Inquiry about research contributors for healthcare systems in the East Asia etc.

## Summary:

There is a promising research funded by METI of Japan about healthcare systems in the East Asia and some additional countries and this inquiry is seeking students who can contribute it by giving the latest information on each home country. The standard fee will be paid, if you attend a meeting (1.5 hour) at the University of Tokyo we and give your comments on your country's healthcare systems.

### Purpose:

To establish the Asia version's health data like the OECD health data for improving healthcare systems toward universal health coverage.

## Target countries:

We would like to collect medical/ health care information of each country: China, Korea, Singapore, Malaysia, Philippines, Thailand, Indonesia, Vietnam, India, Myanmar, Cambodia

Fees: about 10,000 yen for attending a meeting (1.5 hour)

# Conditions for the payment

- Attending a meeting in Jan. 2015
- Giving comments about some parts of data and items listed below
- Keeping cooperative relationships about this research (We hope for a possibility to contact you for this research, even after your coming back home via emails/calls)

### Meeting time:

Based on scheduling, but we hope we will have a meeting at the University of Tokyo during Jan. 2015

Due Date for application: Dec. 19, 2014

For more information or questions Chiaki Sato chiakist@pp.u-tokyo.ac.jp Collected data/items:

We would like you to collect the following items.

contents		required	interview		
1.Health systems, Healthcare industry(pharmaceutical and medical device market)					
As to health syste	As to health systems, the point is how developed/comprehensive the systems are (in terms of				
the people, medical services, medicine covered by the system). We would like to compare the					
countries in this re	espect.				
Public and priv	rate health insurance systems (targeted	0			
groups, coverage	, premiums and subsidies, benefit), health				
expenditure and	financing, the body of health insurance, the				
agency in charge, etc.公的・民間医療保険状況保険の人口カ					
バー率、保険内容	(対象者、保険財政、給付内容、監督機関)				
など					
Health facilities and workforce (hospitals, hospital beds,		0			
medical doctors,	nurses per 1,000 people)				
Pharmaceutical Affairs Law, Medical device Act, Post		0			
marketing surveillance, Registration requirements, Drug					
approval process, classification, Research and					
development/clinical trial 薬事制度薬事に関する規制法規、					
監督機関、研究開	発・治験など				
Market size (of new goods and pre-owned )医療関連市場規模		0	0		
…新品、中古品そ	れぞれについて				
Healthcare mark	tet forecast and outlook to 2020 医療関連市				
場成長予測					
Export and imp	ort (trade volume, major trading goods,	0			
partners) 輸出入	状況輸出入金額、主要輸出入機器など。医				
薬品に関してはわかりやすいが、医療機器に関しては分類に注					
意 (精密機器に属しているなど)					
Top products or t	Top products or therapeutic classes/categories by sales 需要				
の高い医薬品・医療機器					
税制	Custom (if export from Japan to the	0			
Taxation	country)関税…日本から対象国に輸出した				

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	場合				
	VAT 付加価値税				
医薬品•医療機	Main players (local vs. brand), market	0			
器企業	share				
Pharmaceutica	Number of companies (local,				
l/medical	international, distributors)				
device company					
Major industry g	roups/associations(pharmaceutical, medical				
device)主な業界団	日体医薬品、医療機器販売にあたり業界団体				
の実態を知る					
Supply chain, dis	stribution channels: distributors, regulation	0	0		
流通構造買い手	(ディストリビューター)、売買方法、規制、				
代理店を通す形が	一般的かどうかなど流通構造全般(新品、中				
古品ともに)ファ	イナンスの方法				
Regulation and	distribution of pre-owned(used and	0	0		
refurbished) med	lical device <sup>1</sup> :中古医療機器の規制と流通状況				
…中古医療機器は使用可能か					
Medical and pharmaceutical trade show(date, venue, total					
number of visitors)医薬品・医療機器見本市見本市の開催場					
所、時期、参加者など					
Stability of electric supply					
Reimbursement system: pricing policy, health technology		0			
	A)保険償還制度価格決定制度、医療技術評				
価など					
2. Health policy di	rections	l	l		
 薬事制度、医療技術評価などが将来的にどうなるか					
Healthcare reform	m, prospects and implications for HTA				
Promotion policy of medical industry, Hospital market		0	0		
trends, Social security policy (reform of medical insurance					
etc.)					
医療産業振興政策					
社会保障政策(医療保険制度改革など)					
3. Others					
5. Others					

<sup>&</sup>lt;sup>1</sup> In many countries, import and use of pre-owned devices is usually prohibited. However, device companies may claw-back and inspect devices and then sell them again. Or, in forms of rental or lease, pre-owned devices may be used.

医療機関情	Types of hospitals (general, specialized:	0	
云 療 機 舆 侑 報 Health	number, area of specialization)		
facilities			
facilities	専門病院状況大型専門病院数、当該病院の専		
	Number of physicians by types of hospitals:	0	
	by size of hospital, by private or public, by		
	general or specialized hospital etc.病院種別医		
	師数病院規模別、私立・公立別、総合病院・		
	特化病院別など		
	Major hospitals: number of beds,	0	0
	departments, physicians, in/outpatients,		
	revenue, growth, net profit)主要な病院知		
	名度、規模から絞った 3 病院程度についての		
	状況(病床数、診療科、所属医師 <sup>2</sup> など)		
	Foreign investment by business model <sup>3</sup> :	0	0
	regulation of limiting foreign investment to		
	medical sector ビジネスモデル(施設収入な		
	のかサービス収入なのか)別の海外資本の進出		
	状況主要な病院を中心に調査。病院への出資		
	規制、運営・建物への海外資本の割合など		
医師情報	Number of physicians graduating from		0
Physician	abroad (by country, if possible)留学情報留		
	学は一般的か、留学先、留学の時期など		
	Number of physicians by specialties 診療科別		0
	医師数		
	Medical association 医学会状况		
	Regulation concerning the practice of	0	0
	medicine for aliens (who have foreign		
	certification)外国人医師が医療行為を行えるか		
	免許の交付状況、外国の医師免許保持者が対		
	象国で行えること(医師のトレーニングなど)		
	Physician's salaries		
	Social status of physician		
	1	I	1

<sup>2</sup> 所属医師に見られる特徴(出身大学、診療科など)

<sup>&</sup>lt;sup>3</sup> There are two business models of hospital i.e. getting earnings by lending hospitals as establishment or by providing medical service.

Medical education (local language or English	
textbook)	