



# **National Key Economic Area (NKEA): Healthcare**

## **LINK Healthcare Event**

**24<sup>th</sup>. April 2013**

# Objectives For Today...

1. Share the latest in the Healthcare NKEA
2. Securing financing
3. How can you participate as an EPP partner and next steps



# Representatives from Agencies

AGENCIES	DESIGNATION	NAME
Ministry of Health	DMO Head/Under-Secretary	Mr. Choy Lup Bong
Ministry of Health	Director of Medical Practice	Dr Ahmad Razid bin Salleh
National Pharmaceutical Control Bureau, MOH	Director	Mr. Tan Ann Ling
Medical Device Authority, MOH	Assistant Director	Shamsul Annuar bin Mohd Soaudi
Ministry of International Trade and Industry (MITI)	Principal Assistant Director (Sectoral Policy Division)	Thavamani A/P Krishnan
	Principal Assistant Director (Sectoral Policy Division)	Mohd Shahrir Mohd Shamsudin
Malaysian Investment Development Authority (MIDA)	Deputy Director (Life Sciences and Medical Technology)	Fatmah Ahmad
	Executive (Life Sciences and Medical Technology)	Noraisyah Nordin
	Deputy Director (Healthcare, Education & Hospitality)	Mohd Riduan bin Abd Rahman

# PROGRAMME

TIME	EVENT	PRESENTER
9.00 am	Registration & Refreshments	
9.30 am	Introduction to Healthcare NKEA	Dr. Chua Hong Teck
10.00 am	Presentation on Pharmaceutical Industry	Mr. Jimmy Piong M.D. Kotra Pharma
10.15 am	Q & A	
10.20 am	Presentation on Medical Devices Industry	Mr. Choudhury CEO of Vigilenz Medical Devices
10.35 am	Q & A	
10.40 am	Presentation on Aged Care	Ms. Carol Yip Director MY Flex Health
10.55 am	Q & A	
<b>11.00 am</b>	<b>The ETP &amp; The Future</b>	<b>Dato' Sri Idris Jala</b>
11.15 am	Q & A	
11.20 am	Presentation by Alliance Bank	Mr Lim Kee Yeong, Head of Alliance SME
11.35 am	Q&A	
11.40 am	Presentation by Maybank	En. Abdul Razak Head, Entrepreneur Development
11.55 am	Q&A	
12.00 pm	End & Networking	

# 3 Things I want to share...

**1. Healthcare Industry**

2. Healthcare NKEA

3. Entry Point Projects

Pharmaceuticals, Medical Devices  
and Seniors Living



# Economic Transformation Programme (ETP)

## NKEAs



**Greater KL**



**Education**



**Business Services**



**Oil & Gas**



**Healthcare**



**Wholesale & Retail**



**Financial Services**



**Palm Oil**



**Electronics & Electrical**



**Agriculture**



**Tourism**



**Communication Contents & Infrastructure**

**11 Economic Sectors  
and Greater Kuala Lumpur  
& Klang Valley**

# Mixed Delivery Mechanism



**Hospital Beds**

**Public**

**2000**

**34,573  
(92.1%)**



**2011**

**41,716  
(75.5%)**

**Private**

**2,946  
(7.9%)**



**13,568  
(24.5%)**



**Medical Practitioners**

**Public**

**3,021  
(43.1%)**



**25,845  
(70.6%)**

**Private**

**3,991  
(66.9%)**



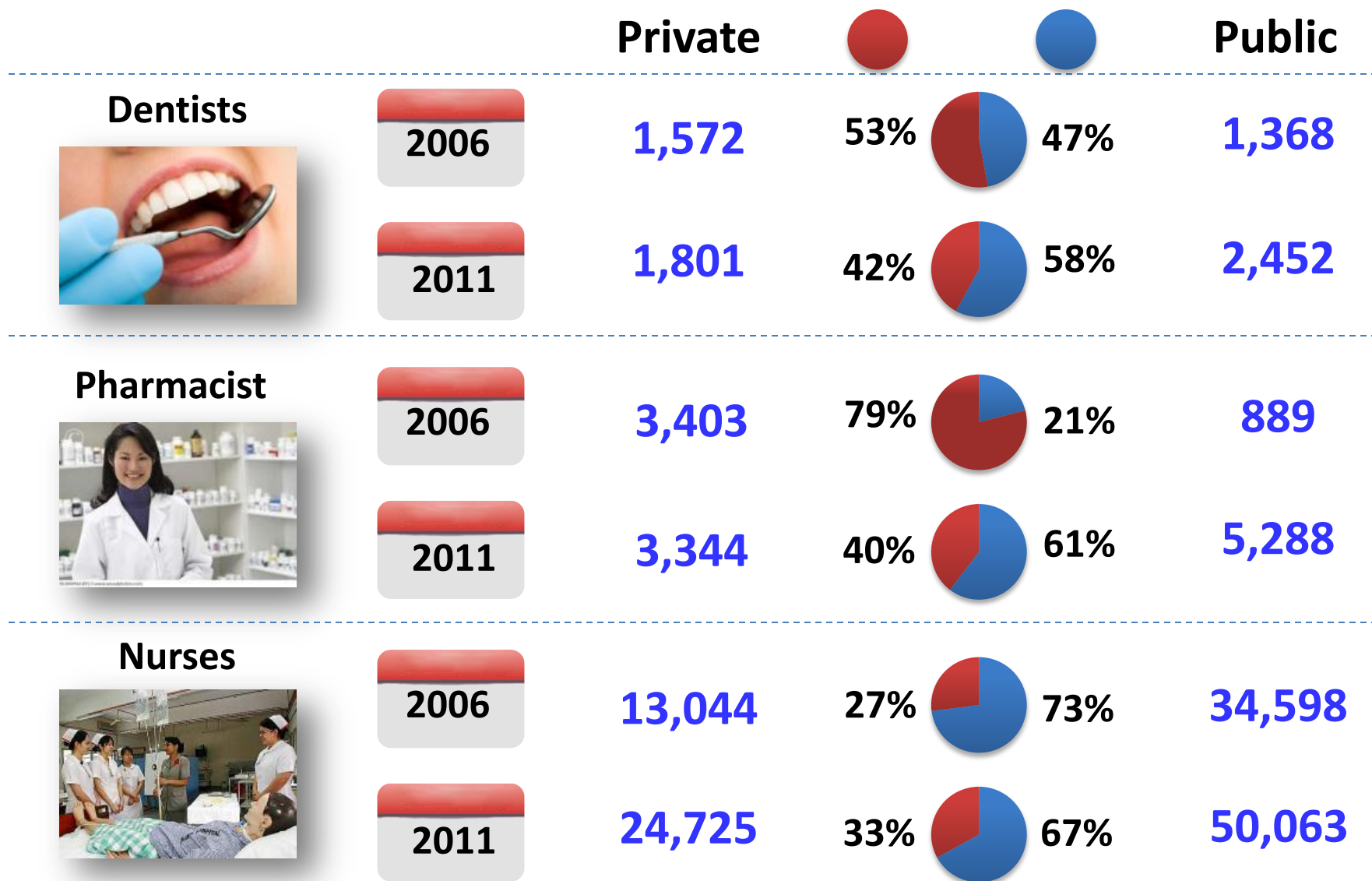
**10,762  
(29.4%)**

*Source: Ministry of Health, Health Facts 2012*

**\* Doctor: Population Ratio : 1:791**



# Other Health Human Resources, 2011

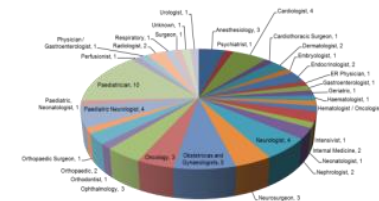
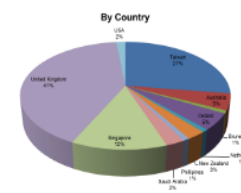
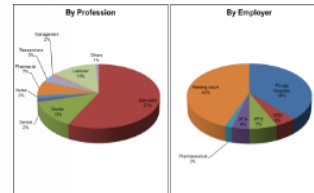


