



# Decoding the Uniform Code for Marketing Practices in Medical Devices (UCMPMD) 2024

October 2024



**pwc**

# Decoding UCMPMD 2024

## Key tenets



Mandatory for medical device companies



Quasi-judicial code with complaint and appeal ecosystem



Heightened scrutiny and stricter enforcement actions



Enhanced governance and monitoring framework



Convergence with other applicable laws and regulations (Income-tax Act, Medical Council of India [MCI], Medical device Rules)

## What's new?

Training and educational programmes introduced (overseas location allowed with exceptional approvals)

Guidelines for evaluation samples along with overall threshold limit

Broadened scope of medical representatives\*

Retention of demonstration samples

Research/studies to be pre-approved by a competent authority

Annual self-declaration by CEO on adherence to the code with a defined annexure

Disclosure on expenditure incurred

\* Sales representatives, medical affairs or marketing professionals, clinical specialists or contractors)

## Implications of non-compliance



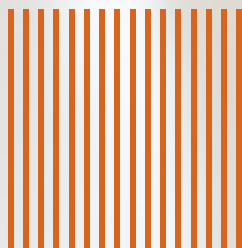
Suspension/expulsion from association



Disciplinary action



Public disclosure of corrective actions





# Engagement with healthcare professionals (HCPs) and organisations

## CMEs/CPDs/training

### Can be organised by:

Medical device companies alone or in collaboration with institutions, universities, hospitals, medical colleges, professional associations and teaching/research institutions

### Nature of events:

Continuous medical education (CMEs), continuing professional development (CPD), training, conferences, seminars, workshops, etc.

### Key requirements:

- Events at foreign locations are prohibited except in case of advanced clinical trainings in exceptional circumstances (non-availability of trainer or product in the country)
- Department of Pharmaceuticals (DOP) approval required three months in advance. Details below to be submitted:
  - details of participating HCPs and trainers
  - location, duration and rationale
  - expenditure on travel and boarding for speaker and participants
  - equipment and facilities to be used.
- Details of events and expenditure incurred to be disclosed in defined format on website and along with annual certification

## Research support

- Research to be approved by a competent authority (ICMR, DCGI, institutional authority, EC\*)
- Instructions of National Medical Commission must be complied with
- Consultants or advisors can be appointed through consultancy agreements subject to competent authority approval

(\*ICMR – Indian Council of Medical Research, DCGI – Drug Controller General of India, EC – Ethics Committees)

## Gifts or monetary grants

- Personalised gifts and benefits are prohibited to be distributed to HCPs, distributors, agents, wholesalers, retailers, etc.
- Cash or monetary grants to individual HCPs, including distributors, agents, wholesalers and retailers, are prohibited



## Income-tax Act:

- Section 37(1) will be attracted in case of non-compliance with the MCI/UCMPMD (e.g. unapproved event at foreign locations).
- TDS section - 194R will be attracted in case of any expenses construed as a benefit to the HCPs subject to conditions.
- TDS section - 194J will be attracted in case of honorarium payouts to HCPs.



# Engagement with HCPs and organisations

## Brand reminders and promotional materials

### Brand reminders:

- Can provide books, calendars, diaries, dummy device models, journals (including e-journals), etc., for professional use in healthcare settings
- Value up to INR 1,000 per item
- Items should not have independent commercial value to HCPs

### Promotional materials:

- Minimum information (as defined) must be part of the promotional material
- Market authorisation should be in place prior to promotion
- Avoid using the words 'safe' and 'new'
- Should not contain the name or photograph of an HCP
- Date of printing or of the last review of promotional material shall be stated

## Evaluation sample

### Brand reminders:

- Provided to qualified HCPs for acquiring experience
- Samples should be supplied with instructions for use (IFU), directions for use (DFU), electronic instructions for use (eIFU) or user manual
- Should not exceed the quantity reasonably necessary for evaluation
- Total value should not exceed 2% of domestic sales
- To be labelled as 'evaluation samples – not for sale'

## Demonstration samples

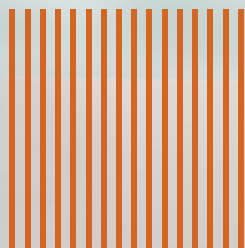
- Can be single-use products, mock-ups, temporary software or equipment for patient awareness/education
- Possession of such samples should be with the company
- The demonstration equipment must be returned to the company after the demonstration period is over

## Tracking and monitoring

- Detailed records with respect to product name, doctor name, address, quantity, supply date, value to be maintained
- Additionally, date of collection from HCPs and MRP to be captured for demonstration samples
- Evaluation and demonstration samples should be differentiated
- Records should be maintained for five years

### Income-tax Act:

- TDS section - 194R will be attracted in case of any expenses construed as a benefit to the HCPs subject to conditions.
- Section 37(1) will be attracted in case of non-compliance with the MCI or UCPMP.



# How to approach adherence to this new change?



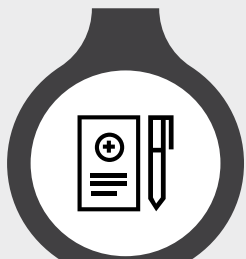
## Revisit/redesign the compliance framework

- Revisit existing policies and procedures to incorporate the key requirements around new changes for CMEs, training, research support, brand reminders, samples, etc.



## Design transparency programme

- Design a spend transparency reporting mechanism of public disclosures on website.
- Annual self-declaration by CEOs (within two months from end of FY) in the defined format.



## Reinforce systems to enhance control and monitoring

### Enhance system controls around:

- audit trail around HCP interaction related spends
- dispatch and distribution monitoring
- value thresholds and triggering alerts for samples/brand reminders.



## Promote adherence to the code and related laws/regulations

- Reinforce awareness through workshops and training for medical representatives (MRs).
- Revisit contractual obligations with MRs to ensure compliance with the code.







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Data Classification: DC0 (Public)

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PS/October 2024-M&C 41187