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Drug Supply 2.0

How to manage a disaggregated Pharmaceutical Supply Chain

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Collaborative study by ESB Business School and Camelot Management Consultants on the rising impact of 3rd Party Suppliers

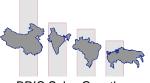
Pharmaceutical companies are seeking new ways to operate due to:

Increasing governmental influence and new payer models lead to reduced margins even with protected portfolios.





- ▶ The shift of sales growth to emerging markets (Pharmerging 17): While established markets show a one digit growth BRIC is expected to grow by more than 13 %.
- ▶ Rising complexity in R&D leads to a gap in the pipeline of new entities. Some companies struggle to replace the sales expiring and are forced to assess their cost structure.



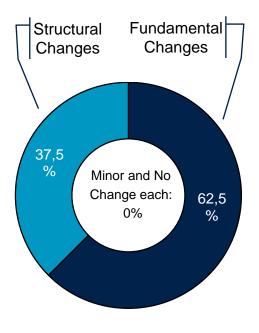
Net portfolio replacement



Aim and Method Identify the changes to be made within the pharmaceutical value chain to operate at lower costs, maintain revenues and serve new markets.

Camelot Management Consultants and the ESB Business School contacted 28 of global top 50 Pharmaceuticals for structured interviews.

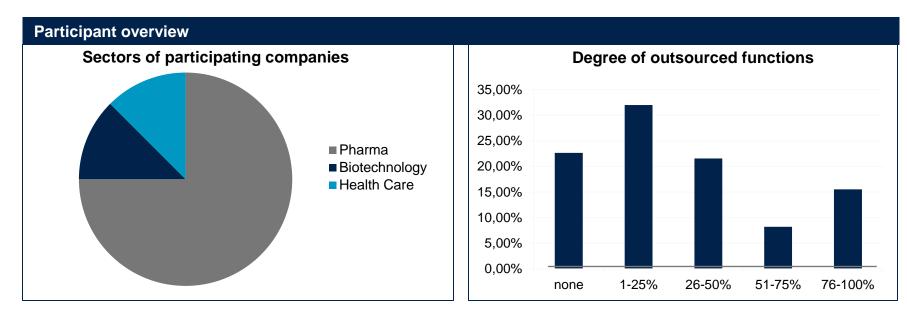
Q: Will the pharmaceutical supply chain face changes due to the outsourcing activities?







The participants base is focused on Pharma including Biotech showing a cross section of big and mid sized Corporations.



Country of origin: Headquartered within the industrialized markets (US, EU & Japan)

Geographical Scope: All interviewed companies are active on the world market

Average # of employees: 57.008 Full Time Equivalent





Executive Summary (1/2)

1

The rise of Pharmerging markets is leading to a fundamental change in the way the supply chain operates

- Pharmaceuticals concentrating on their core competence to reduce costs.
- Manufacturing and distribution of solid forms are considered to have the highest potential for low-cost production.
- Over 50 % of production volume is dedicated to third party manufacturing.
- The expected cost reduction is on average 19%.

2

Responsibility of third party management shifts from manufacturing towards supply chain management

- While influence of manufacturing departments is decreasing, the supply chain is expected to take on the role of the integrator within the supply network.
- Cost and delivery reliability are the main drivers for outsourcing.
- Collaboration in terms of planning, process improvement and quality management are considered to become part of the supply chain responsibilities.

3

The management of a third party network differs completely from managing own sites.

- Almost all Pharmaceuticals intend to manage their external supply network by objectives as in an own network.
- ▶ The contractual basis for management by objectives is mostly a regular KPI measurement.
- Only one in ten Pharmaceuticals already implemented a KPI system with their key service suppliers.
- Only a single participant has already built up a formal life cycle management for their third party suppliers.





Executive Summary (2/2)



Development of advanced information exchange

- All participants (97%) plan to share more information to collaboratively reduce interface costs.
- Mutually collaborative planning and replenishment are desired.

5

Supply security, quality and costs are the main drivers for evaluating the CMOs

- ▶ 75 % will apply KPIs concerning the supply security such as adherence to delivery terms or adherence to schedule.
- ▶ 72 % will apply KPIs concerning the costs such as the revised price, the offer price or the total cost of ownership.
- ▶ 62 % will apply KPIs concerning the quality such as classical quality KPIs, handling or compliance.
- Less than 50 % will apply KPIs concerning service and innovation.

6

Multi/Dual - sourcing is the preferred concept for supply security to avoid contract penalties and shortfalls