Source: Ministry of Health, Health Facts 2006 and 2012



# VISION 2020

## TalentCorp Achievements (2011-2012): Return Experts Programme



2012

- 923 total REP approved (↑ 30%)
  - Doctors & Specialists: 93 (↑ 110%)
- 12 RP-T approved for healthcare specialists
- Healthcare Sector Focused Outreach
- Collaboration from abroad

2011

- 680 total REP approved
  - Doctors & Specialists: 44
- 14 RP-T approved for healthcare specialists

# Healthcare Facilities, Admissions and Attendances, 2011

Types of Facilities	MOH	Non-MOH	Private
Hospitals Admissions	2,139,392 (67.3 %)	134,118 (4.2 %)	904,816 (28.5 %)
Special Medical Institutions - Admission	7,570		
Hospital Outpatients	18,328,343 (78%)	1,909,163 (9%)	3,505,591 (13%)
Special Medical Institutions - Outpatients	117,960		
Public Health Facilities	28,656,444		
Dental Clinics	10,318,298		
Ante-Natal (Maternal & Child Clinics)	5,433,463		
Post-Natal (Maternal & Child Clinics)	556,346		
Child (Maternal & Child Clinics)	7,359,129		

Source: Ministry of Health, Health Facts 2012

# Most headlines in local news are hospitals related..



Taken together, we are seeing a global slowdown

Thursday 26 January 2012

## Dual IHH listing planned

Khazanah said to have appointed bookrunners for flotation likely in Malaysia and Singapore


**MARKET MOVEMENTS**

FTSE 100	12,875.75	-33.07
DAX	7,571.90	-38.46
Nikkei 225	11,819.76	-2.93
Hang Seng	18,811.69	+98.36
ASX 200	5,891.69	+98.36

**DAILY TOP ACTIVE**

Symbol	Change	Value
BERNAMA	0.85	170,013
KLSE	0.14	167,735
DBL	0.33	57,825
HLB	1.32	48,818
ICM	0.24	42,817
ICM	0.11	39,034





### BERNAMA.COM

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January 16, 2012 2:32 PM

#### AUCMS To Build Two Hospitals In Penang By 2015

KUALA LUMPUR, Jan 16 (Bernama) -- The Alliance University College of Medical Sciences (AUCMS) will build two hospitals in Penang by 2015.

Its president, Prof Datuk Dr Zainuddin Md Wazir, said the first hospital would be built on a 2.4-hectare site in Kepala Batas, while the second would be built on a 10-hectare site in Bertam.

He said the total cost of building the two hospitals was estimated at RM2 billion.

"The construction of the first hospital, which will have 200 beds, will begin in the middle of this year and is expected to be completed by middle of next year, while the construction of the second hospital, which will have 800 beds, will begin in 2013 and is expected to be ready by 2015."

He said this after the signing of the Memorandum of Understanding (MoU) between AUCMS and the Malaysian National News Agency

## Sime in healthcare tie-up

It will get access to Indonesia via JV with Australia's Ramsay, IPO of hospital assets possible

**The JV will enable Sime Darby to monetise its 50% investment in SD Healthcare**

**SIME DARBY**

PETALING JAYA: Sime Darby Bhd is trying to get its hands on Australia's largest hospital operator Ramsay Health Care Ltd, in a move that gives the local conglomerate access to the Indonesian market and possibly bid to an initial public offering of their hospital assets.

Sime Darby told Bursa Malaysia yesterday that its unit Sime Darby Holdings Bhd (SD Holdings) would set up a joint venture with AH Holdings Health Care Pty Ltd (AHHC), a wholly-owned subsidiary of Ramsay.

It said SD Holdings would inject its healthcare and education business while AHHC would put its expertise in managing private hospitals to extensive experience in the healthcare sector globally.

Sime Darby said that the JV would also allow Sime Darby to gain a foothold in the Indonesian healthcare market, which is said to have attractive economic and demographic fundamentals and opportunities in the mid-to-long term.

"The JV will enable Sime Darby to monetise its 50% investment in SD Healthcare by negotiating an estimated net gain on disposal of RM100m," it said, adding that SD Holdings and AHHC would each have an equal shareholding in SDHC of 50%.

Sime Darby also said proceeds from the sale of SDHC shares to AHHC were expected to be utilised for Sime Darby Group's working capital requirements and for the payment of expenses in relation to the JV.

Healthcare is one of Sime Darby's smaller divisions, reporting revenue and profit of RM540.8m and RM50.1m, respectively, in the year to June 30, 2012.

Earlier this month, The Wall Street Journal reported that Ramsay could combine its entire Indonesian operations - comprising two hospitals in Jakarta and one in Surabaya - with Sime's six hospitals and a nursing college here.

Quoting sources, The Wall Street Journal said the merged unit could have a market value of more than RM1.55b based on multiples of ICF Healthcare Bhd.

## Parkway operates 16 hospitals

**> FROM PAGE 1**

Mitsui Co & Ltd.

Mitsui entered IHH by paying RM3.3billion for its 30% stake in Parkway about a year after Khazanah privatised Parkway for RM5billion.

After the privatisation, Parkway was renamed Parkway Pantai Ltd and it has hospital assets based mostly in Singapore and Malaysia. Parkway Pantai recently reported an 18% higher first-half net profit, excluding exceptional items and net of tax, of RM190.38m (\$578.3m) for the year ended June 30, 2011 versus the corresponding period of 2010.

Parkway Pantai's first-half revenue also grew 11% to RM4.51b (\$13.2billion) against a year earlier.

Parkway Pantai derived 61% of its first-half



An artist's impression of the new specialist hospital in Iskandar. KPJ chairman Kamaruzzaman Abu Kassim (inset) says the hospital will house a 'Centres of Excellence' featuring a heart centre, a geriatric centre, cancer centre and a cosmetic and reconstructive centre.



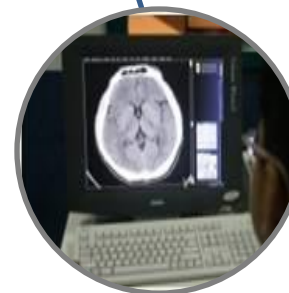
**Pharmaceuticals**



**Medical  
Education**



**Medical  
Technology/IT**



**Traditional &  
Complimentary  
Medicine**



**Support Services**



**Healthcare  
Financing**



**Healthcare  
Facilities**



**Medical Devices**



**Healthcare  
industry is  
more than just  
Hospitals ..**



..4 out of 6 'Main Board of Bursa top 100 companies' are **Medical Devices (Rubber Gloves)** manufacturers..

