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India's healthcare sector is expected to reach 19.5 lakh crore (US$280 billion) by 2020. Increasing growth, increased health care expenditure, increased lifestyle ailments and improved access to insurance would be key growth drivers. Health care industry in India is gaining momentum in India. Gross direct health care spend is expected to increase 17.16% to RS 51,637.84 crore (US$7.39 billion) in FY20. Since April 2020, the number of subscribers under the National Health Protection Scheme has reached 169.031, and the number of primary health centres has risen to 33,987. India's hospital industry is expected to reach USD 372 billion from $160 billion in 2017 by 2022. 2014 its investment in healthcare services have contributed to 4 million additional jobs, allowing patient-doctor ratio improvement from 1:2 lakh medical institutions. The private sector has emerged as a dominant force in the Indian healthcare industry, lending it rational and international reputation. It accounts for almost 74% of the country's total healthcare expenditure. Telemedicine is a rapidly emerging trend in India. The main hospitals (Apollo, AIIMS and Narayana Hrudayalaya) have adopted telemedical services and entered several public-private partnerships (PPP). In addition, the presence of world-class hospitals and skilled health professionals has strengthened India's position as a priority destination for health tourism. India's health tourism market is growing at a rate of 18% y-o-y and is expected to reach USD 9 billion by 2020. The value of mergers and purchases (M&A) in the hospital sector jumped to a record 155% in FY19 at 7,615 crore rs (US$1.09 billion). The Government of India has approved the continuation of the National Health Mission with a budget of RS 34,115 crore (US$4.88 billion) under the Union budget for 2020-21. The National Food Mission aims to reduce stunt rates by 2%, malnutrition by 2%, anemia by 3% and small birth infants by 2% of all years. Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (PMJAY), the government's largest government-funded health care program for more than 500 million beneficiaries, was allocated 6,429 rs (US$919.87 million) under the 2020-21 Union budget. As of November 2019, nearly 63.7 people with PMJAY had a free treatment. Under Pradhan Mantri Swasthya Suraksha Yojana (PMSSY), an allocation of 3,000 crores (US$429.25 million) was made under the Union budget for 2020-21. The Intensive Mission Indradhanush (IMI) 2.0 was launched from December 2019 to March 2020 by the Ministry of Health and Family Welfare. Under the Union budget for 2020-21, 65,012 crore (US$9.30 billion) and rs 2,100 crore (US$300.47 million) were allocated to the Department of Health and Family Welfare and the Department of Health Research respectively. Government expenditure on the health sector increased to 1.6% of GDP (gross domestic product) in FY20 from 1.3% in The government intends to increase its public 2.5% of the country's GDP by 2025. The share of GDP in health is expected to increase by 19.7% by 2027. Between April 2000 and March 2020, the inflow of foreign direct investment into the drug and pharmaceuticals sector is USD 16.50 billion. Ayush Mishra, co-founder and ceo, Tattvan E-Clinics Pvt. Ltd. The health industry in India has grown exponentially. Increased investment and expenditure by public and private investors has increased rapidly. An important feature of India's healthcare sector is the rise of private players. Investment in the healthcare industry from the public sector. The emergence of reputable global players investing through DSI has played a key role in the growth of the health sector. Now the growing incidence of lifestyle diseases, the growing demand for affordable healthcare, the emergence of technologies such as telemedicine and the government's increased role in the healthcare industry. The Indian Government has remained very active in its agenda to the development of the health sector. According to the Ayushman Bharat National Health Protection Mission, the Indian Government will increase public expenditure on healthcare from 1.1% to 2.5% of GDP over the next four years and to 5% over the next five years. This shows that the nation is