

## **Overview of Key Amendments to the Regulation of Medicine Prices in Uzbekistan**

On 12 May 2025, the Minister of Health of the Republic of Uzbekistan (the “**Uzbekistan**”) issued the Order “On Amendments and Additions to the Order ‘On Approval of the Regulation on the Procedure for Accounting Medicine Prices within the Reference Pricing System’” No. Order-3242-1 dated 12 May 2025 (the “**Order No. 3242-1**”).

Below is an overview of the key changes introduced to the regulation of the reference pricing for prescription medicines as set forth in the Order No. 3242-1.

### ***Deregulation of prices to OTC medicines***

Pursuant to the Order No. 3242-1, in the Regulation “On Approval of the Procedure for Accounting Medicine Prices within the Reference Pricing System” (the “**Regulation**”), approved by the Order of the Minister of Health of Uzbekistan No. Order-3242 dated 10 June 2020, the term “medicine” has been replaced with “prescription medicine.” As a result of these changes, the Regulation now governs prices solely for prescription medicines.

### ***Update of the List of Reference Countries***

In accordance with the Order No. 3242-1, Annex No. 2 to the Regulation, which contains the list of reference countries (the “**List**”), has been revised.

Specifically, the List now excludes the following countries: the Republic of Tajikistan, the Republic of Slovenia, and the Kyrgyz Republic.

At the same time, the List has been supplemented with the following countries: the Arab Republic of Egypt, the Republic of Turkey, and the Republic of Romania.

### ***Introduction of an Alternative Procedure for Price Confirmation in the Absence of Data from Reference Countries***

The Regulation has been supplemented with a provision establishing an alternative procedure for confirming prices of imported prescription medicines when price information is unavailable from two or more reference countries.

In such cases, the applicant must provide an export customs declaration issued in the country of manufacture. If the declaration does not indicate the value of the produce or if the legislation of the country of origin does not require an export declaration, an alternative replacement document may be submitted. Specifically, such a document may be an agreement between the manufacturer and the distributor, provided the agreement is registered in the country of origin and includes the following information:

- the name and details of the exporter and importer,
- the value and quantity of the goods imported into the customs territory of Uzbekistan.

### ***Introduction of an Automatic Indexation Mechanism for Maximum Prices***

In accordance with the Order No. 3242-1, the maximum prices of imported prescription medicines in the register of maximum prices during their registration or re-registration are subject to automatic indexation to the national currency of Uzbekistan. The indexation is performed twice a year – on **1 January and 1 July** – based on the official foreign currency exchange rate set by the Central Bank of Uzbekistan.

Automatic indexation applies only to medicines whose last recorded maximum price has increased by at least 3% as a result of an increase in the foreign currency exchange rate relative to the price of the medicine in the national currency.

If the increase in the foreign currency exchange rate causes the last recorded maximum price to rise by **more than 5%**, automatic indexation is carried out **regardless of the scheduled dates** of planned maximum price indexation (1 January and 1 July of each year).

### ***Revised Terms and Grounds for Re-registration of Maximum Prices for Medicines***

According to the amendments, an application for re-registration may be submitted **no earlier than six months** from the date of the initial registration of the maximum price.

The revised Regulation stipulates that an application for re-registration of maximum prices may be submitted no earlier than six months from the date of the maximum price registration. The applicant is required to attach supporting documents specifying the particular reasons for the price increase.

Furthermore, the Order No. 3242-1 revised the grounds for re-registration of maximum prices for prescription medicines. The updated Regulation provides that re-registration of maximum prices before the established six-month period is allowed exclusively in the event of force majeure circumstances arising in the country of manufacture of the respective medicines.

### ***Introduction of a Calculation Form for the Selling Price of Domestic Medicines***

In accordance with the Order No. 3242-1, a new Annex No. 1 has been added to the Regulation, establishing the form for calculating the selling price of domestic prescription medicines. The form is structured according to the main cost categories and includes the following elements:

- the cost price of the medicine, detailed by its constituent components,
- other expenses, including administrative costs, promotional expenses, operational, and financial costs,
- the total expenses line, calculated as the sum of all specified costs,
- the net profit margin expressed as a percentage,
- the calculation of the retail price per packaging unit of the medicine – both excluding and including VAT.

### ***General Amendments to the Regulation***

*Expanded Obligations of the Pharmaceutical Industry Development Agency Regarding the Publication of Information on Maximum Prices*

According to the amendments introduced by the Order No. 3242-1, the Pharmaceutical Industry Development Agency is now required to continuously publish this information on registered and re-registered maximum prices on the Unified Portal of Interactive Public Services, in addition to the official website of the Pharmaceutical Industry Development Agency.