Note: With market capitalization of over a Billion Ringgit (Feb 2013)

## ***“Pharmaceuticals”***



**..and many more  
public-listed  
companies are  
from healthcare  
sector..**

## ***“Medical Devices”***



## ***“ACE Market”***



# ..there are other fast growing healthcare related companies too

## Medical Laboratories



## Pharmacies



## Dental



## Home Care/Nursing Services



## Physiotherapy



## Eye Care



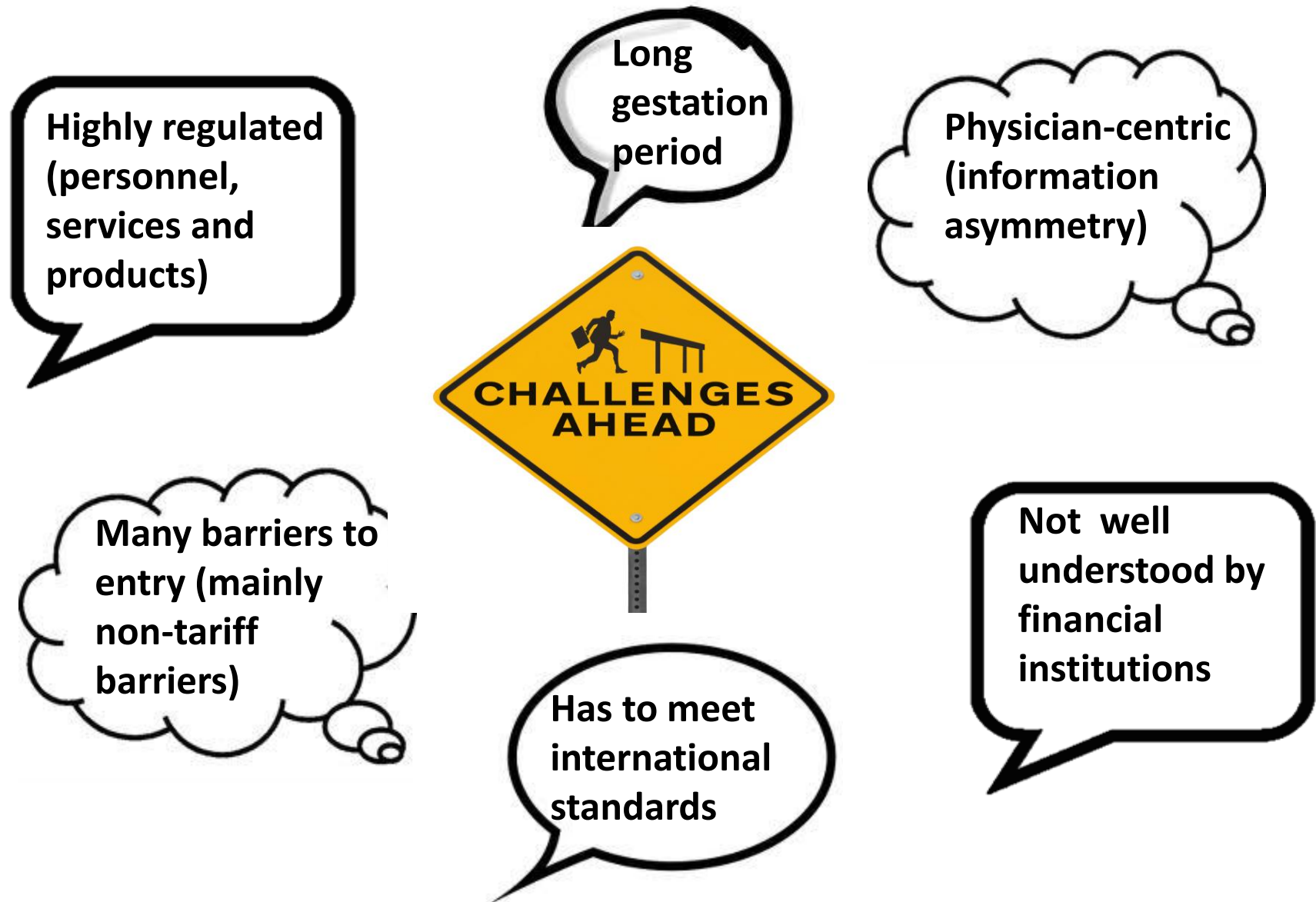
## Ambulance Services



\*The list is not exhaustive



# Challenges in the Healthcare Industry




## 2nd I want to share...

1. Healthcare Industry
2. Healthcare NKEA
3. Entry Point Projects




# 6 EPPs were created during Healthcare Lab 2010

- EPP 1** 


## Foreign Workers Health insurance

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Mandate private health insurance for all foreign workers
- EPP 2** 


## Clinical Research Malaysia

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Create a complete ecosystem to grow 1,000 new clinical trials by 2020
- EPP 3** 


## Malaysian Pharmaceuticals

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Leverage patent expiry cliff by pursuing generic opportunities
- EPP 4** 


## Healthcare Travel

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To position Malaysia as the preferred destination for world-class healthcare services
- EPP 5** 

## Diagnostic Services Nexus

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Create a scale of domestic teleradiology service for in-sourcing internationally
- EPP 6** 

## Health Metropolis (UMHM)

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Provide clinical care, research and education in one economically sustaining campus

## 2 Business Opportunities



### Medical Devices

Creating a conducive environment for MNC entry and developing the nascent local medical devices players

