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Need for policymakers to revisit PPO 2.0 from patient's perspective

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PPO 2.0 needs to be rationalized as per the public demand, by making high-risk medical devices accessible to patients



The Government of India has recently amended its Public Procurement Order (PPO) 2017 in order to promote Make in India and make the country self-reliant. The concept of Class-I, II and non-local suppliers was also introduced, based on which the suppliers would get preference in government purchases of goods and services.

This latest revision raises several questions regarding the need of an enabling policy environment which encourages more investment in India and improves India's rank in the 'ease of doing business' index.

The changes in PPO 2.0 reflect the need for India to become 'Aatmanirbhar' as companies with less than 20 per cent of local content in their goods or services would not able to participate in the government tenders.

The move also questions the accessibility of the high-end medical devices which play a key factor in improving patient outcomes.

Discussing the role of the new generation lifesaving medical devices, Dr. Gajendra Singh, Public Health Expert, stated, "The government's decision to modify the public procurement norms to give maximum preference to companies whose goods and services have 50 per cent or more local content to promote 'self-reliant India', has highlighted how patients would end up bearing the brunt since they would not be able to access the high risk medical devices in government hospitals. This showcases the need to meet accessibility challenges which are prevalent in the Indian healthcare system. India's import dependency on other countries for medical devices explains how there is a dire need to fill the infrastructural gaps and build capacity in ensuring quality healthcare for all. We need to think long term and have a vision in place."

Another major setback is the addition of a reciprocity clause in its Public Procurement Order, which states, quaternities of countries which do not allow Indian companies to participate in their government procurement for any item, shall not be allowed to participate in government procurement in India for all items related to that nodal ministry/ department, except for the list of items published by the ministry/ department permitting their participation.

The PPO 2.0 needs to be rationalized as per the public demand, by making high-risk medical devices accessible to patients. A clause about the 'local content' with no due diligence required on production capacity and financial status of the domestic manufacturers might make the innovative high-end medical technology inaccessible in government hospitals.

Expressing his concerns on the impact of PPO 2.0 on patients, Dr. Sanjiv Kumar, *Chairperson, Indian Academy of Public Health, Indian Alliance of Patients Groups, stated,* "India needs to strengthen its health infrastructure and tread on the path of medical technology innovations and scale up to save and improve patients' lives rather than retreating back due to Covid-19 setback. Our policymakers need to revisit the amendments in PPO 2.0 from a patient's perspective. There is a need to improve limited patient access to appropriate medical treatment by using available technologywithin India and in other countries. The government must increase public expenditure on healthcare and exploit technology."