

"Recently announced formation of a Medical Technology Assessment Board (MTAB) by the Government would go a long way in standardising and regulating the stent quality in India and usher in the much needed transparency which would also enable pricing standardisation in a more rational manner," Mr Anjan Bose, Secretary General, NATHEALTH, said.

On December 21, 2016, the Ministry of Chemicals and Fertilisers – Department of Pharmaceuticals notified that the Central Government includes Coronary Stents in the Drug Prices Control Order Schedule-1. The notification categorises Coronary Stents into two – Bare Metal Stents (BMS) and Drug Eluting Stents (DES) which include metallic DES and Bioresorbable Vascular Scaffold (BVS)/ Biodegradable Stents.

NATHEALTH has also expressed its concern that the notification may hamper procedural complexity based choice – both for the treating doctor and the patient.

"We are also concerned that this may disincetivise technology companies from launching newer, safer and more efficacious Drug Eluting Stents in India. Since the latest globally accepted technology will not be available to international patients, they may abandon Indian hospitals. This may also cause the flight of 'high quality' seeking Indian patients to overseas hospitals in neighboring countries," Mr Bose added.

"The Government also needs to consider the impact of complex tax structure, and a high inventory cost based
consignment supply chain model, which escalates the stent price. We should leverage proposed GST model law to rationalize the pricing and have requested government to consider the same favorably," Mr Probir Das, Governing Council Member and Vice Chairman, Medical Technology Forum – NATHEALTH, emphasised.

"Unlike delivery of medicine, stent delivery requires hospitals to invest in developing and maintaining quality infrastructure, skilled resources, and operative overheads," Mr Bose said.

"Exact requirement can be ascertained at the time of procedures, which requires hospitals to maintain high inventory (different size, quality and type) and thereby, incur holding costs. It takes 60 days for hospitals to recover charges from TPAs and 200+ days from CGHS. This delay adds significant capital costs," Mr Anjan Bose, Secretary General, NATHEALTH, said.

NATHEALTH recommends that the government allows for differential pricing for discrete generation stents as the new generation stents are believed to have better long-term outcomes (low thrombosis and low restenosis rates) for patients. This is imperative to keep the innovation momentum going.

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The healthcare body has also urged that the Government could explore making health insurance coverage mandatory for all citizens in a phased manner initially covering the organized sector. Employees could be given the option of either paying their ESI contribution or purchasing insurance from any IRDA regulated insurance company.

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Healthcare sector should be accorded National Priority status: NATHEALTH

India continues to rank low on many of the basic health indicators. Apart from trailing developed nations, India compares unfavorably even with its economic peers, other Asian countries and many of its neighbors. In order to bridge the infrastructure gap that currently exists in the country and ensure greater access to healthcare, Apex healthcare body-NATHEALTH has recommended that healthcare sector needs to be accorded ‘National Priority’ status.

In its Pre-Budget recommendation, recently submitted to the government, NATHEALTH said, though healthcare was included in the harmonized master List of Infrastructure sub-sectors by the Reserve Bank of India in 2012, long term financing options are still not available for healthcare providers.

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The Healthcare body has also urged that the Government could also explore making health insurance coverage mandatory for all citizens in a phased manner initially covering the organized sector. Employees could be given the option of either paying their ESI contribution or purchasing insurance from any IRDA regulated insurance company.

“Apart from enabling universal access to healthcare, the mandatory health insurance coverage would also meet the urgent need for augmenting healthcare capacity creation in the country”, Bose added.

According to NATHEALTH, there is also a need to increase in quantum of deduction towards payment of medical insurance premium. The Pre-Budget memorandum said, “The present annual deduction limit of Rs 15,000 needs to be enhanced to Rs 50,000 for self and family and the current annual limit of Rs 20,000 in respect of dependent parents needs to be enhanced to Rs 50,000.”