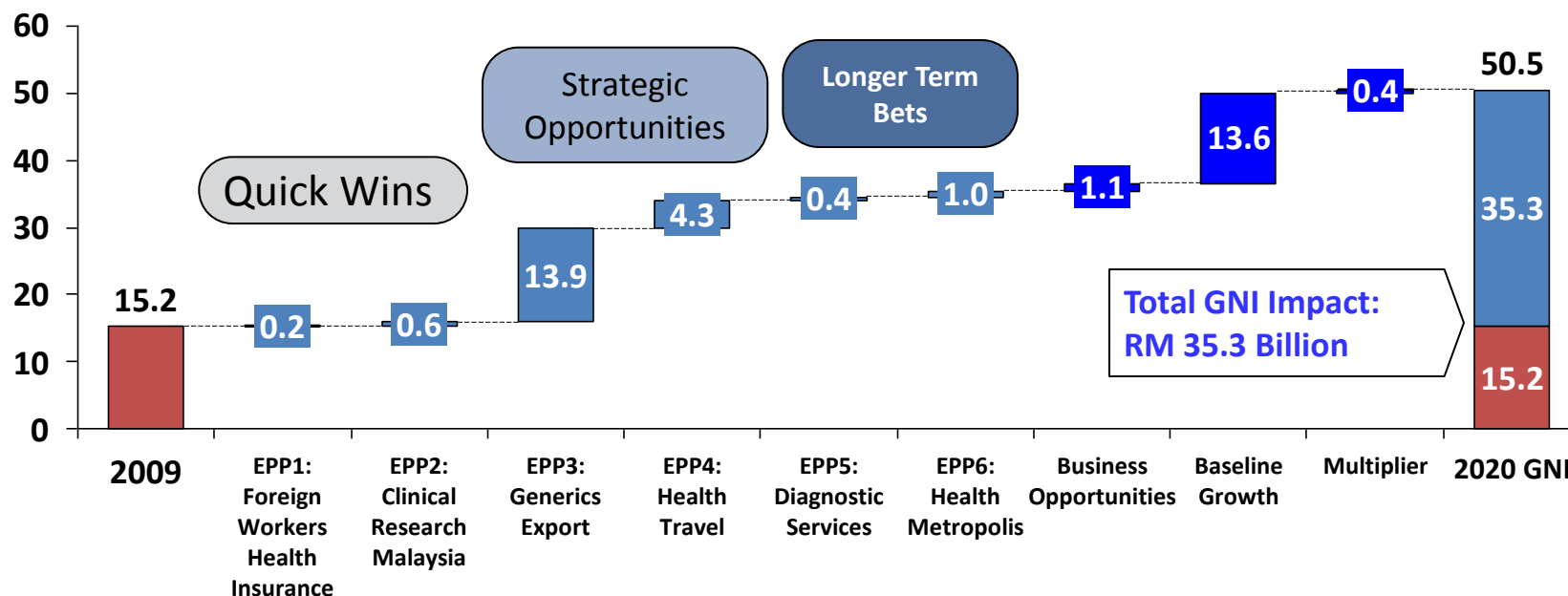


### Seniors Living

Meeting the need to build an ecosystem that provides holistic aged care for the middle to long term

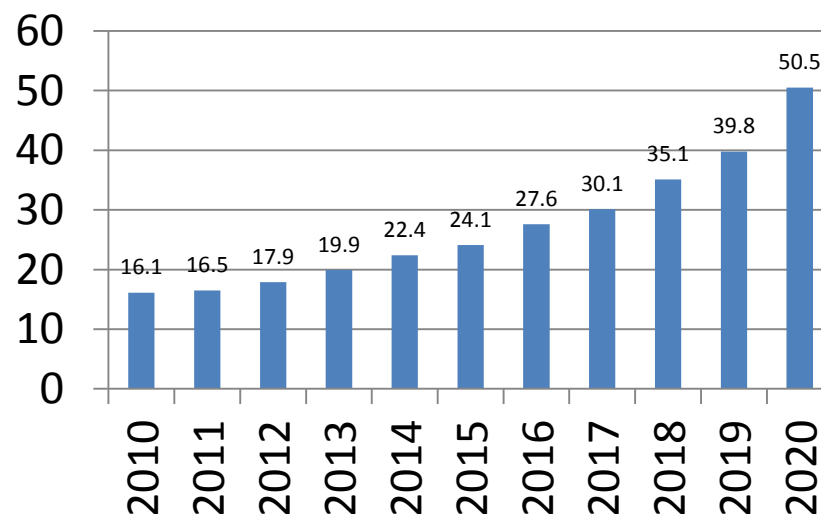
# Healthcare Aspirations and KPIs

2020 GNI contribution  
(RM Billion)



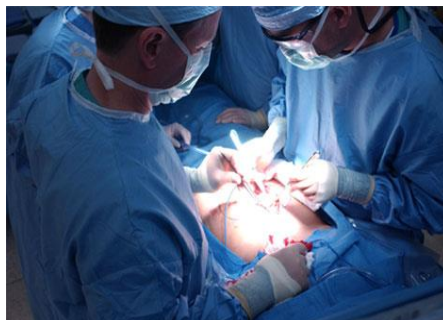
## GNI (RM Bln)

NKEA Success Measures	From (2010)	To (2020)
GNI	RM 15.2b	RM 50.5b
Jobs	271k	452k
Total Investments	t.b.a	RM 18.4 b



# 3rd I want to share...

1. Healthcare Industry
2. Healthcare NKEA
3. **Entry Point Projects**







## EPP3: Malaysian Pharmaceuticals

### Leverage patent expiry cliff by pursuing generic opportunities

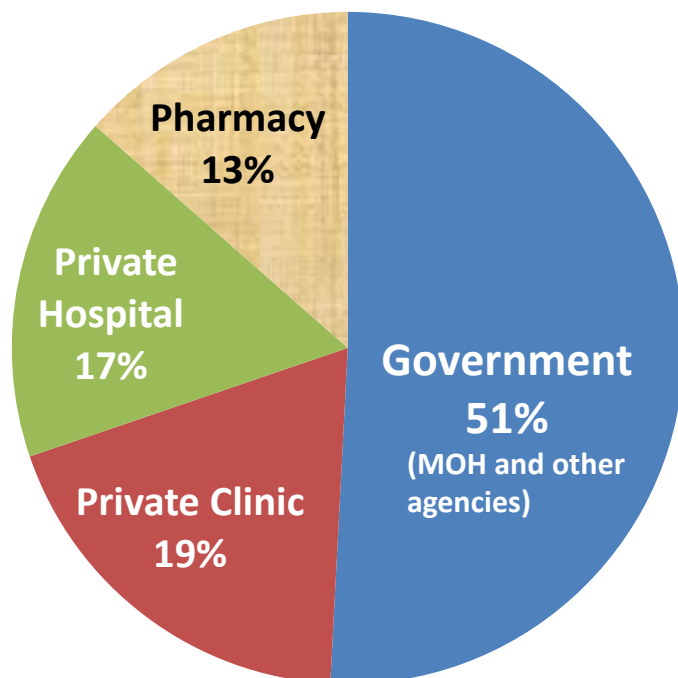
## Background and Progress

- **Member** of Pharmaceutical Inspection Convention and Pharmaceutical Inspection Co-operation Scheme (**PICS**)
- **MOH Off-Take Procurement Agreement for New Local Manufactured Pharmaceuticals** for 3+2 years
- **Fast-tracked registration** for new products under EPP
- **Compulsory service** for pharmacists reduced from three years **to one and allowed to do pupilage in the industry.**
- All generics products are subjected to **BE Studies** and their labs are inspected
- Strengthened **patent related issues on pharmaceuticals**
- Improved the **collection and management of pharmaceutical data with IMS**
- Improving **market access in foreign countries**

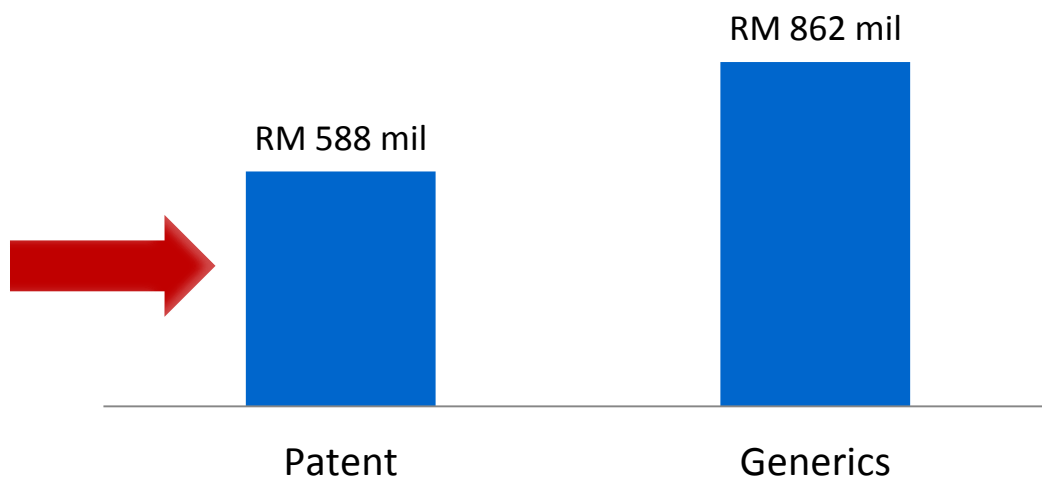




# Malaysia's Pharmaceutical Market in 2011: **RM 4.4 billion**



**MOH Purchase in 2011**



Source: IMS, Ministry of Health, PEMANDU analysis



# General Principles for the Off-take Agreement

1. Must be an **announced project** under **Healthcare NKEA**
2. Only for **new investments** and for products **not manufactured in Malaysia**
3. Only for **finished products** produced within Malaysia
4. Must be **registered with Ministry of Finance** as a **manufacturer**
5. Agreement for **3 years** and **renewable for another 2 years** upon submission of proof of registration and **sales** of products **abroad**
6. **Does not apply** for items under **existing tenders** or any other **procurement arrangements** with the **Ministry of Health**