on the path of progressive health care for every individual. The health sector in 2018 Access to healthcare and quality in India was almost similar to last year with little improvement in 2018. The INDIA Government focused on providing better capacity in the health sector. Govt. Ayushman Bharat National Health Protection Mission was carried out from India in August 2018. AB-NHPS will have $5,00,000 per family per year for hospitalisation in secondary and tertiary care (based on a family float). The Indian government has also launched other schemes, such as Mission Indradhanush, to improve immunisation coverage in a country with at least 90 percent immunisation coverage in India by December 2018. From a business perspective, 2018 has been an iconic year for india's health sector. A number of established multi-species hospitals and health groups have been taken over by industry giants. With the extensive options available and the diligent policies of the IO, global actors from other nations have also started to invest in Indian health. As the digital revolution takes place within the country, telemedicine has also evolved in the Indian medical space. The Indian Government has shown great interest in the development of telemedicine and has started to invest in this segment to provide better health facilities even in rural India. The private business sphere is also witnessing paradigm shifts, where leading Indian industries have also added liquidity in the field of telemedicine. This trend is expected to continue as several other they also come to the forehead. Trends in the health industry For 2019Exading, a single specialty hospital and clinics are growing rapidly in India and this will change the facade of a mismatched health sector. At first, health categories such as eye care, dental care were popular in the industry. However, with the success of the Bouquet hospital model, other categories such as fertility, oncology and motherhood are also being flieseд into the sector. Emerging startups and big players are betting big on national health care to make a profit in this growing market. Another trend of budget hospitals, which has already become popular in south India's demographics, will address the health sector in 2019. In India, the majority of the population belongs to the middle and lower economic strata. With rising demand for good health facilities at affordable prices, The Budget Will gain popularity in the country. In 2019, India will emerge as one of the most popular health destinations among foreigners. In particular, health tourism from sub-Saharan countries is expected to increase by almost 20%. As competing health facilities are available in India compared to Western countries, medical tourism is expected to grow in the coming year. While Malaysia and Singapore in India have developed health infrastructure, the majority of non-South Asian countries is growing rapidly. 1.2. For updated information, please visit www.ibef.org 2019 HEALTHCARE 2 .. A summary of the table of contents.

4 Market overview and trends..... 6 Strategies and trends adopted... 11 Growth Drivers..... 15 Opportunities..... 26 Key industrial organisations..... 29 Useful information.....

31 3. For updated information visit www.ibef.orgHealthcare3 EXECUTIVE SUMMARY Source: Business Standard, Ministry of Foreign Affairs, Ministry of Foreign Affairs (Investment and Technologies Promotion Department), joint document ASSOCHAM-RNCOS, Lancet Study India ◊ is expected to be among the top three healthcare markets by 2020 gradual growth. ◊ In FY17, the Indian health sector was the fourth largest employer, employing a total of 319,780 people. the sector is expected to create 40 million jobs in India by 2020. ◊ In May 2017, the Asian Institute for Skills Transfer Research and Training (ARTIST) announced plans to create one million qualified health providers by 2022. ◊ 100,000 jobs are expected to be created from the Ayushman Bharat National Health Protection System. Fourth largest employer ◊ India's health sector is expected to record a threefold increase in 2016-222, reaching $372 billion in 2016-22 110 billion in 2016. ◊ India is in 145th place in 195 countries in terms of quality and affordability of healthcare. There is an immense