Other Recommendations

1. Need for extending the 160% weighted deduction scheme under section 35ad of the income tax act, 1961 for another 5 years upto 2022
2. Provide import duty relief in respect of lifesaving equipment, not manufactured in India and enable a robust regulatory framework for domestically manufactured medical devices
3. Further simplification of the tax regime in respect of real estate investment trusts (reits)/business trust
4. Earnings from medical tourism to be made tax exempt
5. Need for a liberalized FDI regime in respect of investments relating to medical education
6. Exempting the healthcare sector from the mat regime under the income tax act
7. Inclusion of hospital as an industrial undertaking under section 72A of the income tax act
8. Lowering of corporate tax rates as announced in the union budget 2014-15
9. Abolishment of dividend distribution tax
10. Need for revision in the service exports from India scheme (seis) reward rate
11. Need for providing a longer term (10 year window) for 250% deduction of approved expenditure on R & D activities
12. Extension of the duration of the tax holiday scheme from 5 years to 10 years for new hospitals
13. Enhancement in medical reimbursement exemption limit for salaried employees to rs 1 lakh per annum in line with cost inflation index
14. Introduction of a separate deduction in respect of preventive health checks
15. Introduction of a deduction for investment into long term bonds with a minimum tenor of 10 years issued for setting up hospitals with at least 100 beds
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17. Instituting a healthcare savings fund for all salaried employees similar to the PF scheme which would be tax deductible
18. Allowing Corporate Social Responsibility (CSR) spends as tax deductible business expenditure

http://business.medicaldialogues.in/healthcare-sector-should-be-accorded-national-priority-status-nathealth/
'Accord national priority status to health care sector'

Press Trust of India | New Delhi January 27, 2017 Last Updated at 18:42 IST

The health care sector needs to be accorded 'national priority' status as doing so will help in developing innovative financing structures and create an attractive environment for domestic production of medical equipment, a health body today said.

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"According a 'priority sector' status to health care will help in the process of enabling development of innovative long term financing structures for health care providers apart from creating an attractive environment for domestic production of medical equipment, devices and consumables while also catalysing research and development.

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"These funds would encourage entrepreneurship and newer business models which are the need of the hour for improving access, availability and quality, especially in Tier 2, Tier 3 and rural areas. The government can think of providing seed capital for such a fund," said Anjan Bose, Secretary General, NATHEALTH.

The body has also urged that the government to explore making health insurance coverage mandatory for all citizens in a phased manner initially covering the organised sector.

"Apart from enabling universal access to health care, the mandatory health insurance coverage would also meet the urgent need for augmenting health care capacity creation in the country," Bose added.

NATHEALTH said there is also a need to increase quantum of deduction towards payment of medical insurance premium.

"The present annual deduction limit of Rs 15,000 needs to be enhanced to Rs 50,000 for self and family and the current annual limit of Rs 20,000 in respect of dependent parents needs to be enhanced to Rs 50,000," the pre-budget memorandum said.

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http://in.shafaqna.com/EN/03975698
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New Delhi, Jan 27 (PTI) The health care sector needs to be accorded ‘national priority’ status as doing so will help in developing innovative financing structures and create an attractive environment

By Press Trust of India | Published: January 27, 2017 6:34 PM IST Email

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ANI | New Delhi [India]
January 13, 2017 Last Updated at 14:04 IST

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"Recently announced formation of a Medical Technology Assessment Board (MTAB) by the Government would go a long way in standardising and regulating the stent quality in India and usher in the much needed transparency which would also enable pricing standardisation in a more rational manner," Mr Anjan Bose, Secretary General, NATHEALTH, said.

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NATHEALTH has also expressed its concern that the notification may hamper procedural complexity based choice - both for the treating doctor and the patient.

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"The Government also needs to consider the impact of complex tax structure, and a high inventory cost based consignment supply chain model, which escalates the stent price. We should leverage proposed GST model law to rationalize the pricing and have requested government to consider the same favorably," Mr Probir Das, Governing Council Member and Vice Chairman, Medical Technology Forum - NATHEALTH, emphasised.

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AFFORDABLE CORONARY CARE IN THE OFFING

Thursday, 12 January 2017 | Archana Jyoti | in OpEd

The Government’s nod to the inclusion of coronary stents under price control list has evoked mixed reactions. Price and quality must be ensured.

After much deliberation and constant pressure from healthcare activists and despite protests from the pharma industry, the department of pharmaceutical under the Ministry of Chemicals and Fertilisers notified the inclusion of coronary stents in the Drug Prices Control Order Schedule-1 on December 21 last year. The notification categorises the life-saving device into two — Bare Metal Stents and Drug Eluting Stents (DES) which includes metallic DES and Biodegradable Vascular Scaffold (BVS)/biodegradable stents.