# Malaysian Pharmaceuticals: EPP Announcement

Announced on Jan 2011



Announced on June 2011



Announced on Sept 2012



INV 

RM 11 m

RM 500 m

RM 125 m

GNI

RM 50 m

RM 1.972 b

RM 71.058 m



11 (Phase I)

450 (Phase I)

207

# Proposed 'Mini-Lab' to review 2010 Lab Recommendations in early June 2013

## Review Strategy

(Recalculate the Investment, Jobs and GNI)

### To expand beyond just generics

- OTC Products
- Nutritional Products/Supplements
- Vaccines
- Biosimilars
- Orphan Drugs
- Active Pharmaceutical Ingredients





# EPP7-13: Medical Devices

Creating a conducive environment for MNC entry and developing the nascent local med tech players

**June 2011**



## Medical Devices Baseline Study

Review & develop  
strategies to grow  
the medical  
devices industry

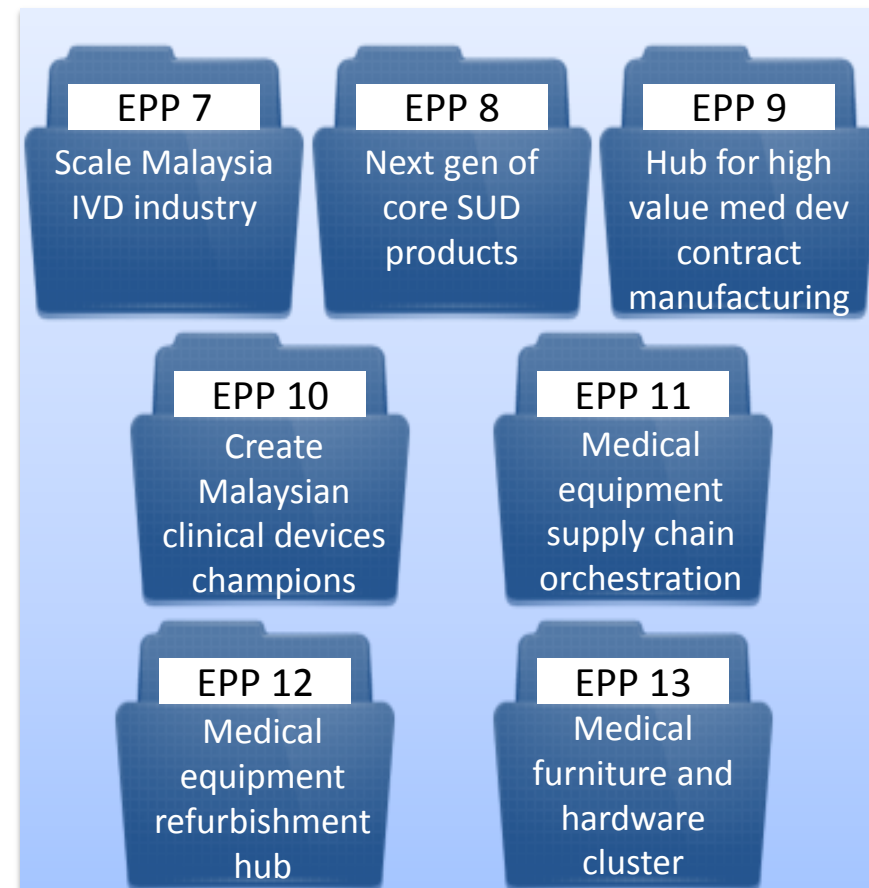
**July 2011**

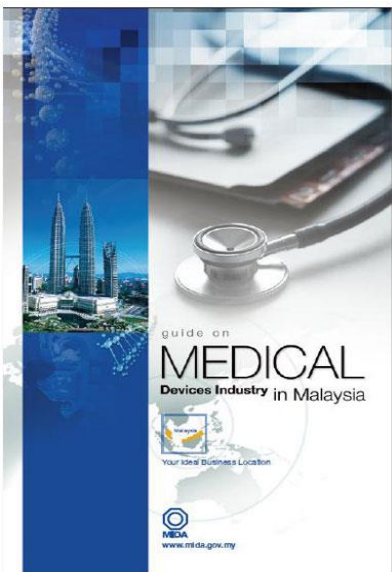


## Medical Devices Lab

Over 60 Lab  
Members from  
public, private  
sectors & industry  
players

**Oct 2011**



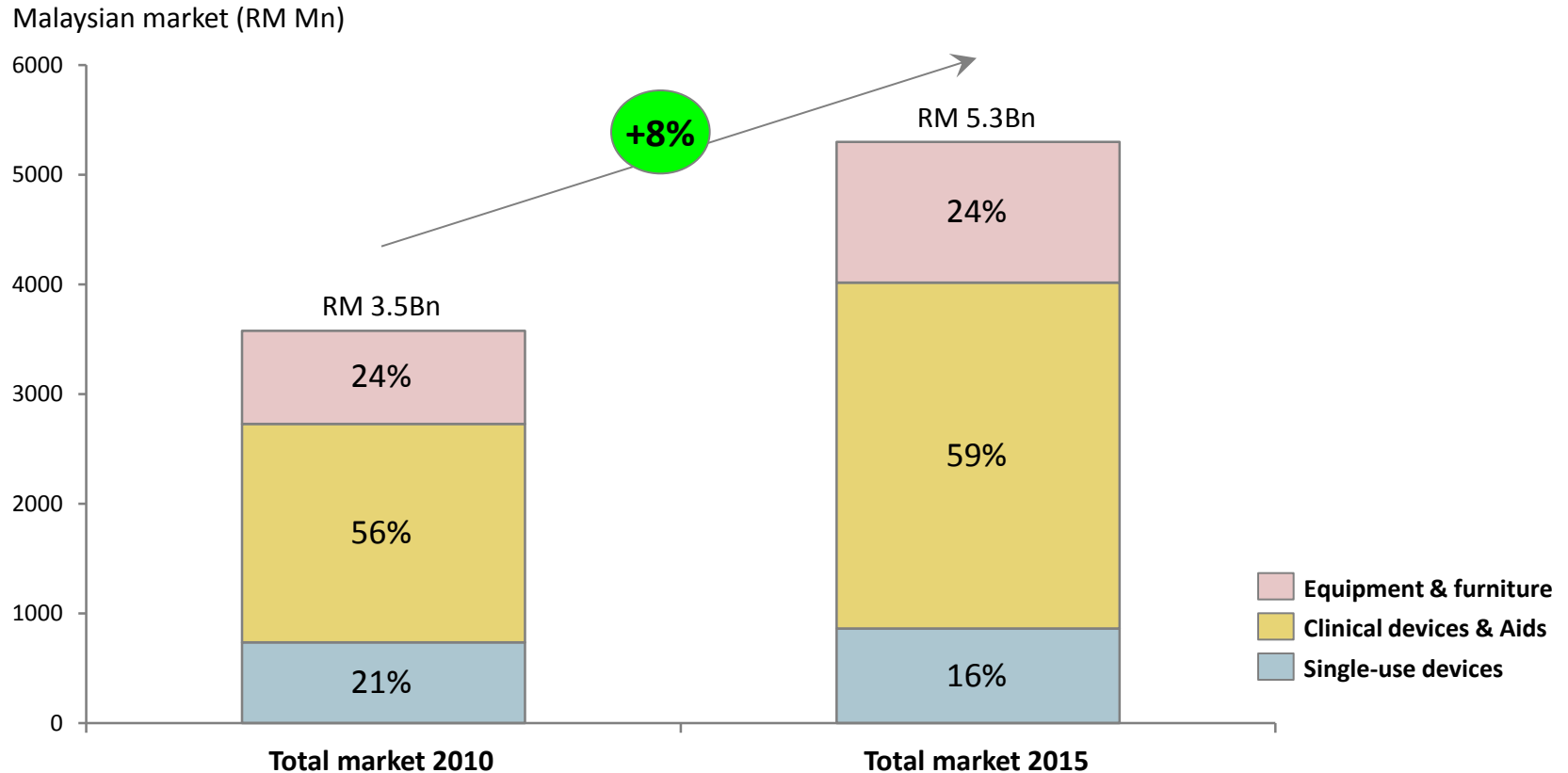


## Background and Progress

- **Medical Devices Act** was passed by Parliament in December 2011
- **Medical Devices Authority** has been set-up in July 2012
- The **MD Regulations** will come into operations on **1<sup>st</sup>. July 2013**
- **180 registered manufacturers**, majority in Penang and Selangor
- **48 large local companies** are mainly in single category player
- **Strong capabilities** from E&E to build on