opportunity in India to improve the penetration of health services and thus great opportunities for the development of the health industry. Impressive growth prospects ◊ Rising income levels, an ageing population, increasing health awareness and changing attitudes towards preventive healthcare are expected to increase demand for health services in the future. ◊ Low prices for health services have led to an increase in health tourism in the country, attracting patients from all over the world. In addition, India has emerged as a centre of R&D activities for international actors due to the relatively low cost of clinical research. Strong bases and cost advantage ◊ Favourable policies to promote foreign direct investment, tax levies, favourable government policies, along with promising growth prospects have helped the industry attract private equity, venture capital and foreign players. Favourable investment environment 4. HEALTH ADVANTAGE INDIA 5. For updated information, visit www.ibef.orgHealthcare5 ADVANTAGE INDIA ◊ India's healthcare market is expected to reach US$372 billion by 2022, while the medical device market is expected to cross $11 billion by 2022. ◊ Rising incomes, increased awareness of health, lifestyle diseases and increasing access to insurance will contribute to growth. ◊ It is estimated that India will require 2.07 million more doctors by 2030 to achieve a doctor-to-population ratio of 1:1,000. ◊ Investment in health infrastructure will increase, benefiting both hard (hospitals) and soft (R&D, education) infrastructure. ◊ The hospital industry in India is expected to increase the CAGR by 16-17 percent to reach RS 8.6 trillion (US$132.84 billion) for FY22 from RS 4 trillion (US$61.79 billion) in FY17. ◊ The INDIAN Government aims to increase health spending to three per cent of gross domestic product (GDP) by 2022. ◊ the availability of a large pool of well-trained health professionals in the country. ◊ The number of doctors with recognised medical qualifications (under the I.M.C Act) registered with the State Medical Council/Medical Council of India increased in 2017 to 841,104 from 827,006 in 2010. ◊ the establishment of new drug testing laboratories and the further strengthening of 31 existing state laboratories. ◊ The world's largest government-funded health scheme, Ayushman Bharat, was launched on 23 September 2018. PRIORITY INDIA Source: KPMG, Deloitte, Hospital Market - India After Research on India, Frost and Sullivan, LSI Financial Services, Health Care, Telemedicine and Health Tourism Report in India- ASA and COLLEAGUES LLP, Aranca Research, Indian Journal of Public Health Note: R&D and Development 6. HEALTH MARKET OVERVIEW AND TRENDS 7. For updated information visit www.ibef.orgHealthcare7 Hospitals Hospitals Hospitals Diagnostics Medical equipment and supplies Medical insurance Telemedicine Private hospitals – Includes homes for the aged and medium and highest private hospitals. Government hospitals – Includes health centres, district hospitals and general hospitals. It includes the production, extraction, processing, cleaning and packaging of chemical materials for use as a medicinal product for human or animals. It comprises companies and laboratories offering analytical or diagnostic services, including body fluid analysis. Includes installations producing mainly medical equipment and supplies, e.g. in the case of medical equipment and supplies. It includes health insurance and health care institution to reimburse the costs of hospitalising an individual for illness. Telemedicine has great potential to meet the challenges of providing healthcare in rural and remote areas, in addition to several other applications in education, training and governance in the health sector. HEALTHCARE MARKET FUNCTION THROUGH FIVE SEGMENTS Source: Hospital Market - India after India Research, Aranca Research Healthcare 8. For updated information visit www.ibef.orgSealthcare8 STRONG GROWTH IN HEALTHCARE SPENDING OVER THE YEARS Source: Frost and Sullivan, LSI Financial Services, Deloitte, Aranca Research 45 52 60 68 73 81 104 140 160 280 372 0 50 100 150 200 250 300 350 400 2 008 2009 2010 2011 2012 2014 2016 2017E 2020F 2022F ◊ Health care has become one of India's largest sectors after getting