



# PhRMA Annual Press Conference

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# Japanese Policy Changes Have Fostered Patients' Access to New Medicines

- Thanks to the transformation of the PMDA, pricing stability, and predictability, innovative medicines have become accessible to Japanese patients much more quickly
- Pro-innovation policies such as price maintenance premium and sakigake system by the Japanese government have yielded positive results
- Also, we have seen an unprecedented wave of innovative medicines that allow doctors to treat devastating diseases like cancer and hepatitis C

# Improved conditions drive innovation

## 2010

- Introduction of innovation premium, which exempts certain innovative drugs from any price reduction under the biennial NHI price revisions for the duration of the patent<sup>1</sup>

## 2011

- PMDA creates Pharmaceutical Affairs Consultation on R&D Strategy, to consult on new products in: regenerative medicine, rare diseases, cancer, pediatrics<sup>2</sup>

## 2012

- PMDA begins to accept clinical trial data from South Korea and China-based clinical trials<sup>3</sup>

## 2013

- PMDA announces goal to double staff by 2020 in order to speed up drug approval process<sup>2</sup>

## 2014

- MHLW announces Sakigake designation system for fast-track review<sup>4</sup>

## Observed Improvements

In 2014, the submission gap was **21 months shorter** than it was in 2010<sup>7</sup>

From 2009 to 2014 the number of approved innovative therapies in Japan **increased by 93%**<sup>6</sup>

Number of medicines in development increased from **619 in 2009 to over 1,200 in 2015**<sup>5</sup>

# Innovative Medicines Have Increased Survival Rates in Japan



## Cancer

New therapies have contributed to significant declines in cancer death rates in Japan since its peak in 1995.



Today,  
**3 out of 5 people**  
 diagnosed with cancer  
 in Japan survive  
 at least 5 years<sup>1</sup>