- **Working towards an Off-Take Agreement**, special funding and testing labs



# Medical Devices: Malaysia market to reach RM5.3Bn by 2015



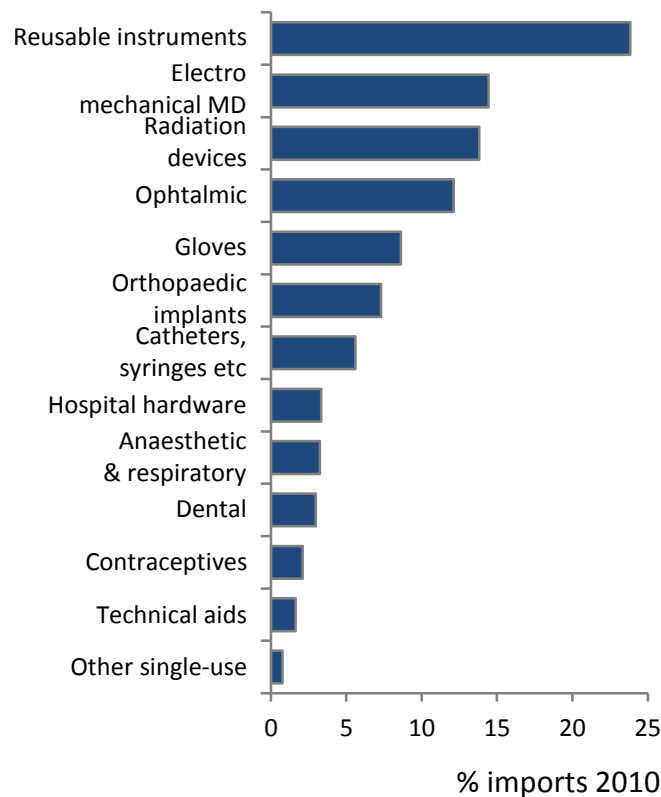
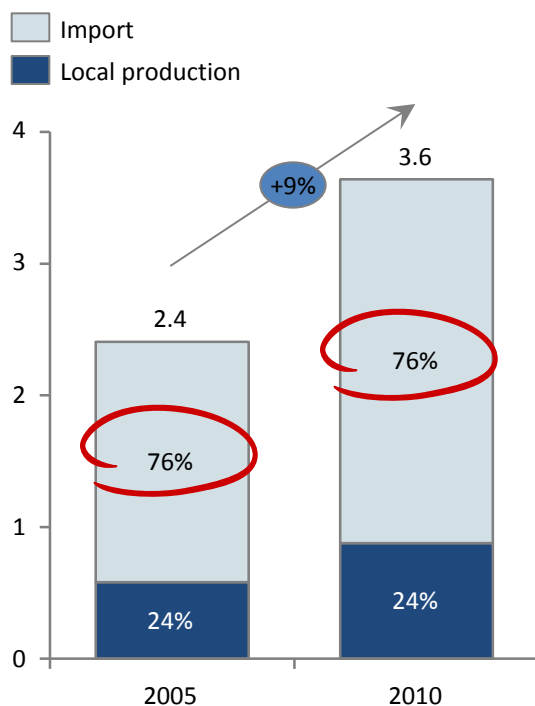


# Malaysian Medical Devices industry mainly driven by imports







**>75% market supplied by imports...**

**...across highly technical, but also consumable products**

Malaysian market (RM Bn)



# Medical Devices : EPP Announcement

		INV 	GNI	
	<b>Medical Innovation Ventures (EPP7: IVD Industry)</b>	8.9 m	RM30.9m	60
	<b>Vigilenz Medical Devices (EPP8: SUD Products)</b>	25.8 m	50.8 m	145
	<b>Straits Orthopaedics (Mfg) (EPP9: Contract Manufacturing)</b>	76.4 m	45 m	416
	<b>Medical Devices Corporation (EPP9: Contract Manufacturing)</b>	88.6 m	301.6 m	90

# Medical Devices : EPP Announcement

INV 

GNI



**UWC Group of Companies  
(EPP11: Medical Devices  
Supply Orchestration)**

40.1 m

RM190.8m

2020



**LKL Advance Metaltech  
(EPP13: Medical Furniture)**

16.0 m

37.1 m

149

# EPP: SENIORS LIVING



**THE STAR,  
8 OCTOBER 2012**



Monday October 8, 2012

## Rising number of senior citizens left behind at hospitals

By LIM WEY WEN and YUEN MEIKENG  
[newdesk@thestar.com.my](mailto:newdesk@thestar.com.my)

**Malaysia Retirement Homes**

The Perfect Place After Retirement? Find Addresses, Phones, Maps & More  
[www.701pages.com/Retirement-Homes](http://www.701pages.com/Retirement-Homes)