so after work. The industry is growing in large numbers as a result of the strengthening of coverage, services and increasing expenditure by public and private actors. ◊ In 2008-22, the market is expected to record 16.28 per cent of the CAGR. ◊ The total size of the industry is expected to reach US$160 billion and US$372 billion by 2017 and US$372 billion by 2022. ◊ The hospital industry in India reached RS 4 trillion (USD 61.79 billion) in FY17 and is expected to increase with an annual growth rate (CAGR) of 16 to 17 per cent to reach RS 8.6 trillion (US$132.84 billion) for FY22. Visakhapatnam port traffic (million tonnes)Health Sector Growth Trend (US$Billion) CAGR: 16.28% Note: F – Forecast, E - Estimate 9. For updated information visit www.ibef.orgHealthcare9 PER CAPITA HEALTHCARE EXPENDITURE INCREASED WITH RAPID SPEED 1.3 1.2 1.2 1.1 1.5 1.4 0 0 0.2 0.4 0.6 0.0.2 8 1.2 1.4 1.6 FY13 FY14 FY15 FY16 FY17 FY18E ◊ This is due to the growth of in-does, easier access to high-quality health facilities and greater awareness of health and hygiene. ◊ Increased health insurance penetration has led to an increase in health spending, a trend that may increase over the next decade. ◊ Economic prosperity is a driving force for improving the availability of generic medicines on the market. ◊ Government expenditure on the health sector increased to 1.4 per cent of GDP in FY18E from 1.2 per cent of GDP in FY14. ◊ 10000000 plans to increase public health spending to 2.5 percent of the country's GDP by 2025. Visakhapatnam port transport (one million tonnes)State expenditure on healthcare as a percentage of GDP Source: Hospital Market - India after India Research, Economic Review FY18 Note: E - Estimated, Actual FY18 data are expected to be available by March 2019 from the FY19 economic survey on 10 March 2019. For updated information Please visit www.ibef.orgHealthcare10 HEALTH INFRASTRUCTURE IS USTALA U FAST PACE Source: National Health Profile 2018 827,006 829,017 831,029 833,040 835,051 837,062 839,073 841,084 843,095 845,106 847,117 849,128 851,139 853,150 855,161 857,172 859,183 861,194 863,205 865,216 867,227 869,238 871,249 873,260 875,271 877,282 879,293 881,304 883,315 885,326 887,337 889,348 891,359 893,370 895,381 897,392 899,403 901,414 903,425 905,436 907,447 909,458 911,469 913,480 915,491 917,502 919,513 921,524 923,535 925,546 927,557 929,568 931,579 933,590 935,601 937,612 939,623 941,634 943,645 945,656 947,667 949,678 951,689 953,700 955,711 957,722 959,733 961,744 963,755 965,766 967,777 969,788 971,799 973,810 975,821 977,832 979,843 981,854 983,865 985,876 987,887 989,898 991,909 993,920 995,931 997,942 999,953 1,000 1,002 1,004 1,006 1,008 1,010 1,012 1,014 1,016 1,018 1,020 1,022 1,024 1,026 1,028 1,030 1,032 1,034 1,036 1,038 1,040 1,042 1,044 1,046 1,048 1,050 1,052 1,054 1,056 1,058 1,060 1,062 1,064 1,066 1,068 1,070 1,072 1,074 1,076 1,078 1,080 1,082 1,084 1,086 1,088 1,090 1,092 1,094 1,096 1,098 1,100 1,102 1,104 1,106 1,108 1,110 1,112 1,114 1,116 1,118 1,120 1,122 1,124 1,126 1,128 1,130 1,132 1,134 1,136 1,138 1,140 1,142 1,144 1,146 1,148 1,150 1,152 1,154 1,156 1,158 1,160 1,162 1,164 1,166 1,168 1,170 1,172 1,174 1,176 1,178 1,180 1,182 1,184 1,186 1,188 1,190 1,192 1,194 1,196 1,198 1,200 1,202 1,204 1,206 1,208 1,210 1,212 1,214 1,216 1,218 1,220 1,222 1,224 1,226 1,228 1,230 1,232 1,234 1,236 1,238 1,240 1,242 1,244 1,246 1,248 1,250 1,252 1,254 1,256 1,258 1,260 1,262 1,264 1,266 1,268 1,270 1,272 1,274 1,276 0 50 100 150 200 250 300 350 0 14 The number of medical faculties in India increased from 314 in FY11 ◊ The number of medical faculties in India has increased from 314 in FY11 ◊ The number of medical faculties in India has increased from 276 in FY18 from 314 in FY11. ◊ The number of doctors with recognised medical qualifications (under the I.M.C Act) registered with the State Medical Council/Medical Council of India increased in 2017 to 841,104 from 827,006 in 2010. Note: Data is expected to be updated by August 2019 from the National Health Profile 2019 11. TRENDS AND HEALTH CARE STRATEGIES 12. For updated information visit www.ibef.orgHealthcare12 OBSERVED TRENDS IN THE INDIAN HEALTH SECTOR ... (1/2) Source: IRDA, CII, Grant Thornton, Gartner, Technopak, Aranca Research