

Innovative  
Biopharmaceutical Industry  
Perspectives on

**UNIVERSAL HEALTH  
COVERAGE**

Proposed Public Policy Principles

March 2014





# The Challenge

With 1 billion people lacking access to basic health care and more than 2 billion people lacking regular access to essential medicines, governments are increasingly placing emphasis on the promise of universal health coverage (UHC).<sup>i</sup> The concept has gained importance and visibility on the global health agenda in recent years, including in discussions of post-2015 UN Sustainable Development Goals.<sup>ii-viii</sup> Although UHC may be particularly challenging to implement in low- and middle-income countries, the potential benefits are greatest in these countries.

At its core, universal health coverage is the idea that people should be able to gain access to the health care they need without experiencing financial hardship as a result.<sup>ix</sup> UHC has become an increasingly salient issue for developed and developing countries alike in the context of the global economic crisis, increasing health care demands, and still unmet medical needs. There is increasing recognition that providing quality universal health coverage is an investment in socio-economic well-being and a key contributor to the wealth and economic productivity of countries.<sup>x</sup>

# Partnering to Ensure Health System Sustainability

The innovative biopharmaceutical industry believes that a structured, collaborative effort to achieve universal health coverage can meet the shared goals of global health stakeholders of expanding patient access to quality medicines through innovative solutions and long-term sustainability of the health sector.

While every country is unique and tailored approaches will be required, there are common challenges and opportunities faced by countries at all stages of UHC.

Based on these areas of shared experience, the innovative biopharmaceutical industry proposes key guiding principles to inform the design of global UHC policies:

***Equitable Access, Efficiency, Quality, Inclusiveness, Availability, Adaptability, Choice, and Innovation.***

As countries work toward UHC, these principles may offer guidance to policy makers, industry, and other stakeholders who seek to improve health care and meet the health needs of all citizens. These principles cover the areas we believe our industry can contribute given our technical knowledge and experience in providing access to high quality health solutions. The biopharmaceutical industry is committed to working with stakeholders to shape action and implementation toward achieving UHC. We welcome your feedback and suggestions on these principles as we move forward in partnership to improve patient access to quality medicines.

# 1 Equitable Access

All people should have equitable access to essential health care services.

- All people, without discrimination due to race, gender, and socio-economic status, should have access to a package of essential, quality health care services. This should include the ability to designate the right care to best suit their needs.
- Achieving equitable access should involve a range of stakeholders, with the government providing a minimum package for target populations.
- Patient-centered approaches will reduce health inequalities and guarantee long-term sustainability and flexibility.
- Evidence-based decision-making to support investments in healthcare innovations—including strong health infrastructures, workforce, systems and social practices is the foundation for equitable access for all people.

# 2 Efficiency

Health systems should use resources effectively and efficiently.

- Questions about the form and financing of health systems in a country should be resolved through inclusive and open debate. All stakeholders should collaborate to develop mechanisms that help improve overall access to health care, and identify best practices designed to yield the most efficient and effective investments.<sup>xi</sup>
- Health systems should be well-equipped at conducting adequate epidemiological surveillance, integrating preventive approaches to primary health care, and fostering immunization programs to manage both infectious and chronic conditions.
- To achieve UHC, interventions are needed to improve the capacity of low- and middle-income countries to facilitate more secure, efficient, and competitive biopharmaceutical distribution systems by working with the innovative and generic biopharmaceutical industry, wholesalers, distributors, and retailers in the supply chain.
- Market-based mechanisms can play an important role in driving efficiency in both public and private systems. The innovative biopharmaceutical industry is well positioned to share its experience of best practices and tools to help increase efficiencies as well as maximize the value for policy makers, payers, and ultimately, patients.
- Synergies and partnerships with relevant stakeholders including governments, industry, non-governmental organizations, patient groups, and others should be actively promoted to avoid duplication of

# 3 Quality

## Health systems should guarantee access to quality infrastructure, service and care.

efforts and costs, and to improve healthcare efficiency.