## Percent Decline in Cancer Mortality Rates Since 1995

1995 to 2013 – All Cancers<sup>2</sup>

1995 to 2013 – Various Cancers in Japan<sup>2</sup>



USA

-24%



Japan

-20%



Germany

-20%



United Kingdom

-20%



-12% Colon



-45% Stomach



-10% Lung



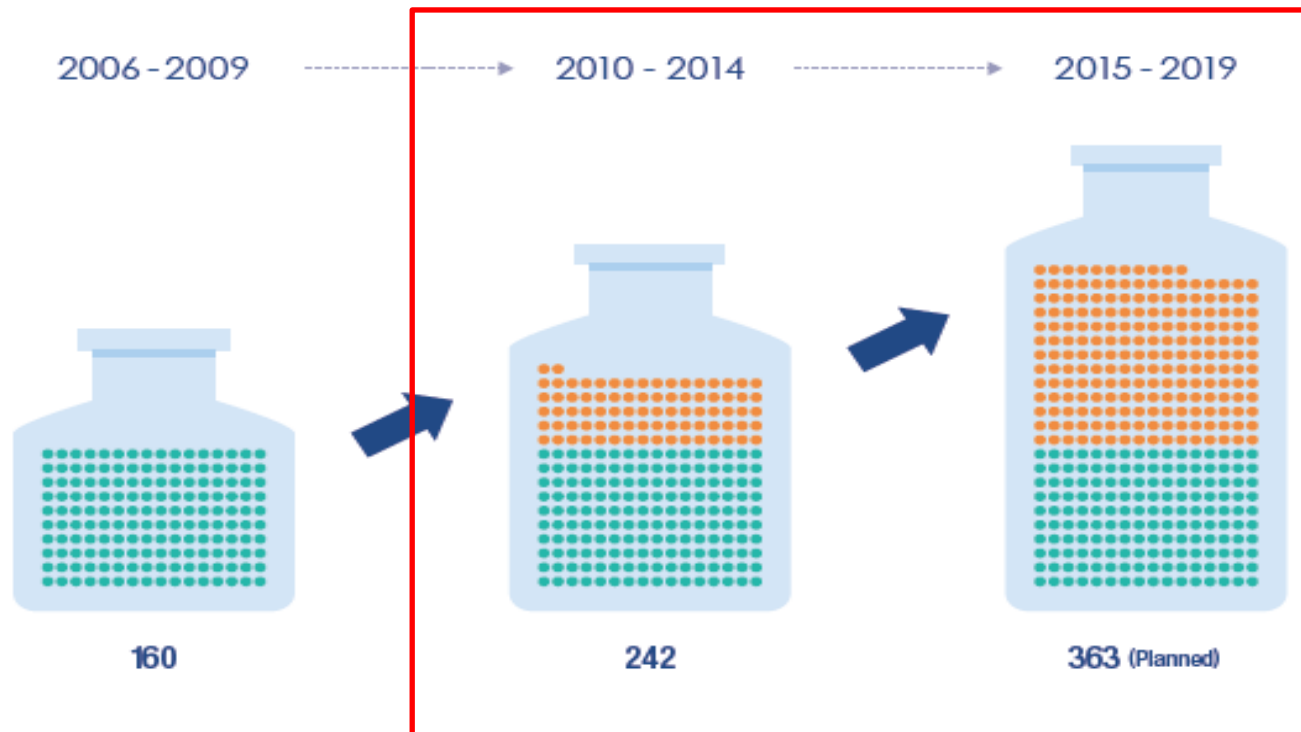
-11% Lymphomas



-22% Leukemia

# Full Benefit Still in Front of Us in Japan

Sharp increase in the number of drugs submitted for regulatory approval - more than double<sup>\*1</sup>



\*1 27 companies responded on new drugs that have been submitted or will be submitted for regulatory approval in Japan between 2006-2019 (Excludes drugs developed at the request of MHLW)

# Continued increase in investment in clinical development across Japan

**825** (+21% since 2013)

CLINICAL TRIALS\*

**18,095** (+55% since 2013)

SITES\*\*

**16+**

THERAPEUTIC AREAS

# of clinical trial conducted



- 
- |                             |                         |
|-----------------------------|-------------------------|
| Allergy                     | Infectious Disease      |
| Cardiology                  | Musculoskeletal Disease |
| CNS                         | Oncology                |
| Dermatology                 | Ophthalmology           |
| Endocrine Metabolic Disease | Respiratory Disease     |
| Gastroenterology            | Urology                 |
| Hematology                  | Rare Diseases           |
| Immunology                  | Others                  |