Note: PPP is a public – private partnership, management contract – Arrangement under which operational control of a company is assigned to a separate entity to compensate ◊ Telemedicine is a rapidly emerging sector in India; the main hospitals (Apollo, AIIMS, Narayana Hrudayalaya) have accepted telemedical services and entered a number of PPP. ◊ The telemedicine market in India is expected to increase by 20 per cent to the CAGR between 2020 and reach USD 32 million by 2020. ◊ Telemedicine can bridge rural and urban distribution in terms of health facilities, expand low-cost consultations and diagnose facilities to the farthest areas through high-speed internet and telecommunications. The emergence of telemedicine ◊ Vaatsalya Healthcare is one of the first hospital chains to focus on Tier 2 and Tier 3 expansion. ◊ In order to encourage the private sector to set up hospitals in these cities, the government has released taxes on these hospitals for the first five years. Expansion into upper-class and grade III cities ◊ With increasing urbanisation and problems associated with modern life in urban areas, there is currently around 50 per cent of bed spending for patients for lifestyle diseases; this has increased the demand for specialised care. In India, lifestyle diseases have been replaced by traditional health problems. ◊ Most lifestyle diseases are caused by high cholesterol, high blood pressure, obesity, poor diet and alcohol. from infectious to lifestyle diseases ◊ In information technology (IT) and integration with medical electronics, it has made it possible to provide high quality health care at home at affordable prices. It allows customers to save up to 20-50 percent of the cost. ◊ The home healthcare market is expected to reach USD 4.46 billion by the end of 2018 and USD 6.21 billion by 2020. Home care ◊ The increasing adoption of AI-based apps has allowed people to speak directly to doctors, doctors and experts for the best treatment. ◊ It is also able to solve the problems of patients, doctors, hospitals and the entire health industry. Artificial Intelligence(AI) 13. For updated information visit www.ibef.orgHealthcare13 OBSERVED TRENDS IN THE INDIAN HEALTH SECTOR ... (2/2) Source: Business Standard, Ministry of Foreign Affairs, Ministry of Foreign Affairs (Department of Investment and Technology Promotion) ◊ In FY18, gross health insurance is 25.2 per cent of the total gross direct income premium that non-life insurance represents. ◊ Health insurance is gaining momentum in India. Gross direct income from non-life premiums rose 19.28 per cent to RS 278.96 billion (US$3.87 billion) between April and November 2018. Increase in health insurance penetration ◊ A new trend is emerging as a luxury supply in the health sector. Health care providers offer luxury services more than essential requirements. For example: pick and drop services for a patient with private helicopters and a decoy arrangement for hospital visitors, Luxury offerings ◊ Digital Health Knowledge Resources, Electronic Medical Record, Mobile Healthcare, Electronic Health Record, Hospital Information System, PRACTO, Technology-enabled Care, Telemedicine and Hospital Management Information Systems are some of the technologies that have gained widespread acceptance in the sector. ◊ India's medical technology sector is expected to reach USD 9.60 billion by 2022. Technology initiatives ◊ Strong mobile technology infrastructure and the launch of 4G should launch mobile health initiatives in the country. ◊ Tel Humsafar is a mobile sms service aimed at women, enabling women to plan their family in a better way. Mobile health delivery 14. For updated information visit www.ibef.orgHealthcare14 STRATEGIES ACCEPTED Source: Aranca Research, PE Roundup – 1H2018 & Jun'18 report by EY ◊ U december 2018, Radiant Life Care Ltd and Max Healthcare Ltd agreed to merge, but if the consequences are the third in order of the Indian hospital company at a combined value of 7,242 crore rs (US$1 billion). ◊ In October 2018, Zydus Wellness and Cadila Healthcare jointly acquired Heinz India for RS 45.95 billion (US$654.75 million). ◊ As of September 2018, Radiant Hospital acquired a 49.70 per cent stake in Max Health for US$293 million. ◊ Health sector in India witnessed 