Following the Government’s notification to bring coronary stents under the country’s drug price control order, the National Pharmaceutical Pricing Authority (NPPA) is working on regulating and capping the prices of life-saving devices. Once this happens, this medical device will be well within the reach of poor patients. At present, the stents are put in the rich and the affluent just for the sake of profit.

However, it is not going to be an easy affair for the NPPA, given the clout of the pharma manufacturers, hospitals and doctors, besides distributors, whose profit margin is at stake when an individual stent is sold. Moreover, quality has to be ensured.

No wonder, the notification and the NPPA’s move, to consider capping of prices of coronary stents, has evoked mixed response from stakeholders. For information, stents forms a major cost of the angioplasty and stenting procedure. Various types of coronary stents are available with costs ranging from Rs24,000 to Rs60,000.

But the prices on which these devices are made available to the patients is several times higher than the actual cost. Thus, this was a highly profitable business for those selling this device as well as those advising its implementation — doctors, hospitals, distributors - all were at the receiving end. Since stakes are high, the NPPA may take its own time to decide on settling the selling price of the stents.

In this connection, members of the Alliance of Doctors for Ethical Care (ADEH) met the NPPA recently and urged it to permit sellers a 20 per cent profit margins on the cost price of stents. The ADEH was of the view that the sellers should be given around 20 per cent profit margin on the cost price.

The ADEH which has eminent doctors like Samiran Nundy of Gangaram Hospital, GS Grewal (former president, Punjab Medical Council), Arun Mitra (former chairman, Ethics Committee of Punjab Medical Council) and Sanjay Nagral (gastroenterologist from Mumbai) on its board suggested that the price of each stent should be displayed in the reception counter of the facility putting stents. Additionally, patients should be given the choice of stent with full scientific explanation. Indigenous production should be encouraged and facilitated. Import duty and other taxes should be waived off, suggested.
“The recently announced formation of a Medical Technology Assessment Board (MTAB) by the Government will go a long way in standardising and regulating stent quality in India and usher in the much needed transparency which would also enable pricing standardisation in a more rationale manner”, said Anjan Bose, Secretary General, Healthcare Federation of India. The organisation has expressed its concern that the notification may hamper procedural complexity based choice — both for the treating doctor and the patient.

Bose added that they were also concerned that this decision may disincentivise technology companies from launching newer, safer and more efficacious drug eluting stents in India. Since latest globally accepted technology will not be available to international patients, they may abandon Indian hospitals. This may also cause the flight of “high quality” seeking Indian patients to overseas hospitals in neighboring countries. He also pointed out that the Government will have to look into the impact of complex tax structure and a high inventory cost-based consignment supply chain model which escalates the stent price. “Unlike delivery of medicine, stent delivery requires hospitals to invest in developing and maintaining quality infrastructure, skilled resources, and operative overheads”, said Bose. It has recommended the Government allows for differential pricing for discrete generation stents as the new generation stents are believed to have better long-term outcomes.

However, after intense deliberation with the healthcare sector, the ball now lies in the NPPA court. The Government pricing control body has to ensure that the medical device is within the reach of the poor without compromising the quality.

(The writer is Special Correspondent, The Pioneer)

Indian cardiac stents as expensive as imports: MNC association

NEW DELHI: Corporate hospital chains in search of profits might be skewing the price of life saving cardiac stents and a lobby group for multinational stent makers and importers claimed stents made by Indian companies are priced as high as imported ones as the rift between MNC and domestic manufacturers widens over price control on stents.

Cardiac stents are tiny wire mesh tubes used to unblock and keep arteries open, supplying blood to the heart and prevent heart attacks. India’s drug pricing watchdog, National Pharmaceutical Pricing Authority (NPPA), is working out a formula to regulate prices of different cardiac stents and has invited stakeholders for discussions and suggestions.

NPPA is expected to cap the prices by mid-February, as per rules of the Drug (Prices Control) Order 2013.

Contrary to public opinion, Indian stents are not drastically cheaper to imported stents, says the Medical Technology Association of India (MTA) — a lobby group of research-
based multinational medical device makers including Abbott BSE -0.17%, Medtronic and Boston Scientific.

“Domestic and imported stents have similar price ranges because costs borne by domestic and global manufacturers are similar, including investment in training doctors to use these devices,” said Probir Das, Director MTaI. Neither multinationals nor domestic companies are engaged in price gorging, but their operating realities have to be taken into account, Das said.