# The Biopharmaceutical Sector in Japan Has the Potential to Become the Largest Investor

Share of Business R&D by Industry<sup>1,2</sup>



USA



EU

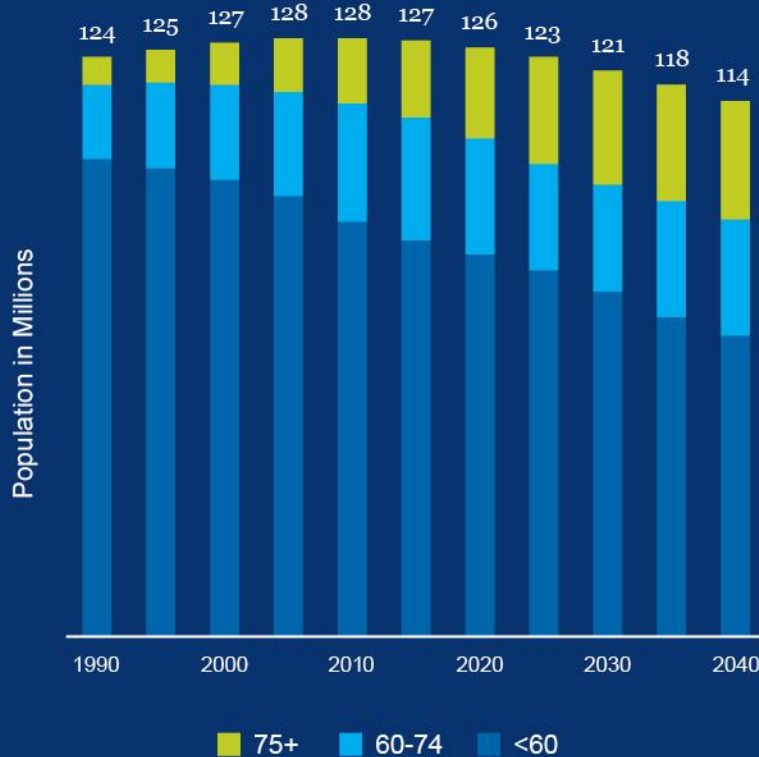


JAPAN

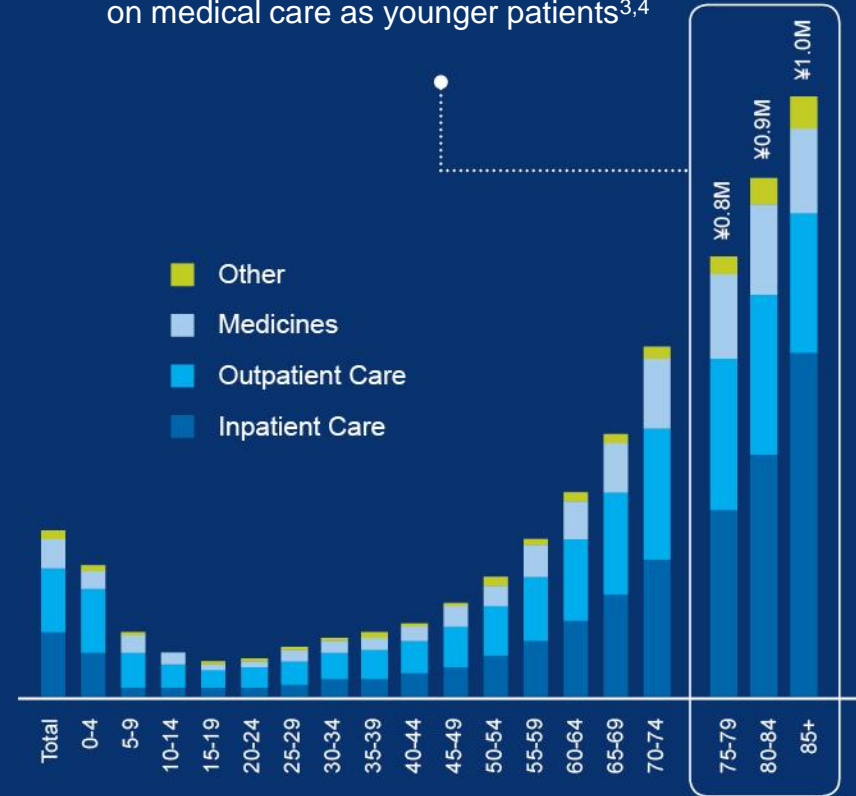


# The Aging Population in Japan Is Straining the Japanese Health Care System

The elderly population is expected to make up over **20% of Japan's population by 2040<sup>1</sup>**



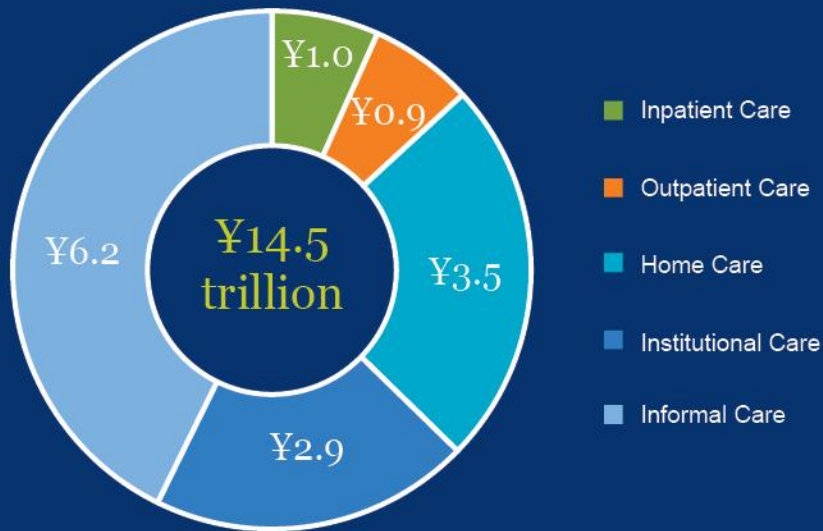
Elderly patients spend per capita **4 times the amount of money** on medical care as younger patients<sup>3,4</sup>