23 transactions worth US$679 million in H12018. Merger and and ◊ Private actors in the industry make their supply chains efficient and leveraged economies of scale in order to reduce costs. One such example is Narayan Hrudayalaya (NH), where healthcare is provided at affordable prices. NH reduces costs through high medical supplies, high volumes with high capacity utilisation and staff productivity, and good management of human capital (i.e. training). Cost management – Some industry players focus only on providing one type of health service to their customers. It also helps them to be leaders in this job. Many examples can be cited for hospitals that focus on cancer treatment and providing leading treatment for cancer and eye-related problems and treatment in India. Focus ◊ Players in the industry are trying to concentrate by providing more health services under one roof. ◊ Offering a number of health and wellness services under one roof is beneficial for patients because they can get all the services they need in one place. Integration ◊ Growth in the number of patients has forced providers to increase their capacity to provide more services, such as emergency care, surgery, chemotherapy, pharmacy and diagnostics. Capacity ◊ Growth in demand for healthcare services has led to the development of new models of healthcare delivery, such as telemedicine and diagnostics. Growing demand ◊ growing investment in DS and the private sector. ◊ Lucrative M and A options ◊ Foreign players setting up R and D centres and hospitals. Mergers and acquisitions : Promoting policies for DSI and the private sector. ◊ reduction of customs duties and other taxes on life-saving equipment. ◊ NRHM has allocated US$10 billion for health facilities. ◊ National health insurance mission to cover the entire population. Policy support ◊ Expansion of research and development and distribution facilities in India. ◊ Use of modern technology. ◊ providing support to global projects from India. Focus Source: Ministry of Health and Family Welfare, Government of India, Aranca Research Note: FDI – Foreign Direct Investment, M&A - Mergers and Acquisitions of NRHM - National Mission for Rural Health 17. For updated information, visit www.ibef.orgHealthcare17 RISING INCOME, AGEING POPULATION TO BE KEY HEALTHCARE DEMAND DRIVER ◊ Rising incomes mean a stale growth in theability to access healthcare and related services. ◊ India's GDP per capita is expected to reach US$3,273.85 in 2023 from US$1,481.56 in 2012. ◊ Changes in demographic values will also contribute to increased spending on healthcare; this will be able to continue with the size of the elderly population, which will increase from the current 98.9 million to approximately 168 million by 2026. ◊ GDP per capita at current prices for 2018 was US$2,134.75. 1,481.56 1,610.36 1,638.76 1,749.16 1,982.70 2,134.75 2,334.14 2,538.82 2,762.31 3,006.54 3,273.85 0 500 1,000 1,500 2,000 2,500 3,000 3,000 2012 2013 2014 2015 2016 2017 2018 2019 2021 2022 2023 Visakhapatnam port transport (one million tonnes)GDP per capita at current prices* (US$) Source: International Monetary Fund, World Economic Outlook database, April 2018 Note: * estimates after 2013 18. For updated information visit www.ibef.orgHealthcare18 MEDICAL TOURISM: A NEW GROWTH FACTOR FOR INDIA'S HEALTHCARE SECTOR ◊ The presence of world-class hospitals and skilled health professionals has strengthened India's position as a preferred destination for health tourism. ◊ Top quality healthcare, coupled with low treatment costs compared to other countries, benefits India's medical tourism industry. The other factors that have contributed to the growth of medical tourism are the availability of a large pool of well-trained health professionals in India, the presence of world-class hospitals and skilled health professionals, and the availability of a large pool of well-trained health professionals in India. The medical tourism industry in India is expected to grow at a CAGR of 15.9 per cent year in 2017, at around 495,056 in 2017 from 427,014 in 2016. ◊ Yoga, meditation, ayurveda, alopathy and other traditional treatment methods are the main service offerings that attract medical tourists from European nations and the Middle East to India. ◊ The Ministry of AYUSH, the Government of India has implemented various initiatives to promote ayurvedic, yoga and other AYUSH medicine systems internationally and 15.28 crore RS (US$2.36 million) has been allocated for this purpose. ◊ The INDIAN Government has liberalised its policy by providing 100% DSV in the AYUSH sector for wellness and health tourism. Source: Ministry of Health, RNCOS, KPMG, Deloitte, Association for Medical Tourism, LSI Financial Services, Presentation of Investors Apollo, Aranca Research 19. For updated information, visit www.ibef.orgHealthcare19 RE-EMERGENCE OF TRADITIONAL MEDICAL CARE Notes: AYUSH - Ayurveda, Yoga, Naturopathy, Unani, Siddha i Homoeopathy Origin: Ministry of Health, Make in India, RNCOS, KPMG, Ayurveda Industry Market Size, Strength and Way Forward report by Confederation of Indian Industry (CII) ◊ Many major players, such as Apollo, VLCC and Manipal Group, also set up wellness centres around India. with traditional health medicines at the heart of their offer. Leading brands and players ◊ The traditional medical sector is developing the Traditional Digital Knowledge Library to prevent companies from claiming patents on such medicines. The interest of many private equity firms in india's traditional healthcare sector is growing. Observed trends ◊ The Indian Ayurvedic industry is expected to reach USD 9 billion by 2022. ◊ Ayurveda and Unani contain more than 90 % plant formulations. ◊ The sector has expanded its range and now includes services in the fields of nutrition and nutrition, yoga, herbal medicine, human therapy and spa. Market size and services offered ◊ The state had 460 Ayurveda and the homeopathy government recognized the facilities in 2017-2018. As of January 11, 2019, the number of subcenters reached 168,157 and the number of primary health centres increased to 33,235. ◊ The total number of doctors in India rose to 428,884 in 2017 from 419,217 in 2016. Infrastructure development 20. For updated information visit www.ibef.orgHealthcare20 PHARMA MARKET TURNOVER TRENDING North Pharma Market Turnover (US$Billion) ◊ The Indian pharmaceutical market grew 5.5 percent in CY2017 in terms of moving annual turnover. With a turnover of RS 1.16 trillion (US$18.06 billion). ◊ In 2017, the turnover of the Indian pharmaceutical industry reached US$14.97 billion and US$3.08 billion of non-planned formulations or planned formulations. Source: Pharmaceutical Department 3.14 3.19 3.08 12.32 13.92 14.97 0 2 4 6 8 10 12 14 16 18 2015 2016 2016 2017 Planned Formulations Non-Planned Formulations 21. SUPPORT POLICY AND GOVERNMENT INITIATIVES ... (1/4) ◊ The government of India launched Ayushman Bharat (PMJAY) to provide health insurance coverage to 500,000 (US$7,1,219) per family per year. ◊ As of December 16,2019, 52 million people have been admitted to hospitals and the total cost of approximately RS 5,48 billion (US$75.95 billion). Pradhan Mantri Jan Arogya Yojana ◊ All health education and training services are about service tax exemptions. ◊ increase in tax leave in accordance with Section 80-IB for private health care providers in the German metro for at least 50 bed hospitals. ◊ 250 per cent of the deduction of authorised expenditure on operational technology is provided by health services such as tele medicine, remote radiology. The artificial heart is exempt from the basic custom levy at 5 per cent. ◊ income tax exemption for 15 years for domestic medical technology products. ◊ The benefit of section 80-IB has been extended to new hospitals with 100 beds or more that are set up in rural areas; such hospitals for 5 years are entitled to a 100% deduction of profits. Tax incentives Source: Aranca Research, News Articles ◊ The Union Cabinet has approved the creation of the National Food Mission (NNM) with a three-year budget of RS 85,217 crore (US$13.16 billion) to monitor, control, set targets and direct nutrition-related interventions in ministries. ◊ The programme aims to reduce the level of stunt, food, anaem and small birth infants. ◊ This programme is expected to benefit more than 100 million people; and all states and counties will be included in the programme. ◊ In May 2018, the signed a $200 million deal with the World Bank for 315 districts across India, as