Several distributors ET spoke to say most indigenous drug-eluting stents (DES) today have a maximum retail price (MRP) of at least Rs 1.30 lakh. Distributors and domestic industry insiders said Indian companies have even fixed MRPs of newly introduced Drug Eluding Stents (DES) at more than Rs 1.50 lakh—a similar price range to the latest stents by top global stent companies like Medtronic and Abbott India BSE -0.17%.

However, Indian companies differ with MNCs here and claim that save for newer launches, most locally produced stents are cheaper than imported stents. “When MNC product prices shoot up, Indian manufacturers are forced to create alternative brands with similarly high MRPs to retain customers or to see that their market share doesn’t get battered,” said Rajiv Nath, Forum Coordinator, Association of Indian Medical Device Industry (AiMeD)—a lobby group for domestic medical device companies.

“But this creates artificial inflation and the government needs to step in with a price capping mechanism or tax-based disincentive.”

“Our MRPs have been 20-30% lower than MNC brands,” said an executive of leading indigenous stent manufacturer who wished to remain unidentified. Higher MRPs are fixed to compete with imported stent prices and are more to satisfy hospitals seeking better margins than anything else, say domestic stent makers.

Corporate hospitals mark DES prices up anywhere between 60% and 100% depending on how far they can beat down MRP from distributors to cover operating costs and make profits, another domestic industry insider said on condition of anonymity.
According to this official, manufacturers provide the stent to distributors at a margin of 35-40%, while distributors add a margin of at least 20% when supplying to hospitals. Depending on the price they buy the stent for, hospitals on an average make 40% profit when selling to patients, the official added.

“Today, major hospitals ask for the MRP of the stent first before they go in for any negotiation,” an indigenous industry official said.
Healthcare sector needs rational stent pricing, says NATHEALTH

Updated: Jan 13, 2017 14:04 IST

New Delhi [India], Jan. 13 (ANI): With recent government notification to bring stents under the country’s drug price control order, the prices of the life saving device would be regulated and capped by the National Pharmaceutical Pricing Authority (NPPA).

In view of the latest notification and its wider implications on healthcare technology providers, Healthcare Federation of India (NATHEALTH) has suggested that the government needs to form a Health Technology Assessment Board for standardising and regulating the stent quality in India.

"Medical procedures in India are among the most affordable in the world, which is a combination of cost of devices and services. Any notification should be considered only if it can bring down the overall cost of treatment for the patient without denying them the options to avail the treatment of their choice. Additionally, such notifications significantly impact the 'Make in India' attractiveness of the country," Mr Rahul Khosla, President, NATHEALTH, said.
"Recently announced formation of a Medical Technology Assessment Board (MTAB) by the Government would go a long way in standardising and regulating the stent quality in India and usher in the much needed transparency which would also enable pricing standardisation in a more rational manner," Mr Anjan Bose, Secretary General, NATHEALTH, said.

On December 21, 2016, the Ministry of Chemicals and Fertilisers - Department of Pharmaceuticals notified that the Central Government includes Coronary Stents in the Drug Prices Control Order Schedule-1. The notification categorises Coronary Stents into two - Bare Metal Stents (BMS) and Drug Eluting Stents (DES) which include metallic DES and Bioresorbable Vascular Scaffold (BVS)/Biodegradable Stents.

NATHEALTH has also expressed its concern that the notification may hamper procedural complexity based choice - both for the treating doctor and the patient.

"We are also concerned that this may disincentivise technology companies from launching newer, safer and more efficacious Drug Eluting Stents in India. Since the latest globally accepted technology will not be available to international patients, they may abandon Indian hospitals. This may also cause the flight of 'high quality' seeking Indian patients to overseas hospitals in neighboring countries," Mr Bose added.

"The Government also needs to consider the impact of complex tax structure, and a high inventory cost based consignment supply chain model, which escalates the stent price. We should leverage proposed GST model law to rationalize the pricing and have requested government to consider the same favorably," Mr Probir Das, Governing Council Member and Vice Chairman, Medical Technology Forum - NATHEALTH, emphasised.

"Unlike delivery of medicine, stent delivery requires hospitals to invest in developing and maintaining quality infrastructure, skilled resources, and operative overheads," Mr Bose said.