- The provision of ethical, responsible and patient-centered product information should be supported by all stakeholders to ensure that both healthcare professionals and patients receive accurate and objective information regarding the risks and benefits of a treatment option.
- Decisions to prioritize funding for health services and technologies should be based on sound evidence and should ensure sustainability across the health system. Evidence based decision making should put patients at the center and achieve a reasonable balance between the interests of all relevant stakeholders. Monitoring and evaluation systems will be important to supporting such decisions.
- Health systems should increase access to health information, immunization and other prevention initiatives, improved diagnostics, treatment, care coordination, and disease management for both infectious and non-communicable diseases to avoid catastrophic expenditure and improve patient quality of life.
- Governments and all relevant stakeholders should foster efforts to secure the biopharmaceutical supply chain through compliance with internationally recognized quality standards in the manufacture and distribution of medicines, and develop appropriate policy solutions to protect patients from dangerous counterfeit or sub-standard medicines.<sup>1</sup> The innovative biopharmaceutical industry is supportive of working with governments, generic manufacturers, and non-governmental organizations to articulate a clear vision for quality in health care to help governments implement national frameworks for continuous quality improvement and better population health.
- Through innovative research and effective outreach, the innovative biopharmaceutical industry can also play a role in finding ways to improve appropriate prescribing and increase patient adherence to achieve better overall health outcomes.

<sup>1</sup> The World Health Organization defines sub-standard/spurious/falsely-labeled/falsified/counterfeit (SSFFC) medicines as medicines that are deliberately and fraudulently mislabeled with respect to identity and/or source.

## 4 Inclusiveness

Transition to and implementation of Universal Health Coverage should include engagement of all relevant stakeholders to maximize patient needs.

- To ensure that health care policies are designed with the patient at the center, key stakeholders - including patients, provider groups, payers, innovative and generic manufacturers, distributors, academics, non-governmental organizations, and policy makers - should be engaged at all levels of decision-making to identify fundamental health care needs and guarantee that services delivered reflect patient needs and expectations.
- Transparent stakeholder engagement is needed to ensure that decisions concerning UHC policies are fair, reasonable, and non-discriminatory.
- Social accountability mechanisms (e.g., community score cards, social audits, citizen charters, etc.) should be developed to strengthen stakeholders' ability to monitor, evaluate, and demand accountability from service providers and insurers.

## 5 Availability

Essential health services and products should be available to all those who need them.

- Shortages or inefficiencies in medicines, medical devices and technology supply chains should be addressed so that essential goods and services can reach all patients when they need them as affordably as possible.
- Healthcare services should be physically available for patients who need them, especially in underserved populations in low income settings. New tools, for example those to promote health literacy, community score cards, etc. should be used to connect patients with health systems.
- Access to information is critical to ensuring decision making is comprehensive and balanced. Governments should reinforce epidemiological data collection and patients should have appropriate and practical access to available information and the ability to make choices.

## 6 Adaptability

Diverse approaches should be encouraged to facilitate UHC-based healthcare financing and delivery.

- Because each country will follow its own path toward universal health coverage according to its own historical, economic, and social context, the road to achieving UHC requires creativity, adaptation, innovation, and experimentation with new models of health financing and delivery that are amenable to local conditions.
- Governments should consider diverse financing and reimbursement options to meet the health care needs of all citizens. The industry is willing to work closely with governments to find long-term solutions based on its extensive experience of working within a variety of different financing systems, with public and private health insurance programs, and in public-private partnerships.
- Public-private partnerships that leverage international best practices should be thoroughly explored in developing innovative healthcare financing models. “One-size-fits-all” solutions can limit further growth as UHC will be likely achieved by each country differently.

## 7 Choice

Health systems should preserve patient choice in health care services and delivery.

- Health needs of communities are most appropriately addressed when patients and citizens are well-informed, consulted, and provided with choices about their coverage and care. At the individual patient level, information about all clinically-relevant treatment choices should be made available.
- As health systems expand coverage beyond a basic package of services, options for patient choice in health care service delivery and coverage should be preserved to ensure that health systems are providing options that correspond with what patients want and need.
- Providing stakeholders with comparative information about health care service delivery and coverage, including private insurance coverage, can enable patients to exercise choice and offers opportunities to drive the innovation needed to improve health care systems.
- The innovative biopharmaceutical industry supports the considerations of patient choice and ability to select health care options that most closely meet patients’ individual needs.

# 8 Innovation

Society should encourage investments in R&D across the spectrum of prevention, diagnostics, treatment, care and support.

- Governments, industry, non-governmental organizations, and patient organizations should work together to develop diverse, sustainable approaches to health care financing, and support continuous innovation across the health care spectrum with the underlying goal of advancing population-wide coverage.
- Thriving ecosystems drive responsiveness and innovation within the health industry, ensuring efficient allocation of resources, enhancing affordability, improving patient and provider choice, and creating an overall sustainable environment. In disease areas where markets are not stimulating investments (e.g., neglected tropical diseases), new public-private platforms exist to conduct R&D for medicines where market forces fail to provide solutions.
- New interventions should be made available to patients as soon as possible through transparent and consultative dialogue with all relevant stakeholders.
- The innovative biopharmaceutical industry can continue to play a role in fostering innovation across the continuum of medical education, prevention, treatment, care and support in partnership with other stakeholders.