part of the National Food Mission (POSHAN Abhiyaan). National Food Mission 22. For updated information visit www.ibef.orgHealthcare22 SUPPORT POLICY AND GOVERNMENT INITIATIVES ... (2/4) Source: Aranca Research, News Articles ◊ The first Indian Air Dispensary, which is based in a helicopter, will be launched in the north-east, and the Ministry of Development of the North-East Region (DONER) has already contributed €25 (US$3.82 million) to its funding. Innovation ◊ In principle, the Committee for Medicinal Products (DCC), the Government of India, has in principle approved a new category of drug above the counter (OTC), which helps save patients time and money. OTC MEDICINES ◊ Incentives and tax holidays are offered to hospitals and outpatient clinics providing medical travel facilities. Older citizens over the age of 80 will be allowed to deduct US$491 in medical expenses if they are not covered by health insurance. ◊ The Ministry of Health and Family Welfare has approved the creation of the National Health Stack (STN). Union countries and territories have been provided support under the National Health Mission (NHM) as part of the Programme Implementation Plan (PIP) to create a reliable, uninterrupted and high backbone network at high speed. Tele-medicine initiatives ◊ In March 2018, the Indian Union Cabinet approved the continuation of the National Health Mission with a budget of RS 85,2 crore (US$13.16 billion) from 1 April 2017 to 31 March 2020. National Health Mission (NHS) ◊ In June 2018, the Government of India launched a register with standardised, credible and up-to-date geo-spatial data from all public and private health services called the National Health Resource Repository (NHRR). ◊ India has bilateral relations with 53 countries in the health sector since August 2018. This international cooperation will encourage joint initiatives for the development of the human beings in health, training, exchange of experts, exchange of information, capacity building and technical support in the establishment of laboratories/hospitals and research. Recent initiatives ◊ The General Controller of Drugs in India (DCGI) has proposed that a single window system be prepared for start-ups and in-in-in-demand in-demanders seeking approvals, consents and information on regulatory requirements. One window system 23. For updated information visit www.ibef.orgHealthcare23 SUPPORT POLICY AND GOVERNMENT INITIATIVES ... (3/4) Source: Union budget 2018-2019 ◊ Under the Union budget for 2018-19, allocation to the Ministry of Health and Family Welfare increased by 11.5 per cent year-on-year to €52,800 (US$8.16 billion). ◊ In August 2018, the Government of India approved the Ayushman Bharat-National Health Protection Mission as a centrally sponsored scheme, contributed by both central and state governments at a ratio of 60:40 for all countries, 90:10 for the hilly north-east and 60:40 for the territories of the Union under legislation. Center 100 % for the territories of the Union without legislation. ◊ The National Health Protection Scheme is the world's largest government health care program, which is expected to benefit the country's 100 million poor families by providing coverage of up to 5,000 (US$7,723.2 per family per year for secondary and tertiary hospital care). ◊ The government allocated 1,200 euros (US$185.36 million) to the 2017 National Health Policy, under which 150,000 health and wellness centres will provide healthcare closer to people's homes. 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Older citizens over the age of 80 will be allowed to deduct US$491 in medical expenses if they are not covered by health insurance. ◊ The Ministry of Health and Family Welfare has approved the creation of the National Health Stack (STN). Union countries and territories have been provided support under the National Health Mission (NHM) as part of the Programme Implementation Plan (PIP) to create a reliable, uninterrupted and high backbone network at high speed. Tele-medicine initiatives ◊ In March 2018, the Indian Union Cabinet approved the continuation of the National Health Mission with a budget of RS 85,2 crore (US$13.16 billion) from 1 April 2017 to 31 March 2020. 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