"Exact requirement can be ascertained at the time of procedures, which requires hospitals to maintain high inventory (different size, quality and type) and thereby, incur holding costs. It takes 60 days for hospitals to recover charges from TPAs and 200+ days from CGHS. This delay adds significant capital costs," Mr Anjan Bose, Secretary General, NATHEALTH, said.

NATHEALTH recommends that the government allows for differential pricing for discrete generation stents as the new generation stents are believed to have better long-term outcomes (low thrombosis and low restenosis rates) for patients. This is imperative to keep the innovation momentum going.
NATHEALTH represents the entire eco-system of healthcare including Healthcare Providers/hospitals/Nursing Homes, Diagnostic Laboratories, Health IT firms, along with Medical Technology enterprises, Homecare, Health Insurance, Health Education and Health Start-up Companies. (ANI)

http://www.aninews.in/newsdetail-MA/Mjk1MTkx/healthcare-sector-needs-rational-stent-pricing-says-nathealth.html
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Source: ANI

Stent companies want prices based on categories

By ET Bureau | Updated: Jan 06, 2017, 12.52 AM IST

NEW DELHI: Stent makers have urged the National Pharmaceutical Pricing Authority (NPPA), India’s drug pricing regulator, to cap the prices of stents based on their categories and the prices at which hospitals buy them.

This is the only suggestion that Indian and global stent associations have unanimously agreed upon during a meeting with the regulator on Wednesday, said industry executives aware of the discussions.

NPPA, which is considering several options to cap these prices, has sought details of the price they charge to hospitals from all stent manufacturers, importers, marketers and associations as well as NGOs, according to a notification.

The Department of Pharmaceuticals included bare-metal stents (BMS), drug-eluting stents (DES) and bioresorbable stents (BRS) as scheduled drugs under the Drugs (Prices Control) Order in December.

According to some industry experts, patients have to pay from Rs 23,625 to as much as Rs 1.8 lakh in private hospitals for DES, which are used in 95 per cent of the cases.
During NPPA's meeting with stent associations, Indian and global manufacturers continued their battle over how these stents should be categorised, industry executives aware of the proceedings told ET on the condition of anonymity.

Indian companies sought different ceiling prices for the three broad categories: DES, BMS and BRS.

Global manufacturers and importers focussed on differential pricing within DES, arguing that some are designed differently for more complex procedures than others and asking NPPA to categorise and price these taking innovations into account.

“A knee-jerk policy framework without accounting for innovation will not only make India unviable to be a global destination for medical device manufacturing but will also reduce India’s competitiveness to provide world class medical care to patients from India and abroad,” the Medical Technology Association of India stated in a press release following the meeting.

http://economictimes.indiatimes.com/industry/healthcare/biotech/healthcare/stent-companies-want-prices-based-on-categories/articleshow/56363477.cms
Medical Technology Assessment Board should fix prices of stents: Nathealth

Nathealth represents entire spectrum of healthcare professionals including hospitals, manufacturers

Veena Mani | New Delhi January 8, 2017 Last Updated at 14:18 IST

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As the fight between multinational stent providers and domestic manufacturers intensifies over stent pricing, the healthcare federation of India Nathealth has
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Anjan Bose from the federation told Business Standard, “Let Medical Technology Assessment Board examine stents and set prices based on their efficacy.”

In a recent meeting held by the National Pharmaceutical Pricing Authority (NPPA) with stakeholders, Nathealth had also supported the request of multi-national stent manufacturers that there should be differential pricing.

Nathealth is a body that represents the entire spectrum of healthcare professionals including hospitals and manufacturers.

It has further been argued that the idea of taking the cost of production as the basis for fixing the ceiling price of stents is not advisable. Bose argues that cost of production will vary on the basis of the research cost put in by companies. As the research costs increase, the cost of production too will increase, stakeholders argued at the consultations.

Meeting NPPA officials in the final leg of finalising stent prices, the multi-nationals and the domestic players do not have a consensus on the pricing of various drug eluting stents.
While the domestic manufacturers claim that the “next-generation” stents aren’t superior to the drug eluting stents marketed by the domestic manufacturers, the multinationals argue that the United States Food and Drug Administration (USFDA) approved that stents are indeed superior.