- i World Health Organization (2010). World Health Report: Health System Financing, the Road to Universal Coverage.
- ii The World Health Organization (WHO), the World Bank, the Organization for Economic Co-operation and Development (OECD), Asia-Pacific Economic Cooperation (APEC) and many developing and donor countries have already expressed support for UHC and health systems strengthening.
- iii The detailed definition from World Health Assembly Resolution 58.33 is as follows: "Universal coverage is defined as access to key promotive, preventive, curative and rehabilitative health interventions for all at an affordable cost, thereby achieving equity in access. The principle of financial-risk protection ensures that the cost of care does not put people at risk of financial catastrophe." — World Health Assembly Resolution 58.33 (2005).
- iv Kim, J (2013). Speech at the 66th World Health Assembly. Geneva, Switzerland. Available at <http://www.worldbank.org/en/news/press-release/2013/05/21/world-bank-group-president-urges-countries-to-deliver-universal-health-coverage-to-help-end-poverty>.
- v Joint Learning Network for Universal Health Coverage (2013). Countries Implementing Reforms. Available at <http://jointlearningnetwork.org/>.
- vi Asia-Pacific Economic Cooperation [APEC] (2013). 2013 Statement by Third APEC High Level Meeting On Health and The Economy. Available at [http://www.apec.org/Meeting-Papers/Ministerial-Statements/Health/2013\\_health\\_hlm.aspx](http://www.apec.org/Meeting-Papers/Ministerial-Statements/Health/2013_health_hlm.aspx).
- vii APEC (2013) Universal Health Coverage to be discussed in APEC. Available at <http://www.apec-2013.org/index.php/read/c/2013/07/02/699/Universal-Health-Coverage-to-be-Discussed-in-APEC>.
- viii Organization for Economic Co-operation and Development [OECD] (2013). Different paths towards sustainable universal coverage: Statement by Deputy Secretary-General Yves Leterme. Available at <http://www.oecd.org/centrodemexico/medios/differentpathstowardssustainableuniversalcoverage.htm>.
- ix World Health Organization (2010). World Health Report: Health System Financing, the Road to Universal Coverage.
- x Asia Pacific Economic Cooperative. (2013) Statement by Third APEC High level Meeting on Health and the Economy. Available at [http://www.apec.org/Meeting-Papers/Ministerial-Statements/Health/2013\\_health\\_hlm.aspx](http://www.apec.org/Meeting-Papers/Ministerial-Statements/Health/2013_health_hlm.aspx).
- xi Centre for Strategic Economic Studies, Victoria University and the World Health Organization (2012). Investing in Maternal and Child Health: An Analysis of Costs, Benefits, and Returns. Available at <http://www.cfses.com/documents/2012-CSES-&-WHO-Investing-in-MNCH.pdf>.



The European Federation of Pharmaceutical Industries and Associations (EFPIA) represents the pharmaceutical industry operating in Europe. Through its direct membership of 33 national associations and 40 leading pharmaceutical companies, EFPIA is the voice on the EU scene of 1,900 companies committed to researching, developing and bringing to patients new medicines that will improve health and the quality of life around the world.



IFPMA represents the research-based pharmaceutical companies and associations across the globe. The research-based pharmaceutical industry's 1.3 million employees research, develop and provide medicines and vaccines that improve the life of patients worldwide. Based in Geneva, IFPMA has official relations with the United Nations and contributes industry expertise to help the global health community find solutions that improve global health.



The Japan Pharmaceutical Manufacturers Association (JPMA) is a voluntary association comprising 72 research-oriented pharmaceutical companies (as of April 2014). JPMA has been contributing to advancing global healthcare through the development of innovative ethical drugs, facilitating sound development of the pharmaceutical industry through proactively establishing policies and recommendations in response to globalization and enhancing public understanding of pharmaceuticals.



The Pharmaceutical Research and Manufacturers of America (PhRMA) represents leading innovative biopharmaceutical research and biotechnology companies, which are devoted to discovering and developing medicines that enable patients to live longer, healthier, and more productive lives. Since 2000, PhRMA member companies have invested approximately \$550 billion in the search for new treatments and cures, including an estimated \$48.5 billion in 2012 alone.



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