# The Needs to Continue Investing in Innovation To Develop New Medicines

In 2014, the societal cost of dementia was ¥14.5 trillion, nearly 3% of Japan's GDP<sup>1</sup>



**100,000**

The number of people quitting their jobs each year to care for sick family members<sup>1</sup>

**~50%**

The percentage of the societal care cost for dementia that is borne by families<sup>1</sup>

**30 months**

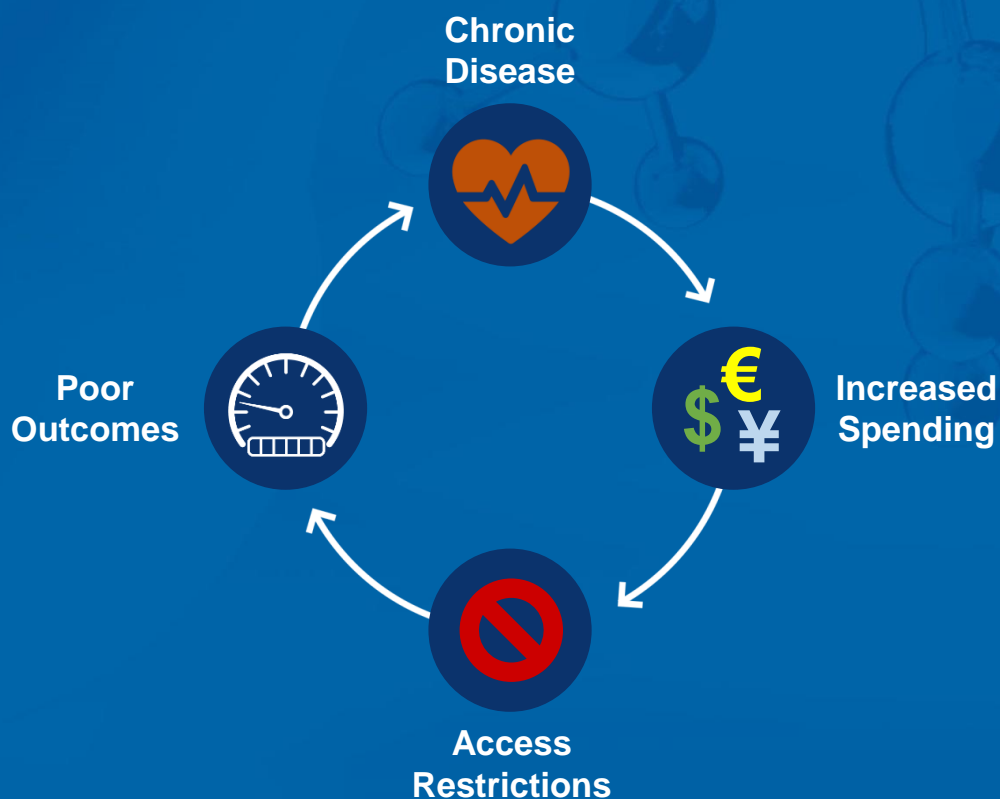
The amount of time spent in nursing home care per patient that could be delayed if currently available medicines were used for at least 9 months<sup>2</sup>

By 2060, the projected societal costs of dementia are estimated to be

**¥24.3 trillion**

# Vastly Different Health Care Systems with Some Common Challenges

Innovation Medicines Can Be Part of the Solution, but...