Dr Praveen Chandra, chairman of Cardiology at Medanta and other doctors who attended the consultations with NPPA told Business Standard: "We told NPPA that stents vary in their efficacy. Thus, drug eluting there is a case for pricing based on efficacy."

Meanwhile, the domestic manufacturers, once again, at the meeting with NPPA, said drug-eluting stents ought to be priced equally.

The NPPA met stakeholders from January 4-6 before proceeding with the actual process of fixing the prices of stents. The NPPA has to notify the price by February this year.

In December 2016, the Department of Pharmaceuticals brought stents in the ambit of the Drug Price Control Order 2013. Before this, in July 2016, the government brought stents under the National List of Essential Medicines.

All stakeholders, Business Standard spoke with, mentioned that the NPPA hasn’t indicated what its final decision will be at this point.

Healthcare sector needs rational stent pricing, say experts

STAFF REPORTER

With the recent government notification to bring stents under the country's Drug Prices Control Order, the prices of the life saving device will be regulated and capped by the National Pharmaceutical Pricing Authority (NPPA).

Considering the wider implications on healthcare technology providers, Healthcare Federation of India (NATHEALTH) has suggested that the government needs to form a health technology assessment board for standardising and regulating stent quality in India.

“Medical procedures in India are among the most affordable in the world, which is due to a combination of cost of devices and services. Any notification should be considered only if it can bring down the overall cost of treatment for the patient without denying them the options to avail the treatment of their choice. Such notifications significantly impact the ‘Make in India’ attractiveness of the country,” said Rahul Khosla, president of NATHEALTH.

“The recently announced formation of a Medical Technology Assessment Board (MTAB) by the government will go a long way in standardising and regulating stent quality in India and usher in much-needed transparency, which will enable price standardisation in a rational manner,” Anjan Bose, secretary general of NATHEALTH said.
On December 21 last year, the Department of Pharmaceuticals, under the Ministry of Chemicals and Fertilizers, notified that the Centre include Coronary Stents in the Drug Prices Control Order Schedule-1.

Medical Device

Healthcare sector needs rational stent pricing:
NATHEALTH

Our Bureau, Mumbai
Friday, January 06, 2017, 08:00 Hrs [IST]

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According to NATHEALTH, almost 80 per cent of the healthcare services in India is provided by private care facilities. As supporters of high quality, safe and reliable patient care, the Federation has expressed its concern that the notification may hamper procedural complexity based choice – both for the treating doctor and the patient.

“We are also concerned that this may disincentivize technology companies from launching newer, safer and more efficacious Drug Eluting Stents in India. Since the latest globally accepted technology will not be available to international patients, they may abandon Indian hospitals. This may also cause the flight of “high quality” seeking Indian patients to overseas hospitals in neighboring countries,” Bose added.

While extending full support to the Government’s direction to drive affordability of medical devices, NATHEALTH sincerely hopes that the Government will take cognizance of quality classification based devices pricing.

“The Government also needs to consider the impact of complex tax structure, and a high inventory cost based consignment supply chain model, which escalates the stent price. We should leverage proposed GST model law to rationalize the pricing and have requested government to consider the same favorably,” emphasized Probir Das, Governing Council Member and Vice Chairman, Medical Technology Forum- NATHEALTH.

“Unlike delivery of medicine, Stent delivery requires hospitals to invest in developing and maintaining quality infrastructure, skilled resources, and operative overheads,” said Bose

“Exact requirement can be ascertained at the time of procedures, which requires hospitals to maintain high inventory (different size, quality and type) and thereby incur holding costs. It takes 60 days for hospitals to recover charges from TPAs and 200+ days from CGHS. This delay adds significant capital costs,” said Anjan Bose, Secretary General, NATHEALTH.

Additionally, NATHEALTH also feels that this will impact India’s Industry friendly image globally.

“We have been constantly engaging with several Government Agencies to explain that due to their uniqueness, medical devices cannot be treated through exactly similar policies and frameworks made for
pharmaceutical products. However the notification shows that we still have some work to do...And, we are very thankful that NPPA has invited various healthcare sector representatives for deliberations in early January.” said Milan Rao, Vice President NATHEALTH

The main objective of a welfare state is to provide access to affordable healthcare to all and regulations by the government come with this aim. “The government needs to provide affordable access to drugs and devices, hence regulating prices of medicines and devices is fully justified. However, quality/efficacy of products and clinical outcomes need to be given due priority for patient safety and other critical reasons,” said Mr. Bose.

