# Regional approaches for supporting UHC medicines strategies

**Country Perspective** 





#### Viet Nam: Medicines Profile



Source: All data are of 2011, www.gso.gov.vn unless otherwise indicated

Photo Credit: WHO Country Office for Viet Nam

Total Market Value: U\$ 2.4 billion

Local production share: 46%

Availability: 30%

Expenditure:

- 1.7% of the GDP
- 22.5 US\$ per capita
- 42% of the total health expenditure [3]
- 60-70% of the total health insurance expenditure in 2009-2011 [4]
- 41% of the total cost for in-patients [5]
- 79% of the total cost for out-patients [6]

Prices:

• IB: 0.42 -41.76 x IRP

LPG: 0.09 – 5.14 x IRP





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#### **Access to Medicines Framework for UHC**

Potential areas for intervention by the State Health Insurance Registration Consumption Production Distribution Selection Procurement Use and and and supply regulations Expenditure 100 JUIK Drug Safety and quality Rational use Monitoring and information Pricing interventions control Price Competition and Regulations and PMS SUPPLY SIDE DETERMINANTS DEMAND SIDE DETERMINANTS Goal Goal Ensure that medicines are selected and procured based on Ensure availability of safe, effective and evidence of safety and cost-effectiveness, rationally prescribed quality assured medicines and used and that the optimal benefits of financing are met by monitoring consumption and expenditure **OVER-ALL SYSTEMS EFFICIENCY ACCESS** EQUITY





## Who are the stakeholders?

- Government: regulation, access
- Industry: trade, innovation, access (?)
- Providers: profit, access (?)
- Patients: affordability, equitable access

Can we bring them altogether to improve access under the context of UHC?





# The Medicines Transparency Alliance (MeTA)

- Multi-stakeholder
- Built around issues of transparency, accountability and good governance
- Focus on transparency of information, but also improving access to essential medicines





The Medicines Transparency Alliance (MeTA)

- MeTA in Viet Nam?
- Technical Working Group (TWG) on pharmaceuticals under the Health Partnership Group (HPG): on its inception





- 1. Medicines management and policies:
- WHO-led: Aide Memoire on Strategic Collaboration in Improving Access to Medicines, signed by WHO and MOH in 2010
- WHO-UNIDO-MOH Collaboration on the policy of local pharmaceutical production
- WHO-UN on access and MDG's
- Government side: DAV-led





#### 2. Information for decision making:

#### **Key players:**

WHO, MOH, Health Strategy and Policy Institute (HSPI), Universities, VSS, Technical Programmes

#### **Products**

- Assessment of the NMP and the Pharmaceutical Law
- Specific medicines on TB, MCH, ARV's
- Review of the reimbursement list
- Expenditure and consumption monitoring
- Rational use of medicines monitoring
- Quality monitoring
- Industry scan





#### 3. Technical Issues

- Local pharmaceutical production: WHO-UNIDO, MOH and Viet Nam National Pharmaceutical Companies Association (VNPCA)
- Medicines Pricing: WHO, MOH, MoF
- Patent and trade issues: WHO, UNAIDS, **UNCTAD**
- Rational Use: WHO, Karolinska Institute, French Embassy, MOH, VSS





#### 3. Technical Issues

- Quality Monitoring: WHO, USG-USP; National Institute of Drug Quality Control (NIDQC)
- Counterfeit monitoring: WHO, UNODC, French Embassy
- Pharmacovigilance: WHO, WHO-UMC, MSH, National PV-Centre, National PV Centre in New Zealand





# **Medicines: The forgotten MDG**

## Country Approaches

#### Participation in regional collaborations and harmonization

- ASEAN Harmonization
- ASEAN Technical Working Group in Pharmaceuticals
- Price-monitoring: Piemeds
- SSFFC: Pilot country of WHO's global monitoring program
- Pharmacovigilance: WHO-UMC
- Mekong Country Medicines Monitoring: French **Embassy**
- Mekong countries programmes on UHC
- Fellowships, study exchanges around the region





Thank you