*Today's medicines are dramatically different from the medicines of a decade ago, but the way countries plan for, regulate, and fund innovation has not kept pace*

# Uncertainty and Unpredictability in the Japanese Marketplace



## Japan Biopharma Innovation



### Innovation is harder and more costly

- Per-patient clinical trial costs in Japan are two to six times higher than anywhere else in the world<sup>1</sup>

### Investments in innovation are increasingly risky given the unpredictability of the Japanese market

- The innovation premium has not yet been made permanent<sup>2</sup>
- Potential introduction of annual price revisions will make R&D investment and drug launch in Japan less attractive<sup>3</sup>
- The stagnant Japanese economy is a risk to future investments in health care

### Challenges exist impeding patient access

- “Optimal Use Guidelines” are introducing uncertainty in the new product adoption process
- HTA programs that impose cost-effectiveness at the point of listing new drugs threaten to undo progress made minimizing the submission gap<sup>4</sup>

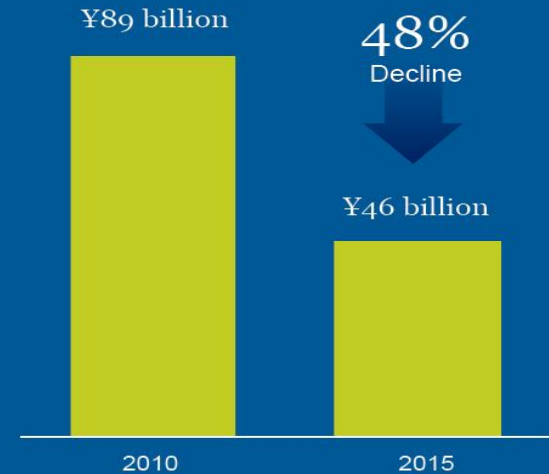
# Investment in Japan Would Become Even More Risky

As costs to develop a medicine has increased by 1/3<sup>rd</sup>,  
Average peak sales per medicine have been halved since 2010