Hence, NATHEALTH recommends that the government allows for differential pricing for discrete generation stents as the new generation stents are believed to have better long-term outcomes (low thrombosis and low restenosis rates) for patients. This is imperative to keep the innovation momentum going.

NATHEALTH uniquely represents the entire eco-system of healthcare including Healthcare Providers/hospitals/Nursing Homes, Diagnostic Laboratories, Health IT firms, along with Medical Technology enterprises, Homecare, Health Insurance, Health Education and Health Start-up Companies. NATHEALTH recommends separation of medical devices from drugs through a new Act proposed to be tabled in Parliament.

Medical Technology Assessment Board should fix prices of stents: Nathealth

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It has further been argued that the idea of taking the cost of production as the basis for fixing the ceiling price of stents is not advisable. Bose argues that cost of production will vary on the basis of the research cost put in by companies. As the research costs increase, the cost of production too will increase, stakeholders argued at the consultations.

Meeting NPPA officials in the final leg of finalising stent prices, the multi-nationals and the domestic players do not have a consensus on the pricing of various drug eluting stents.
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Meanwhile, the domestic manufacturers, once again, at the meeting with NPPA, said drug-eluting stents ought to be priced equally.

The NPPA met stakeholders from January 4-6 before proceeding with the actual process of fixing the prices of stents. The NPPA has to notify the price by February this year.

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All stakeholders, Business Standard spoke with, mentioned that the NPPA hasn’t indicated what its final decision will be at this point.

Price regulation may disincentivize companies from launching newer, safer and more efficacious stents: NATHEALTH

New Delhi: In view of the government’s recent notification to bring stents under the country’s drug price control order, Healthcare Federation of India (NATHEALTH) on Thursday expressed its concerns that regulating stent prices may disincentivize companies from launching newer, safer and more efficacious drug eluting stents in India.

“Medical procedures in India are among the most affordable in the world, which is a combination of cost of devices and services. Any notification should be considered only if it can bring down the overall cost of treatment for the patient without denying them the options to avail the treatment of their choice,” said Rahul Khosla, president, NATHEALTH.

The department of pharmaceuticals, under the ministry of chemicals and fertilisers, on December 21 issued a notification bringing coronary stents under schedule-I of Drug (Price Control) Order, 2013. The notification empowered the National Pharmaceutical Pricing Authority (NPPA) to regulate and cap the prices of bare metal stents, drug eluting stents (DES) and bioresorbable vascular scaffold (BVS) or biodegradable stents.

According to NATHEALTH, almost 80% of the healthcare services in India are provided by private care facilities. As supporters of high quality, safe and reliable patient care, the Federation expressed its concern that the notification may hamper procedural complexity based choice – both for the treating doctor and the patient.

NATHEALTH claims to represent the entire eco-system of healthcare including healthcare providers, hospitals, nursing homes, diagnostic laboratories, health IT firms, medical technology enterprises, homecare, health insurance, health education and health startup companies.
NATIONAL

9 JANUARY 2016

http://dnbcentral.in/

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“We are also concerned that this may disincentivize technology companies from launching newer, safer and more efficacious drug eluting stents in India. Since the latest globally accepted technology would not be available to international patients, they may abandon Indian hospitals. This may also cause the flight of high quality seeking Indian patients to overseas hospitals in neighbouring countries,” Bose added.

NATHEALTH has asked the government to allow for differential pricing for discrete generation stents as the new generation stents are believed to have better long-term outcomes (low thrombosis and low restenosis rates) for patients. This is imperative to keep the innovation momentum going, the Federation said in a statement.

http://dnbcentral.in/price-regulation-may-disincentivize-companies-from-launching-newer-safer-and-more-efficacious-stents-nathealth/
Healthcare sector needs rational stent pricing: NATHEALTH

POST 03 JANUARY 2017

BS RAWAT

NEW DELHI: In view of the latest notification and its wider implications on healthcare technology providers, National Healthcare Federation of India (NATHEALTH) has suggested the government needs to form a Health Technology Assessment Board for standardizing and regulating the stent quality in India.