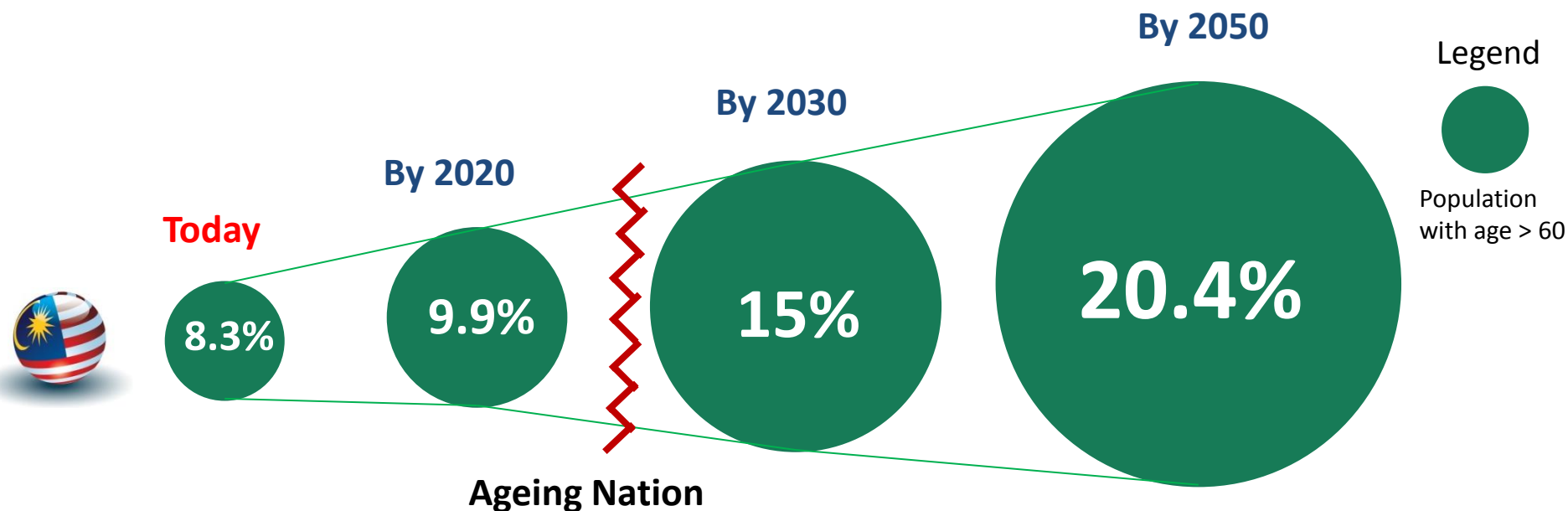
AdChoices |

**KUALA LUMPUR:** More senior citizens are ending up in welfare homes after being abandoned by their families at public hospitals.

Hospitals, especially those in the Klang Valley and other urban areas, have little choice but to refer them to shelters run by the Government or NGOs, as they need the beds for new patients.

Hospital Kuala Lumpur's medical social work department head Hasnah Sulaiman said that up to June this year, 157 patients above 60 were abandoned by their families at hospital. A total of 205 senior citizens were abandoned last year.

# Malaysia is becoming an ageing nation..



“By **2050**, 20% of Malaysia’s population will be **over 60**”

Source: Global Age Watch



...coupled with the growth in NCD such as hypertension, diabetes, coronary heart disease.....

**NEW STRAITS TIMES** MONDAY JULY 30, 2007  
ESTABLISHED 1845  
Peninsular Malaysia RM1.20 Sabah and Sarawak RM1.80 Brunei B\$1.80 • PP413/9/2007  
Malaysiakini Gemilang  
nstonline  
www.nst.com.my

# SICK NATION Have you got NCD?

## Chances are you may

**7** out of **10** Malaysian adults suffer from a non-communicable disease (NCD) like diabetes, hypertension or cancer.

That's **11.6m** of the **16m** adults nationwide, and it's getting worse...

NCDs account for **51%** of deaths in the country.

Are you one of the **70%?**

>> REPORTS: P6

An infographic of the map of Malaysia, where the landmass is filled with numerous red circles of varying sizes. The circles are more densely packed in certain areas, particularly in the central and southern parts of the peninsula, visually representing the distribution and prevalence of Non-Communicable Diseases (NCDs) across the country.



...and **unmet need** of  
an integrated service..



An elderly man receiving medical treatment at a temporary hospital in a refugee camp in Manchou county, in Sichuan, China. A recent study shows Asian countries are failing to provide adequate care for the dying despite rising standards of living in the region. — AFP picture

## End-of-life care inadequate in Asia

SINGAPORE: Asian countries were failing to provide adequate care for the dying despite rising standards of living across the region, showed a study released yesterday.

As the global population aged, the demand for end-of-life care was expected to surge, and governments and other providers were racing against time to meet these needs, a report by the Economist Intelligence Unit said.

Even economic powerhouse Japan was just 23rd among 40 countries ranked worldwide in a 'quality of death' index, according to the study commissioned by the von Foundation, a philanthropic organisation here.

India scored worst in the index at number 40, with China, Malaysia and South Korea also in the bottom 10 of a global list, which measured the care that the dying received.

Sri Lanka was at number 14 and Singapore was in 18th place.

"Quality of life is a common phrase... but 'quality of death' is another matter," the study said.

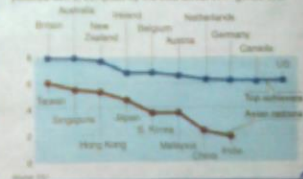
Five nations, including rich ones with cutting-edge healthcare systems, incorporate palliative care strategies in their overall healthcare policy... despite the fact that many of these countries increasing longevity and ageing populations mean demand for end-of-life care is likely to rise sharply.

The study found that institutions specialising in palliative and end-of-life care were "not part of the national healthcare systems" and the availability of pain-killing drugs was "woefully inadequate across much of the world".

"The results of this state of affairs is an incredible surplus of suffering, not just for those about to die but also for their loved ones," it noted. — AFP

### 'Quality of death' rankings

Index on end-of-life care strategies, compiled by the Economist Intelligence Unit



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Thursday, October 10, 2013

## Rising number of senior citizens left behind at hospitals

By LIM WEY WEN and YUEN MEIKENG  
[newsdesk@thestar.com.my](mailto:newsdesk@thestar.com.my)

### Malaysia Retirement Homes

The Perfect Place After Retirement? Find Addresses, Phones, Maps & More  
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AdChoice

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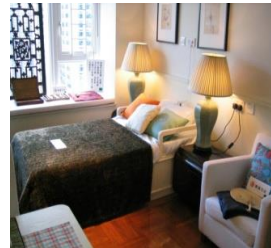
# ..means a growing need for **Seniors Living/ Aged Care Solutions..**

Level of care	Holistic services provided within comfortable residences
Low dependent	<ul style="list-style-type: none"><li>▪ Meal preparation, housekeeping, use of equipment/telephone</li><li>▪ Transportation and shopping</li><li>▪ Wellness and health promotion</li><li>▪ Disease prevention and management</li><li>▪ Routine medical check-up and follow-up</li><li>▪ Medication reminders and compliance</li><li>▪ Nutrition screening and therapy</li></ul>
Moderate dependent	<ul style="list-style-type: none"><li>▪ Personal care assistance (Bathing, dressing, grooming, eating, walking etc)</li><li>▪ Use of equipment/telephone</li><li>▪ Wellness and health promotion</li><li>▪ Disease mgmt and rehabilitative therapies</li><li>▪ Routine medical follow-up, medication reminder and administration</li><li>▪ Nutrition screening and therapy</li><li>▪ Skill treatments</li><li>▪ Day care/24 hour nursing care</li><li>▪ 24 hour monitoring</li><li>▪ Ambulance service</li></ul>