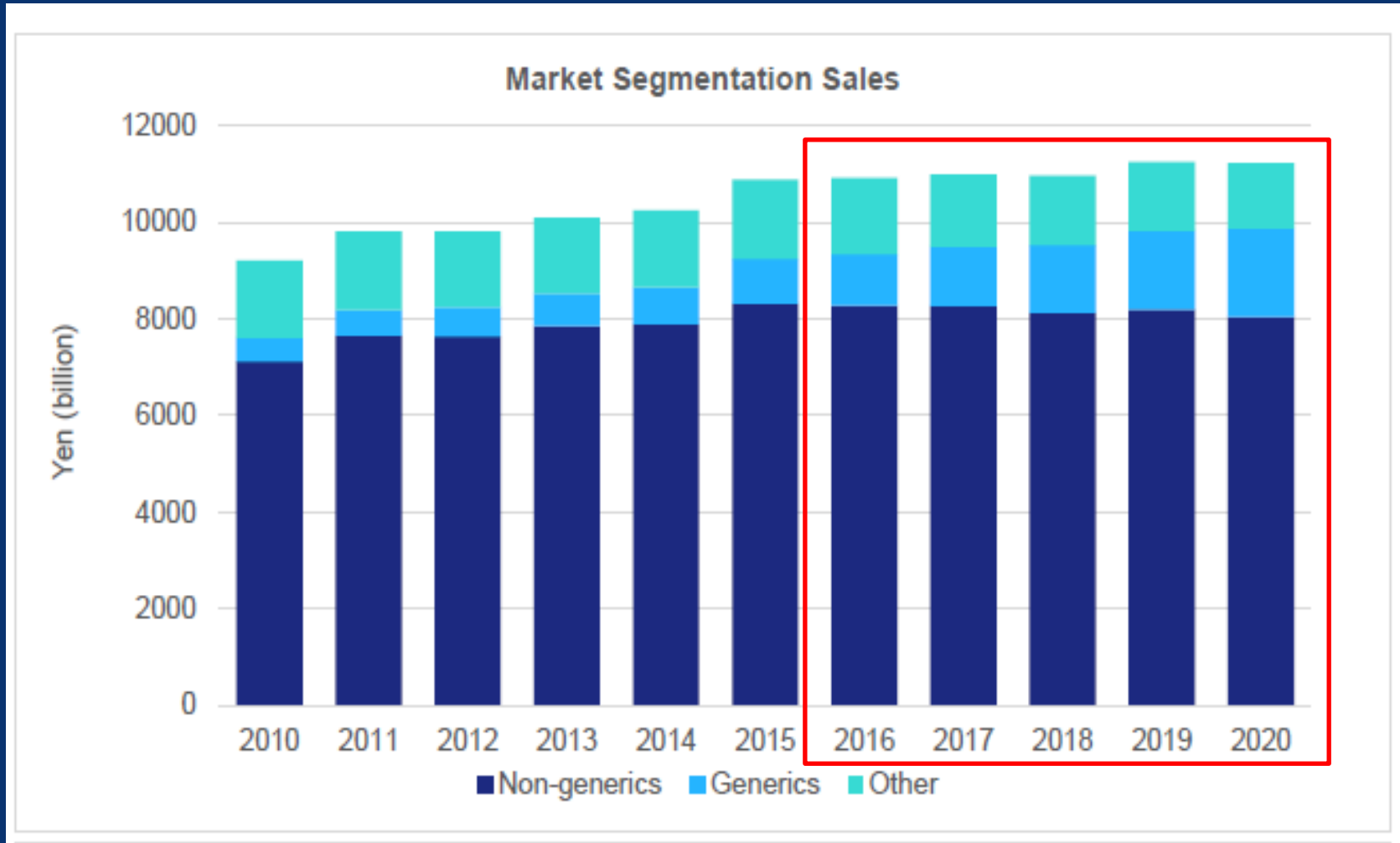
Since 2010, the average cost  
of developing a novel therapeutic has  
**INCREASED BY 33%...**



...While at the same time the average  
peak sales per asset has  
**DECREASED BY 48%**



# Spending on pharmaceuticals in Japan will remain flat over the next five years



# Japanese Pharmaceutical Prices Fell Below the EU(\*) average in Recent Years

Listed year	2011	2012	2013	2014	2015	2016	Total
Median of the ratio (Japan to Europe)	1.13	1.25	1.03	0.80	0.80	0.89	0.99
Number of products	28	18	28	27	26	19	146

\* Incl. UK, Germany and France

# Drastic Change in Drug Pricing could Lead to Risk

## For the Overhaul of the Drug Pricing System

### For the Overhaul of the Drug Pricing System

December 20 2016

Innovative and highly expensive drugs have been appearing in recent times, but given the inability of the current drug pricing system to handle such drugs with flexibility there is concern over the impact on the national burden and health insurance finances.

With a view to achieving a 'reduction in the national burden' and 'qualitative improvement of healthcare' for the benefit of the public through combining the 'sustainability of universal coverage' with the 'promotion of innovation', the following initiatives shall be taken to overhaul the drug pricing system with close attention given to the PDCA cycle.

#### 1. Overhaul of the drug pricing system

(1) To facilitate a response to changes in the circumstances following NHI listing and ensure the prompt handling of drugs achieving market expansion over and above a certain level following the addition of indications etc., the price of such drugs shall be revised four times a year taking maximum advantage of new drug listing timings.

(2) To control the national burden through the timely reflection of market prices in NHI drug prices, all products shall be subject to an annual drug price survey and their prices revised on the basis of the results.

Accordingly, in addition to the current biennial drug price survey, a survey shall be conducted on major operators etc. during the intervening year as well and the prices of products with significant price discrepancies (see Note) shall be revised.

Note: A conclusion on the specific details shall be reached during 2017.