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http://newsboss.in/ly/cW85Sn/Medical-Technology-Assessment-Board-should-fix-prices-of-stents-Nathealth
In view of recent government notification to bring stents under drug price control order and its implications on healthcare technology providers, Healthcare Federation of India (NATHEALTH) has suggested that the government needs to form a Health Technology Assessment Board for standardizing and regulating the stent quality in India.

Medical procedures in India are among the most affordable in the world, which is a combination of cost of devices and services. Any notification should be considered only if it can bring down the overall cost of treatment for the patient without denying them the options to avail the treatment of their choice. Additionally, such notifications significantly impact the ‘Make in India’ attractiveness of the country, said Rahul Khosla, president, NATHEALTH.

With recent government notification to bring stents under the country’s drug price control order, the prices of the life saving device would be regulated and capped by the National Pharmaceutical Pricing Authority (NPPA).

“Recently announced formation of a Medical Technology Assessment Board (MTAB) by the Government would go a long way in standardizing and regulating stent quality in India and usher in the much needed transparency which would also enable pricing standardization in a more rationale manner,” Anjan Bose, Secretary General, NATHEALTH said.

On 21st December 2016, the Ministry of Chemicals and Fertilizers – Department of Pharmaceuticals, notified that the Central Government include Coronary Stents in the Drug Prices Control Order Schedule-1. The notification categorizes Coronary Stents into two: Bare Metal Stents (BMS), and Drug Eluting Stents (DES) which include metallic DES and Bioresorbable Vascular Scaffold (BVS)/ Biodegradable stents.
According to NATHEALTH, almost 80 per cent of the healthcare services in India is provided by private care facilities. As supporters of high quality, safe and reliable patient care, the Federation has expressed its concern that the notification may hamper procedural complexity based choice – both for the treating doctor and the patient.

“We are also concerned that this may disincentivize technology companies from launching newer, safer and more efficacious Drug Eluting Stents in India. Since the latest globally accepted technology will not be available to international patients, they may abandon Indian hospitals. This may also cause the flight of “high quality” seeking Indian patients to overseas hospitals in neighboring countries,” Bose added.

While extending full support to the Government’s direction to drive affordability of medical devices, NATHEALTH sincerely hopes that the Government will take cognizance of quality classification based devices pricing.

“The Government also needs to consider the impact of complex tax structure, and a high inventory cost based consignment supply chain model, which escalates the stent price. We should leverage proposed GST model law to rationalize the pricing and have requested government to consider the same favorably,” emphasized Probir Das, Governing Council Member and Vice Chairman, Medical Technology Forum- NATHEALTH.

“Unlike delivery of medicine, Stent delivery requires hospitals to invest in developing and maintaining quality infrastructure, skilled resources, and operative overheads,” said Bose

“Exact requirement can be ascertained at the time of procedures, which requires hospitals to maintain high inventory (different size, quality and type) and thereby incur holding costs. It takes 60 days for hospitals to recover charges from TPAs and 200+ days from CGHS. This delay adds significant capital costs,” said Anjan Bose, Secretary General, NATHEALTH.

Additionally, NATHEALTH also feels that this will impact India’s Industry friendly image globally.

“We have been constantly engaging with several Government Agencies to explain that due to their uniqueness, medical devices cannot be treated through exactly similar policies and frameworks made for pharmaceutical products. However the notification shows that we still have some work to do...And, we are very thankful that NPPA has invited various healthcare sector representatives for deliberations in
early January.” said Milan Rao, Vice President NATHEALTH

The main objective of a welfare state is to provide access to affordable healthcare to all and regulations by the government come with this aim. “The government needs to provide affordable access to drugs and devices, hence regulating prices of medicines and devices is fully justified. However, quality/efficacy of products and clinical outcomes need to be given due priority for patient safety and other critical reasons,” said Mr. Bose.

Hence, NATHEALTH recommends that the government allows for differential pricing for discrete generation stents as the new generation stents are believed to have better long-term outcomes (low thrombosis and low restenosis rates) for patients. This is imperative to keep the innovation momentum going.

NATHEALTH uniquely represents the entire eco-system of healthcare including Healthcare Providers/hospitals/Nursing Homes, Diagnostic Laboratories, Health IT firms, along with Medical Technology enterprises, Homecare, Health Insurance, Health Education and Health Start-up Companies. NATHEALTH recommends separation of medical devices from drugs through a new Act proposed to be tabled in Parliament.

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