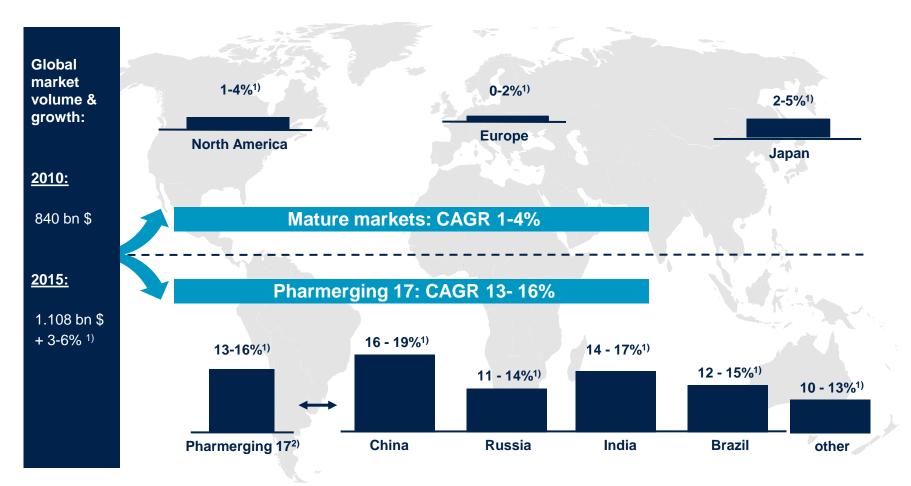
- Within the next years the pharmaceutical industry will establish more safety concepts (especially dual sourcing) resulting in termination of conventional contract penalties.
- ▶ 67 % of the interviewed companies will shift inventory ownership towards their CMOs.





Pharmaceutical sales

Market sizes and growth rates 2009 – 2015¹⁾ in billion US \$



Notes: 1) CAGR constant USD

2) China, Brazil, Russia, India, Venezuela, Poland, Argentina, Turkey, Mexico, Vietnam, South Africa, Thailand, Indonesia, Romania, Egypt, Pakistan, Ukraine

Source: IMS Health Market Prognosis September 2011





The current trends in the pharmaceutical industry create a strong necessity to act in order to secure mid-term success

Exceptional growth in Pharmerging 17

- Classic markets USA, Europe and Asia with increasing price pressure due to health care reforms
- Pharmerging markets chance to grow up to 15%³⁾
- Lower per capita spending demands lower price products - increasing pressure on COGS when entering these markets
- Increasing **import regulations** by Pharmerging 17 force direct investments or collaborations
- Greenfield investment to serve Pharmerging 17 markets locally are risky and unlikely due to low cost structure

Hurdles to maintain revenue & margins

- Only marginal new Phase III entities pipeline
- Most innovators deriving 44% of portfolio sales by top 3 mature products¹⁾
- Patent expiry in combination with generic competition endangers sales worth \$100b in the period from 2009 to 2015
- Termination of Phase III Innovations doubled between 2004 and 20091)
- Biotech innovators struggle for funding (due to reduced innovation rate²⁾⁴⁾)
- **R&D Cooperation** with in-licensing of development candidates
- Generics manufacturers use the low labor costs in **India and China** and increase the price pressure

Shift in market

Increasing cost pressure

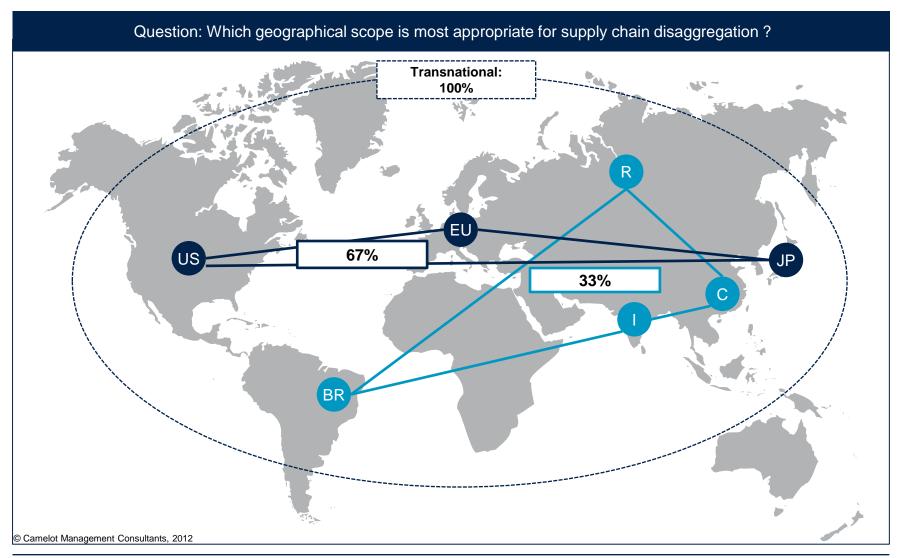
Established pharmaceutical companies must reshape their value chain!

Notes: 1) CMR 2010 Pharm. R&D Factbook 2) IMS Health biotech update 2007 3) Helvea 2010 "Off to new horizon" 4) the FDA approved just 17 new molecular entities and 2 biologic license applications in 2007, the lowest number recorded since 1983 (WorldBusinessResearch 2010); Camelot Analysis;