In addition, the accuracy of the results, the methodologies used and other matters concerning the drug price survey shall be verified. With reference thereto the revision of the survey process shall be discussed and a conclusion reached during 2017.

(3) To encourage the development of innovative new drugs, the premium to promote new drug development and elimination of off-label use shall be subject to a zero-based overhaul. In conjunction, cost-effectiveness assessments shall be introduced on a full-scale basis into drug pricing, including provision for the price increase of drugs given a high cost-effectiveness rating. This and other measures shall aim to ensure the

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of innovation through the proper identification of genuinely effective drugs while ensuring adequate investment in R&D.

In addition, for the full-scale introduction of cost-effectiveness assessments, with reference to expert knowledge, the modality for the conduct of the assessments by various organizations and frameworks with an independent standpoint shall be discussed and a conclusion reached during 2017.

Initiatives to be taken alongside reform

The accuracy and transparency of drug pricing formulae shall be fully assured. In addition, with consideration given to information regarded by pharmaceutical firms as confidential, measures to clarify the basis of drug price calculations and promote transparency of the drug pricing process shall be discussed and a conclusion reached. In addition, the foreign average price adjustment method for high-cost drugs etc. in which the foreign average price is used shall be improved through more accurate identification of the foreign price with reference to system variations.

In addition, the actual business conditions of parties affected by the drug pricing reform shall be verified and actions to take where necessary based on the findings shall be discussed and a conclusion reached.

In addition, to reform Japan's pharmaceutical industry from the current long-listed product-model into a structure bearing greater drug discovery capability, measures to increase R&D support for innovative biologics and biosimilars, support venture capital and promote market competition among generic manufacturers shall be discussed and a conclusion reached.

In addition, to ensure stable drug supplies, greater efficiency in distribution shall be achieved with reference to the actual business conditions of operators while taking into account efforts to improve distribution practices and taking appropriate action to establish a profit structure in line with the market environment. To facilitate appropriate price formation, effective measures to promote single-product, single-price transactions and early settlements in particular shall be discussed and a conclusion reached.

(5) Measures to ensure the prompt delivery of novel health technologies with an established reputation to patients shall be discussed with reference to their cost-effectiveness.

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# Conclusion

## What is at stake?

- Japanese patient access to the newest medicines (drug lag)
- Japan's reputation as a pro-innovation and predictable investment destination
- Potential for economic growth in sector
  - ✓ R&D investment
  - ✓ Successful move up the innovation value chain for domestic companies
  - ✓ More jobs