*The Maximum Share of Other Expenses Increased from 1% to 2%*

The Regulation was amended to revise the procedure for applying maximum trade margins in wholesale and retail sale of imported and domestic medicines, as well as the formula for calculating their purchase cost. Specifically, the "other expenses" (OE) component, included in the purchase cost, may now constitute up to 2% (previously 1%) of the contract price set under Incoterms CIP terms.

## **Priority Tasks Identified for Improving the Quality of Medical Services and Enhancing the Medical Education System**

On 7 May 2025, a video conference chaired by the President of Uzbekistan, Shavkat Mirziyoyev, was held to discuss issues related to improving the quality of medical services at the primary care level and specialized institutions, regulating the consumption of medicines, and enhancing the medical education system.

Following the conference, a number of regulatory legal acts were adopted to implement the measures discussed at the conference. Among them are the Presidential Decree of Uzbekistan “On Measures for the Consistent Continuation of Healthcare Reform through the Improvement of the System and Principles of Medical Service Delivery to the Population in the Republic” No. UP-88 dated 19 May 2025 (the “**UP №88**”) and the Presidential Resolution of Uzbekistan “On Additional Measures for the Implementation of Reforms in the Healthcare System” No. PP-185 dated 19 May 2025 (the “**PP №185**”), which provide for measures aimed at further development of the healthcare system.

According to the UP №88, inter alia, it is envisaged to introduce a new system of primary healthcare delivery, launch a new model for organizing the healthcare system as a pilot project, and increase the salaries of healthcare workers.

In turn, the PP №185 sets out, inter alia, the goals and objectives aimed at implementing the pilot project, optimizing the staffing structure of the primary healthcare level, and reorganizing district healthcare institutions.

*Further details on the measures aimed at reforming the healthcare system are provided below.*

### **Strengthened Control of Prescription and Consumption of Medicines**

During the conference, it was noted that international best practices prioritize the principles of evidence-based medicine, according to which only medicines whose efficacy and safety have been confirmed by large-scale clinical trials are approved for use.

At the same time, in Uzbekistan, medicines with unproven efficacy account for approximately 42% of total imports. In this regard, the President of Uzbekistan instructed the Ministry of Health to:

- exclude from clinical protocols medicines recognized internationally as ineffective or insufficiently studied,
- conduct an audit of the justification for antibiotic prescriptions in all medical institutions, with a primary focus on pediatric hospitals.

### **Measures Approved for the Phased Implementation of Structural Changes in the Healthcare System**

The President addressed issues related to improving primary healthcare, disease prevention, enhancing the qualifications of medical personnel, and improving the quality of treatment. A new model for organizing the healthcare system was approved, which includes the following key measures for the phased reform of the healthcare system:

- **Reform of the Primary Care.** The practice of concluding bilateral agreements between family medical teams and the assigned population will be introduced. Citizens will have the opportunity to freely choose their family doctor, and private medical institutions will be involved in providing medical care. The updated model of primary health care will be implemented in 2025 in the city of Samarkand, the Ishtikhan and Bulungur districts of the Samarkand region, as well as in one district of each of the other regions of the Republic. Starting from 2027, its implementation will be carried out gradually throughout the territory of Uzbekistan.

It is worth noting that, in accordance with the UP №88, the implementation of the updated model of primary healthcare in the city of Samarkand, as well as in Ishtikhan and Bulungur districts of Samarkand region, has been postponed from 2025 to 2026.

In execution of the UP №88, the Cabinet of Ministers of Uzbekistan adopted the Resolution “On Measures for the Implementation of the Pilot Project to Improve the Primary Healthcare System in the Republic” No. PKM-384 dated 20 June 2025 that provides for implementation of the pilot project for improving the primary healthcare system,

- **Guaranteed Medical Care Package.** Medical services and medicines included in this package will be fully covered by the state budget.