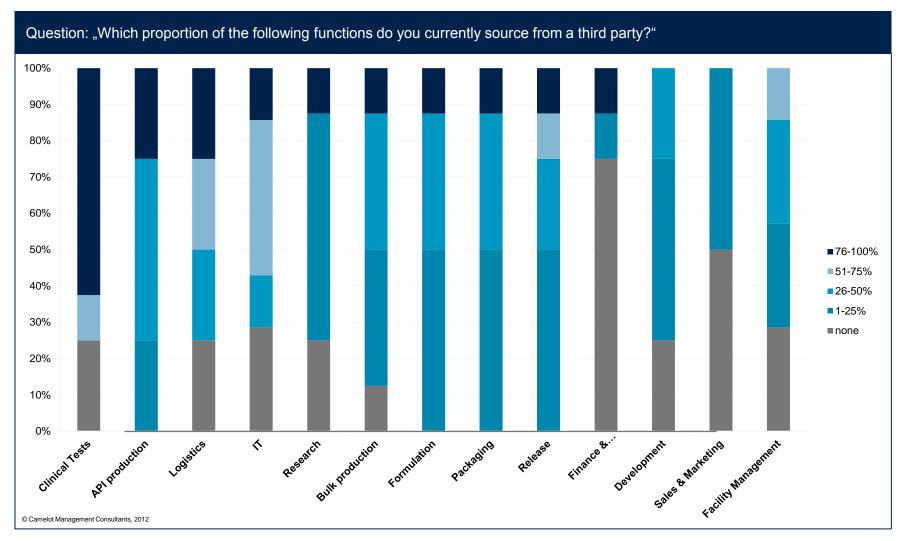


One third of the global pharmaceutical production is considered to be served from emerging economies





Pharmaceuticals react on the current circumstances with an increase of outsourcing efforts



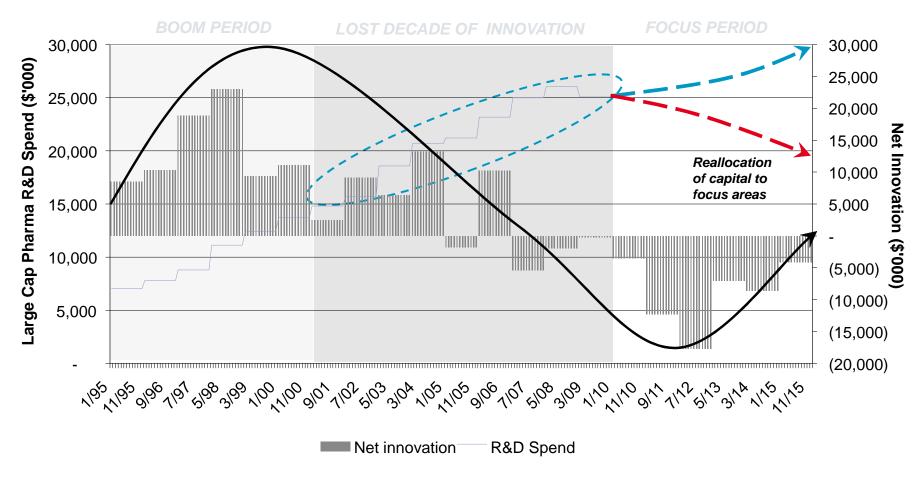




- 1 The changing environment of serving patients
- The changing world of Pharma's Business Segments
- 3 Which initiatives should be directed within the next 5 years



Pharmaceuticals repositioned their business models and started to allocate capital according to the change in business strategy



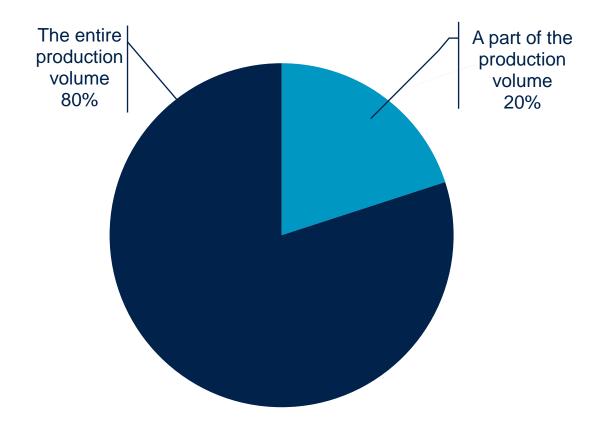
Note: Net innovation in a given year represents peak life cycle sales for each drug launched that year, less prior year sales for each drug expiring that year. Source: Goldman Sachs Research, FactSet, company data





In most of the new business models the role of CMO in Pharmaceutical is moving from peak sales mitigating to a strategic partner...

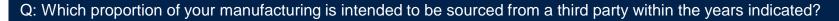
Q: Would you rather source a part of or the entire production volume of one product to a contract manufacturer?

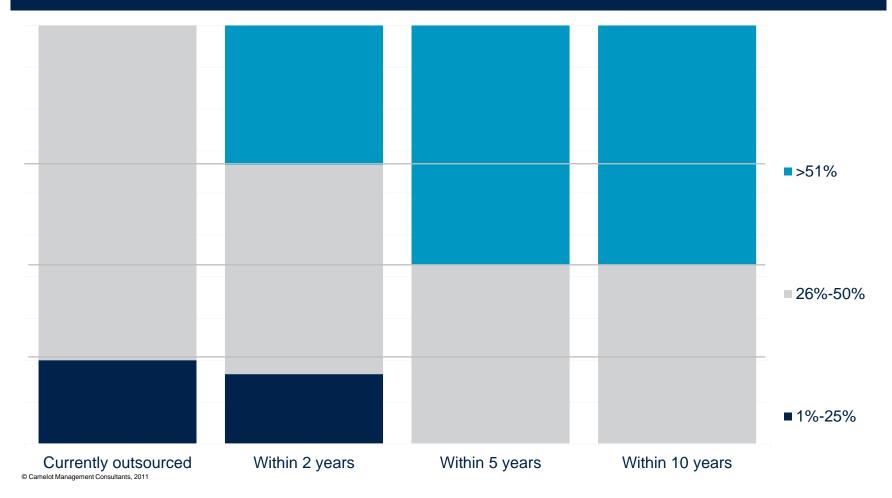






...supplying a big portion of the portfolio volume.