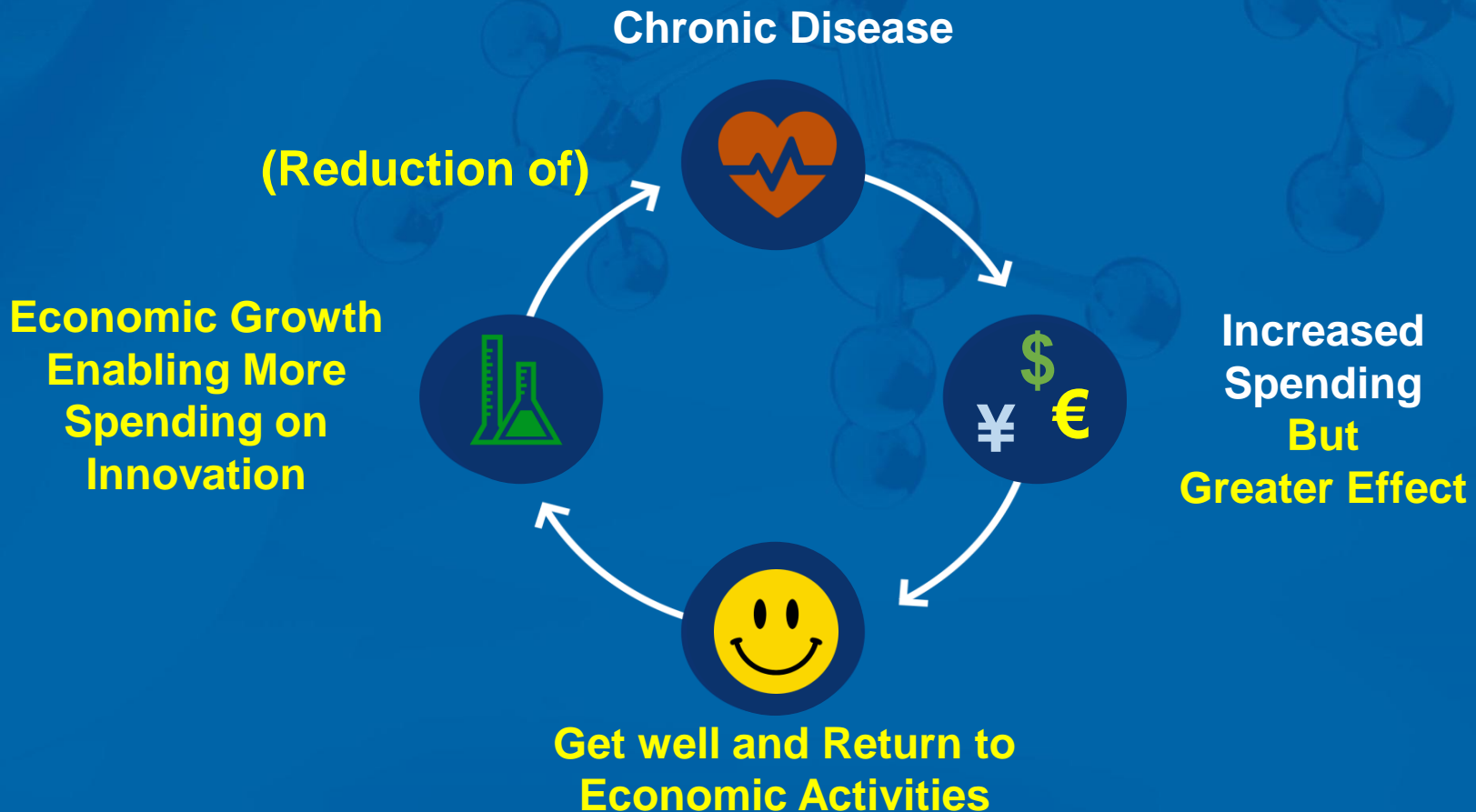


# How Can We Address Total Health Care Costs?

- To maintain the Japanese healthcare system, we must consider financial stability of the system
- At the same time, here still exist significant unmet medical needs and we might be able to treat/cure those moving forward
- We, PhRMA believe that we need to strike a balance between...

**Sustainability of better outcomes,  
better access, and continued innovation**

# The Need to Seek a New Health Care System to Keep Pace With Innovation



# Conclusion

**Challenges: Japan has the highest proportion of older adults in the world, increased instance of chronic disease, and cost pressures**

- ✓ Key challenge is finding the correct balance between pro-innovation policies and cost containment
- ✓ Major reforms undertaken too quickly and without consultation with relevant stakeholders may yield unintended consequences

# Conclusion

**Goal: For the Japanese government to achieve goals, PhRMA is committed to**

- ✓ Continue to provide Japanese patients with the world's most innovative medicines in the earliest timeframe
- ✓ Strongly support efforts to build upon recent successes and maintain the long-term stability of Japan's world-renown healthcare system
- ✓ Focus on ensuring that the Japanese biopharmaceutical sector achieves its full potential

# Conclusion: Reform to the System Must Involve Stakeholders

- Sweeping changes to the drug pricing system -- under consideration
- Rationale for contemplated changes clear -- process and outcome remain unclear
- Comprehensive reform of this magnitude -- only succeed if all stakeholders, including Pharmaceutical industry, are involved in a meaningful way

**PhRMA is willing to work with the Japanese government proactively to achieve mutual goals**