These measures were subsequently reflected in the PP №185 and were further elaborated in the Resolution of the Cabinet of Ministers of Uzbekistan “On the Approval of Guaranteed Volumes of Medical Care Covered by the State Budget of the Republic of Uzbekistan in Primary Healthcare Institutions” No. PKM-382 dated 19 June 2025,

- **Optimization of Staffing.** All primary care physicians and nurses will be transferred to full-time employment. The number of obstetrician-gynecologists in polyclinics will be doubled. A separate pediatrician position will be established for every 3,000 children,
- **Reorganization of District Healthcare Institutions.** District central polyclinics will be transformed into consultative and diagnostic departments within district hospitals, where specialized narrow-profile specialists will be concentrated. Seven large polyclinics serving more than 12,000 people will be reorganized, and 27 will be converted into smaller facilities,
- **Increase in Salaries for Medical Workers.** The base salary for a family doctor will be the equivalent of USD 500, and for a nurse — USD 300. An additional allowance of the same amount will be paid upon presentation of a qualification certificate. For active work in the mahalla (including prevention of complications, management of chronic diseases, early detection of cancer, myocardial infarction, stroke, diabetes), the salary will be further increased. The pilot implementation of this system is scheduled to begin on 1 July 2025 in 15 selected districts and cities across the regions of Uzbekistan. From 1 January 2026, this pilot project will be rolled out across the territory of the Samarkand region,
- **Simplification of the Disability Determination Procedure.** Starting from 1 June, a system for establishing disability without the involvement of medical advisory commissions will be implemented in the city of Tashkent and the Navoi region, and from 1 September – across the entire territory of Uzbekistan. Disability will be determined solely based on the conclusion of the family doctor and review by the Medical and Social Expertise Commission,

- **Financing of Reforms.** For the implementation of the new model in 15 pilot districts in 2025, UZS 285 billion has been allocated. Additionally, local authorities are required to allocate at least UZS 10 billion from local budgets.

### ***Comprehensive Measures on Modernizing Medical Care and Healthcare Financing Discussed***

During a conference, issues related to improving the efficiency of specialized medical care and enhancing its financing mechanisms were also discussed.

#### *Current Situation of Specialized Medical Care Reviewed*

A decision was made that in republican medical centers, only high-tech and complex surgical interventions will be performed, financed exclusively by the state budget.

#### *Enhancement of the “Electronic Referral” System*

The “electronic referral” system will be modernized. In particular:

- a **list of diseases** subject to referral through the electronic system will be approved,
- a **unified base tariff** for medical services will be established,
- after a referral is issued, patient information will be uploaded to a **unified digital platform** accessible to both public and private medical institutions,
- patients will have the opportunity to **independently select** a medical institution based on the available options.

A total of UZS **1.1 trillion** from the state budget is allocated for financing treatment under the electronic referral system in 2025. In this context, the digitalization of the healthcare system is reflected in the UP №88.

#### *New Five-Year Program to Combat Childhood Cancer Developed*

A five-year program to combat childhood cancer will be developed, similar to the existing national oncology program, with a budget allocation of at least USD 110 million.

As part of the program, an academic hub specializing in the diagnosis and treatment of childhood cancer will be established at the Center for Pediatric Oncohematology. International experts and leading specialists from foreign clinics will be actively involved in its activities.

In accordance with these measures discussed during the video conference, the Presidential Decree of Uzbekistan No. PP-186 dated May 19, 2025, “On Measures for the Implementation of the National Strategy of Uzbekistan on Combating Childhood Cancer for 2025–2030,” provides for the establishment of an International Academic Hub on Childhood Cancer in the form of a state institution, with the support of clinics from leading European universities.

In turn, the Resolution of the Cabinet of Ministers of Uzbekistan No. PKM-326 dated May 22, 2025, “On Measures for the Organization of the Activities of the International Academic Hub on Childhood Cancer,” establishes the operational framework for the International Academic Hub’s functioning.

#### ***Measures to Improve the Quality of Medical Education***

In order to enhance the quality of medical personnel training, the following measures were approved at the conference:

- Implementation of an independent knowledge assessment system for graduates of medical universities and colleges, as well as practicing doctors and nurses. For this purpose, a National Center for Medical Assessment will be established.
- Mandatory accreditation of all public and private medical institutions.
- Transfer of responsibilities for continuing medical education to public and private medical universities, specialized centers, and regional medical institutions.
- Introduction of dual education in the medical field. In this regard:
  - ❖ existing clinics will be transferred under the management of medical universities,
  - ❖ medical universities will be granted financial autonomy.

**Specific Instructions** Regarding Regional Medical Universities:

- Grant financial autonomy to medical universities in the Republic of Karakalpakstan, Fergana Region, and the city of Urgench,
- Transfer the clinics of medical universities in the Republic of Karakalpakstan, Bukhara, Samarkand, Tashkent, Fergana Regions, and the city of Urgench into the organizational structure of the respective medical universities,
- Assign management of medical activities in the departments of these clinics to the relevant university faculties,
- Hold the rectors of the medical universities responsible for the maintenance and equipping of subordinate institutions that serve as clinical bases.

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