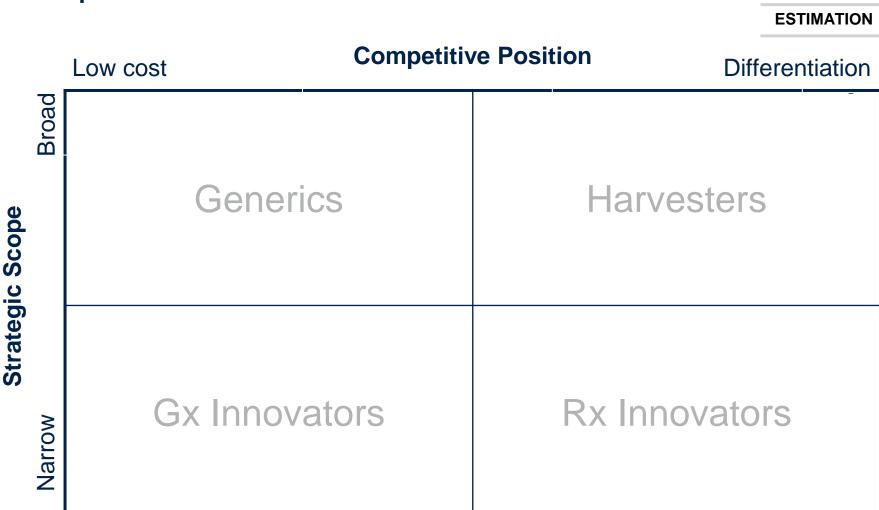








Turning away from the blockbuster strategy of the past decade PharmCos developed four different focus lines



Note: Estimated strategic scope by sales replacement rate, Competitive advantage by number of Phase III Pipeline products Source: company data





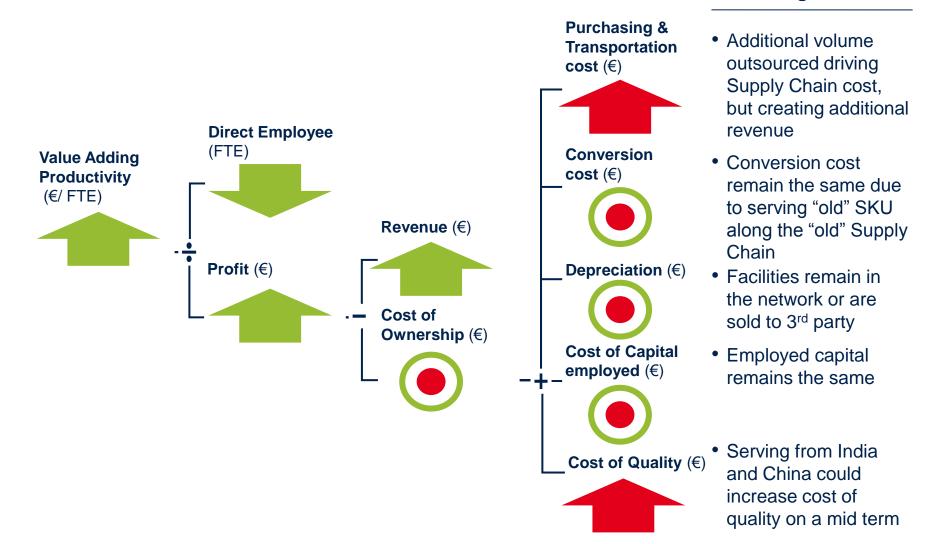
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What Harvesters do:

Diversifying the existing portfolio geographically and vertically Est. Changes





Expanding to BRIC MST means serving an increasing number of patients at low cost in more and more protective markets

CHINA

- The pharmaceutical market looks set to grow even further in the short-term, with the establishment of an Essential Medicines System.
- In October 2009, the NDRC reduced the prices of 2,349 drugs by an average of 12%.

INDIA

- ▶ The majority of the population is both rural and poor
- ▶ Established domestic industry, responsible for around 8% of world pharmaceutical production.
- ▶ Market is dominated by low price, domestically-produced generics.
- ▶ Relatively low per capita expenditure on pharmaceuticals.

BRAZIL

- Second most attractive BRIC market for pharmaceutical producers
- ▶ Controlled drug prices are growing at a rate below inflation levels.
- ▶ Price controls are not directly linked to consumption levels.
- Indirect tariff barrier to support domestic production

RUSSIA

- In population terms, Russia is a potentially vast market.
- ▶ Health spending is very low.
- Around 75% of the pharmaceutical market is supplied by imports.
- Domestic generic industry is sizeable.
- ▶ Local production of innovative drugs is negligible.
- Manufacturers are small and under-funded, often producing drugs with outdated equipment.
- Governmental influence on import drug pricing

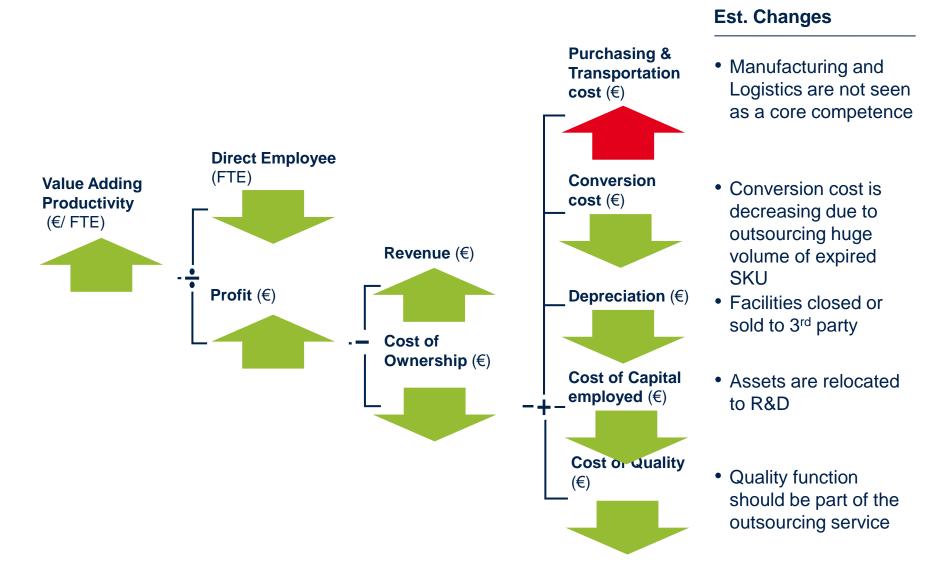
4000 capita¹) on Health per 1000 Expenditure 50 ဟ Population by 2025

Notes: 1) public and private spend pre capita 2008 Source: US Bureau of Consensus 2008, PR Newswire, WHO;





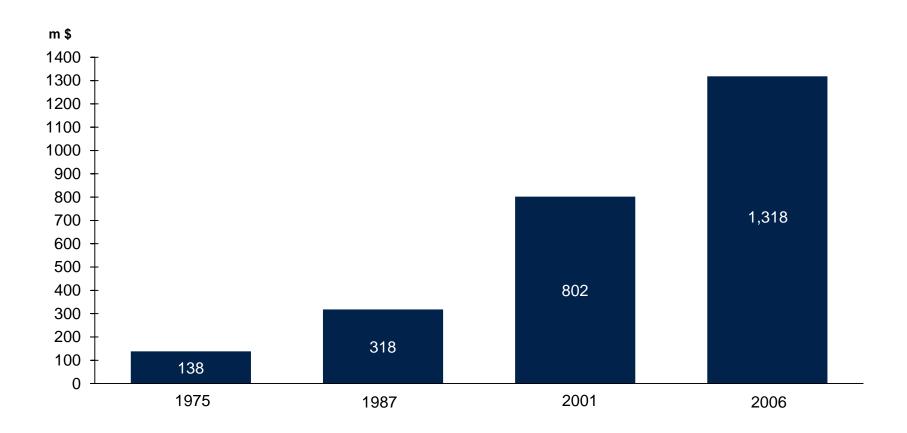
What Rx Innovators do: Divesting the Supply Chain to invest in R&D





Rx Innovators enable themselves to cope with these huge investments...

Estimated full cost of bringing a new chemical or biological entity to the market

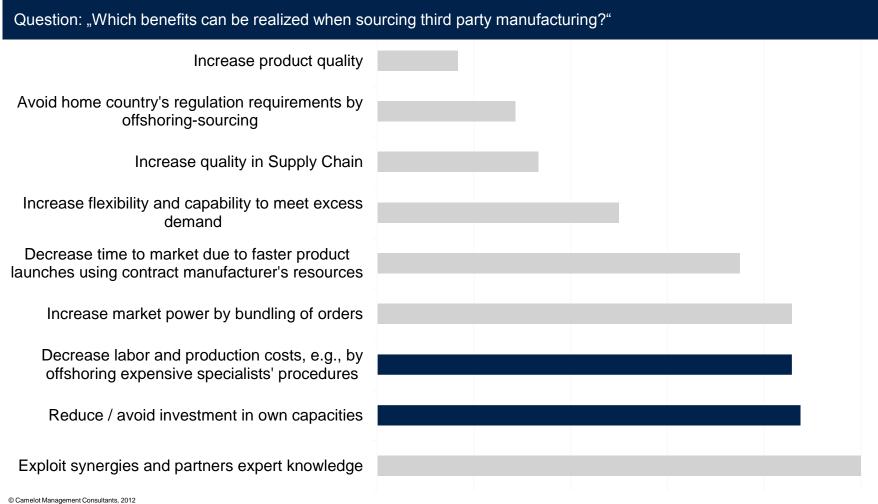


Source: EFPIA "The Pharmaceutical Industry in Figures", 2008 edition





...by divestment of assets. Manufacturing and Distribution is no longer core competence

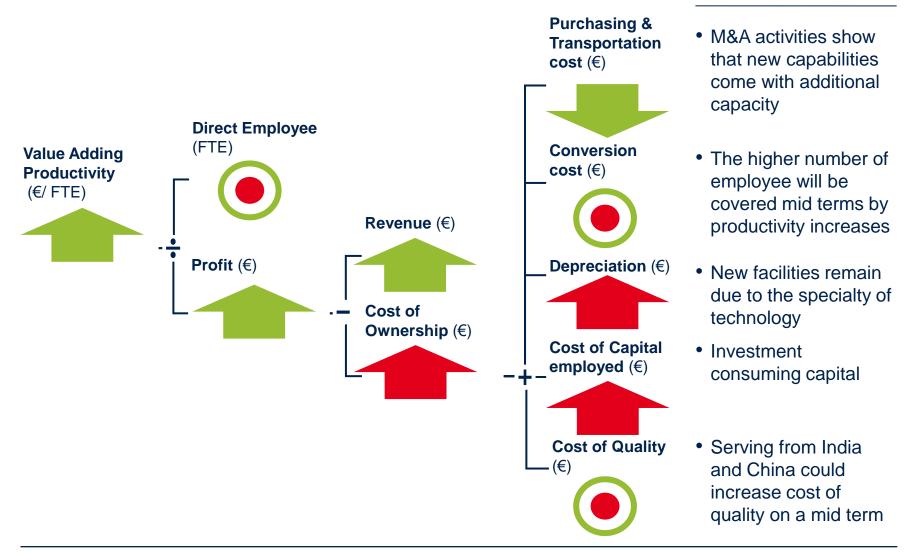






Est. Changes

What Gx Innovators do: Invest in new capabilities to gain higher revenue





Gx Innovators investing in Research and Development...

Company	Novel R&D Programs	R&D Spend	Average Spend/Program
Teva	51	\$500M	\$9.8M
Hospira	6	\$161M	\$26.8M
Watson	4	\$47M	\$11.8M
Barr	18	\$140M	\$7.8M
Dr Reddy's	8	\$65M	\$8.1M
Ranbaxy	6	\$110M	\$18.3M
Gedeon Richter	16	\$65M	\$4M
Apotex	7	\$50M	\$21.4M
Par	3	\$12M	\$4M
Glenmark	9	\$10M	\$1.1M
NPIL	13	\$32M	\$2.4M
Wockhardt	6	\$17M	\$2.8M
Torrent	7	\$14M	\$2M
Dabur	9	\$10M	\$1.1M
Lupin	6	\$35M	\$5.8M

Source: ThomsonReuters





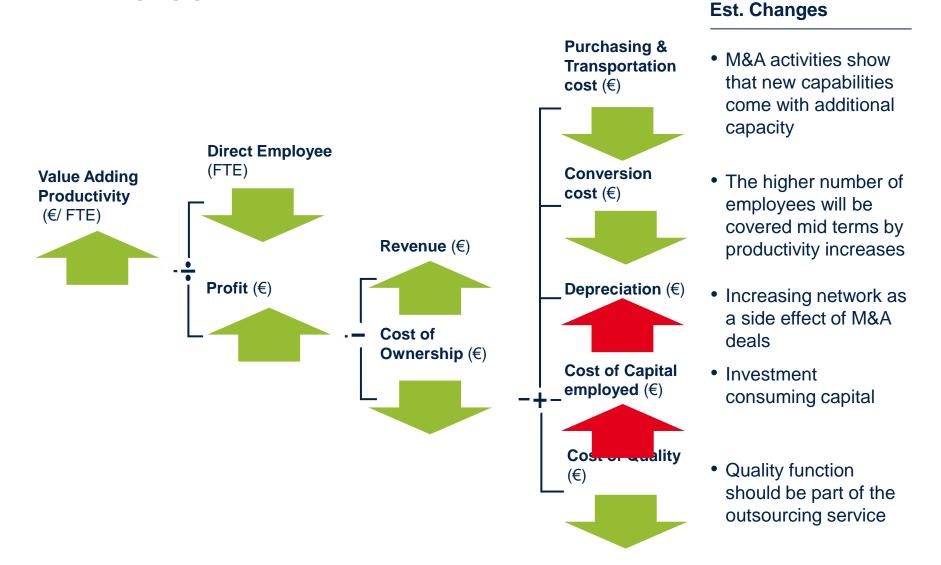
... and show significant success by generic versions of biotech products ("biosimilars")

Company	Proteins	Antibodies	Vaccines	Launches
Teva	===		шШ	EPO,GCSF
Sandoz	шШ			EPO, HGH
Biocon	шШ		=	GCSF
Hospira	шШ			EPO,HGH
Zydus	=			GCSF
STADA	=			EPO
Actavis	====			Via Bioton
Ranbaxy	шШ		шШ	
Dr. Reddy's	====			GCSF
Apotex	шШ		====	
Cipla	====			
re: ThomsonReuters		Under development	Full production	

Source: ThomsonReuters



What do Generics do: Virtualizing the Value Chain to take a share of the Pharmerging growth





Generics buy existing business to serve at low cost

Company	Target company	\$ billion	Technology/product
J&J	Pfizer OTC	16.6	Consumer health
Teva	Barr-Pliva	7.5	Generics
Teva	Ivax	7.4	Generics
Novartis	Eon	6.8	Generics
Mylan	Merck KGA generic	6.7	Generics
Novartis	Hexal	5.3	Generics
Teva	Ratiopharm	5.0	Generics
Daiichi Sankyo	Ranbaxy	4.0	Generics
Teva	Sicor	3.4	Biosimilars
Sanofi Aventis	Zantiva	2.6	Generics
Barr	Pliva	2.5	Generics
Reckitt Benckiser	Adams respiratory	2.3	Generics
Sanofi Aventis	Chattem	1.9	Consumer health
Watson	Andrx	1.9	Generics
Watson	Arrow	1.75	Generic Lipitor

Source: Knol: Mergers & Acquisitions Review 2005-2011 Pharma Biotech

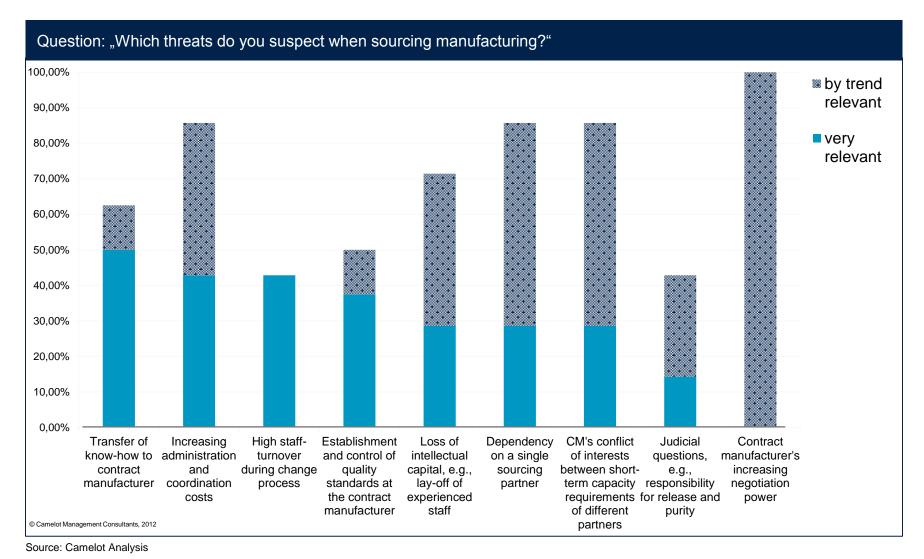




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Facing the new future experts see several constraints to overcome within the next 5 years



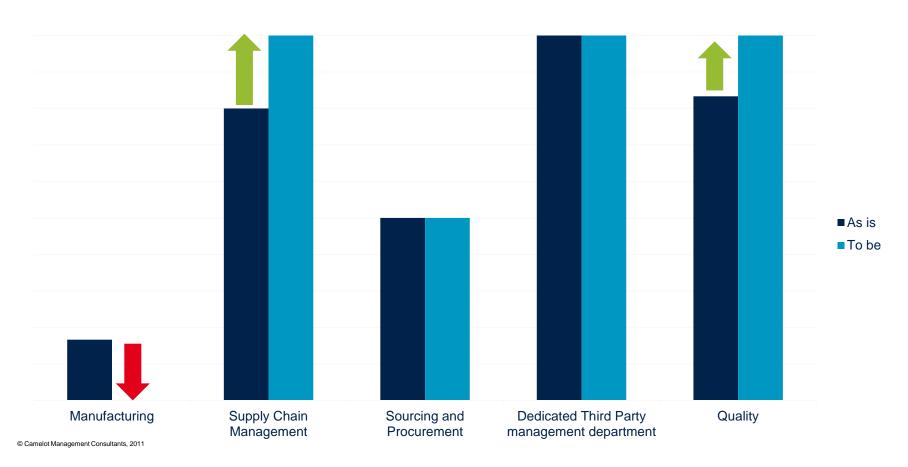






Global SCM is intended to take the lead to build and manage the global external supply network, taking the responsibility from local manufacturing

Question: "When do the following functions communicate with the contract manufacturer?"





To centralize the management of an external network four steps should be considered



- Review network performance
- Identify improvement opportunities
- Phase out underperformers
- Develop new champions



- Grow supplier network by development plan
- Grow own network management capabilities
- Grow collaboration with strategic supplier
- Grow trust



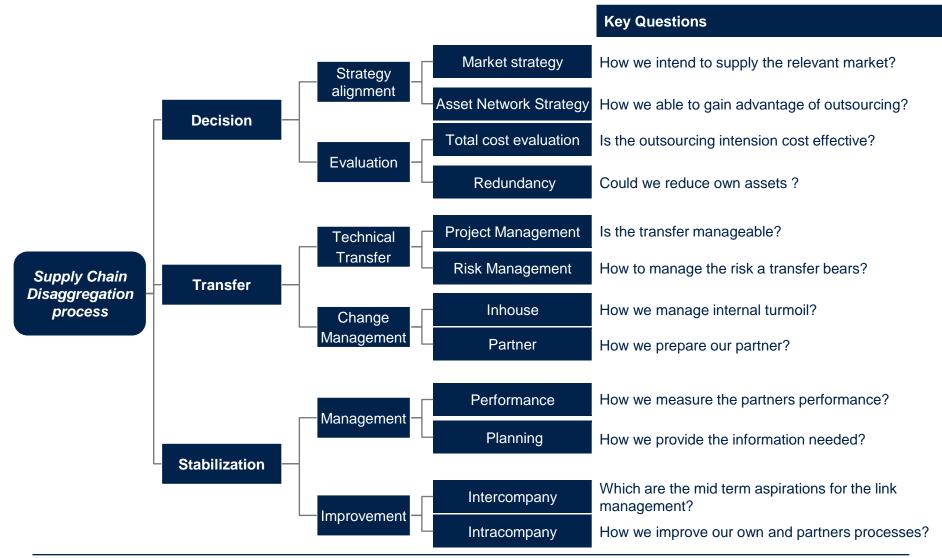
- Assess supplier performance
- Assess suppliers risk
- Assess own network management capabilities



- Map candidate products for outsourcing
- Map existing supplier landscape
- Map Supply Chain Network
- Map current against future markets



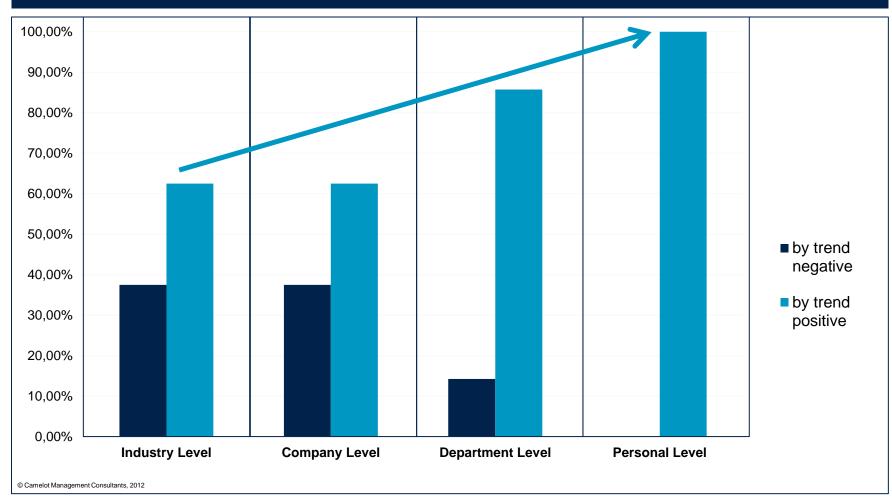
Pharmaceutical outsourcing officers should ask themselves some key questions to identify how good the company is prepared





There is a long way to go to change behavior toward the new reality

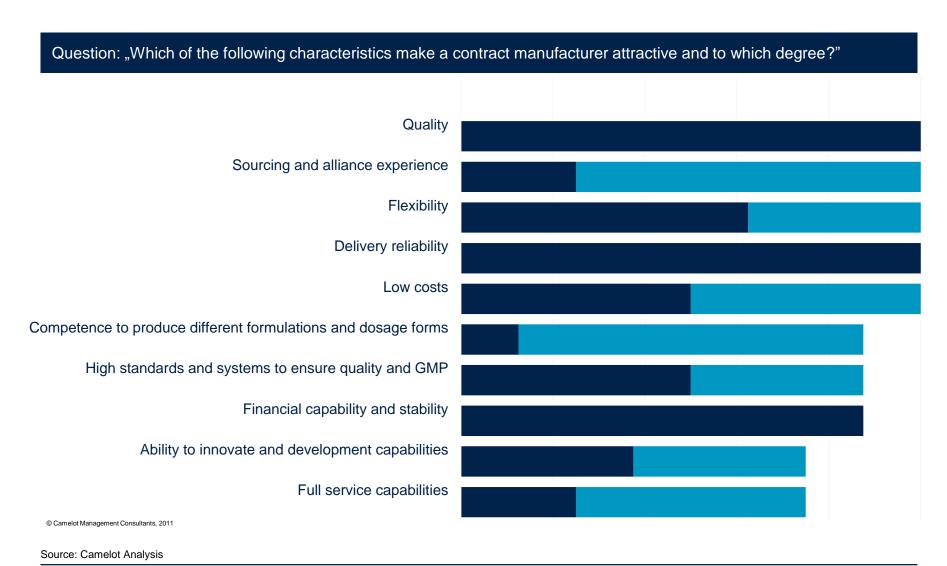








While quality and delivery reliability should be given, 3rd party providers face the chance to gain big volume products supply on full service...

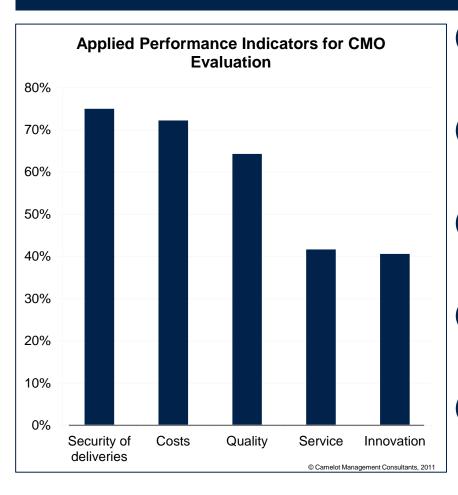






... and act as an integrated part of the Supply Chain

Q: "Which of the following performance indicators do you apply to manage your contract manufacturer's performance?"



75% Security of Deliveries

- Adherence to delivery terms (OTIF)
- Planning adherence (communicated changes)

Costs

- Revised price
- Offer price
- Total cost of ownership

64% Quality

- Quality KPI
- Handling (look and feel)
- Compliance (complete and correct docs.)

42% Service

- Flexibility
- Order confirmation rate
- Invoicing

41% Innovation

- Suggestions for improvement
- Investments
- Documentation of workflows

For further information please contact



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