Wide range of facilities and infrastructure to be available



Seniors Living in condominium developments



Residence not the typical "old folks home"



Integrated nursing care and in-house support facilities



Recreational facilities included



# Seniors Living (Aged Care)

**Meeting the needs to build an ecosystem that provides holistic aged care**

**Seniors Living Lab – Sept-Oct 2011**

*Three (3) Work Streams*

## Retirement Village

**Development of Communities with active aging in place**

## Home Care/Mobile Services

**Providing clinical care at the comfort of their (seniors) own existing home**

## Institutional Care

**Transformation of these nursing and old folks homes**

Note : EPPs will be identified from these 3 key work streams



## Retirement Villages

The development of a seniors community with **active aging** and **aging in place**. Dedicated areas- to provide Senior Citizens who wishes to relocate to a **community that is 'friendlier' to retired persons**.

It can be in the form of **multigenerational homes** (to cater for family members living with them), **high density residences** or **even retirement resorts**.

The integration of **seniors friendly designs** and **support services** within a retirement village allows the senior citizens to maintain themselves **in their own homes even with increasing disability**.



## Mobile Home HealthCare

The provision of care services **at the comfort of their existing homes** or even in offices

This will improve the turnaround time for the **availability of hospital beds** and allow the elderly to **recover at home with their family**

Patients to have continuity of care upon discharge from hospitals in the comfort of their homes. There will be **better recovery in familiar surroundings**





# Institutional Care

The EPPs seek to transform this industry by introducing a **single standard** for 'nursing homes/old folks home' called the **Integrated Residential Care Centre (IRCC)**

Currently, 16 licensed Nursing Homes and 165 Old Folks Homes are regulated separately by MOH and Welfare Department

This new standard **will be regulated only by MOH** and will provide **varying levels of care** from Low Care (Independent Living) to High Care (Dependent Living). Existing homes will be given time/incentives **to be transformed into this new standard**



# Seniors Living

## Work in Progress



- New Act and Regulations for IRCC under MOH
- Planning Guidelines by JPBD
- Human Resources Requirements by JPK
- Transformation of Old Folks/Nursing Homes
- Encourage Reverse Mortgages products by Banks
- Insurance for mobile/home care and long term care
- ARB as Trustee of fund for payment to institutions

## Seniors Living : EPP Announcement



*Love On Wheels*  
Healthcare Services Sdn Bhd

K.A.S.I.H. project provides fully integrated mobile healthcare services to senior citizens above the age of 60.

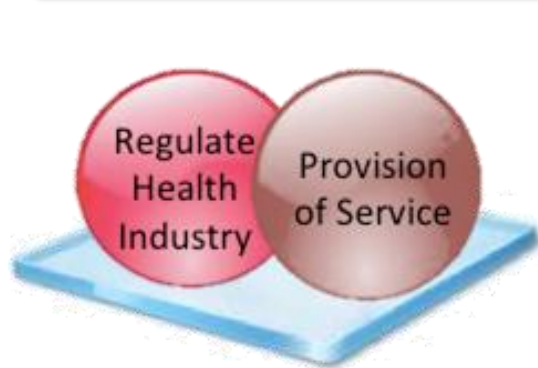
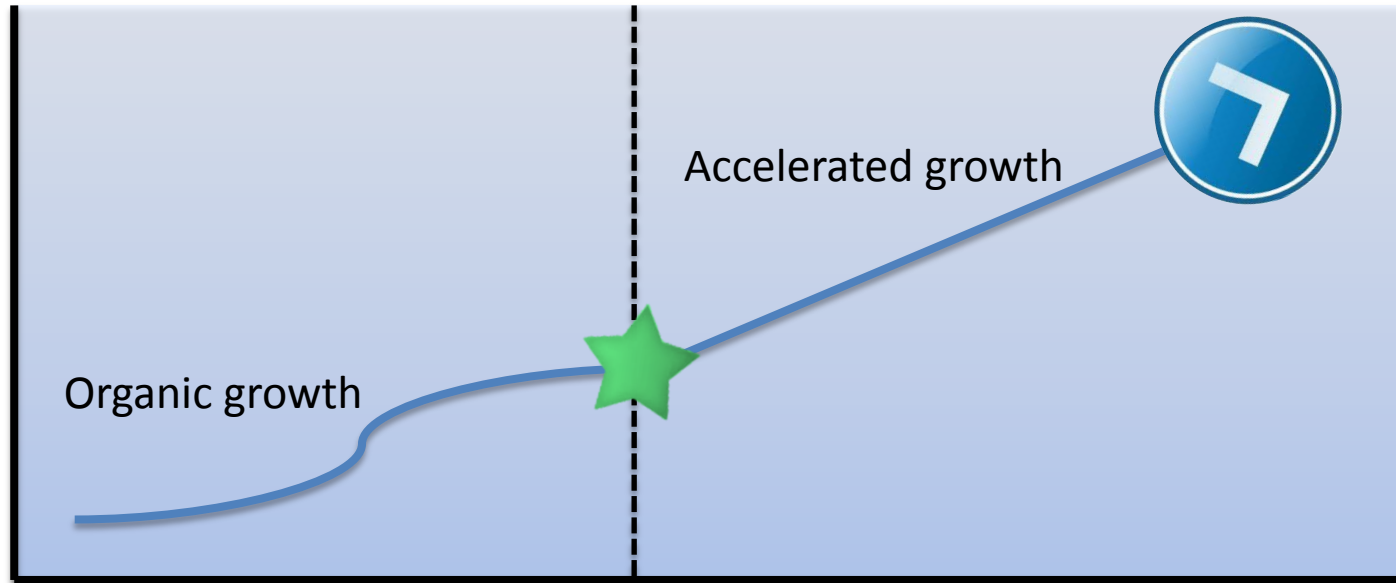
**INV** 68.8 m

**GNI** 211.9m

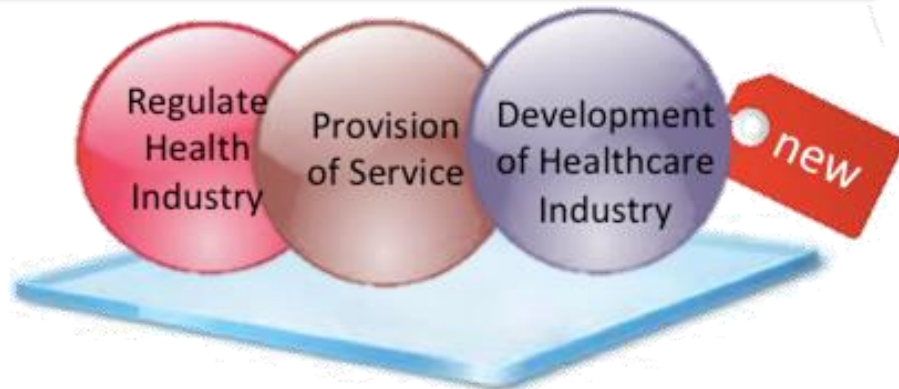


**1,800**

# Ministry of Health takes on an additional role

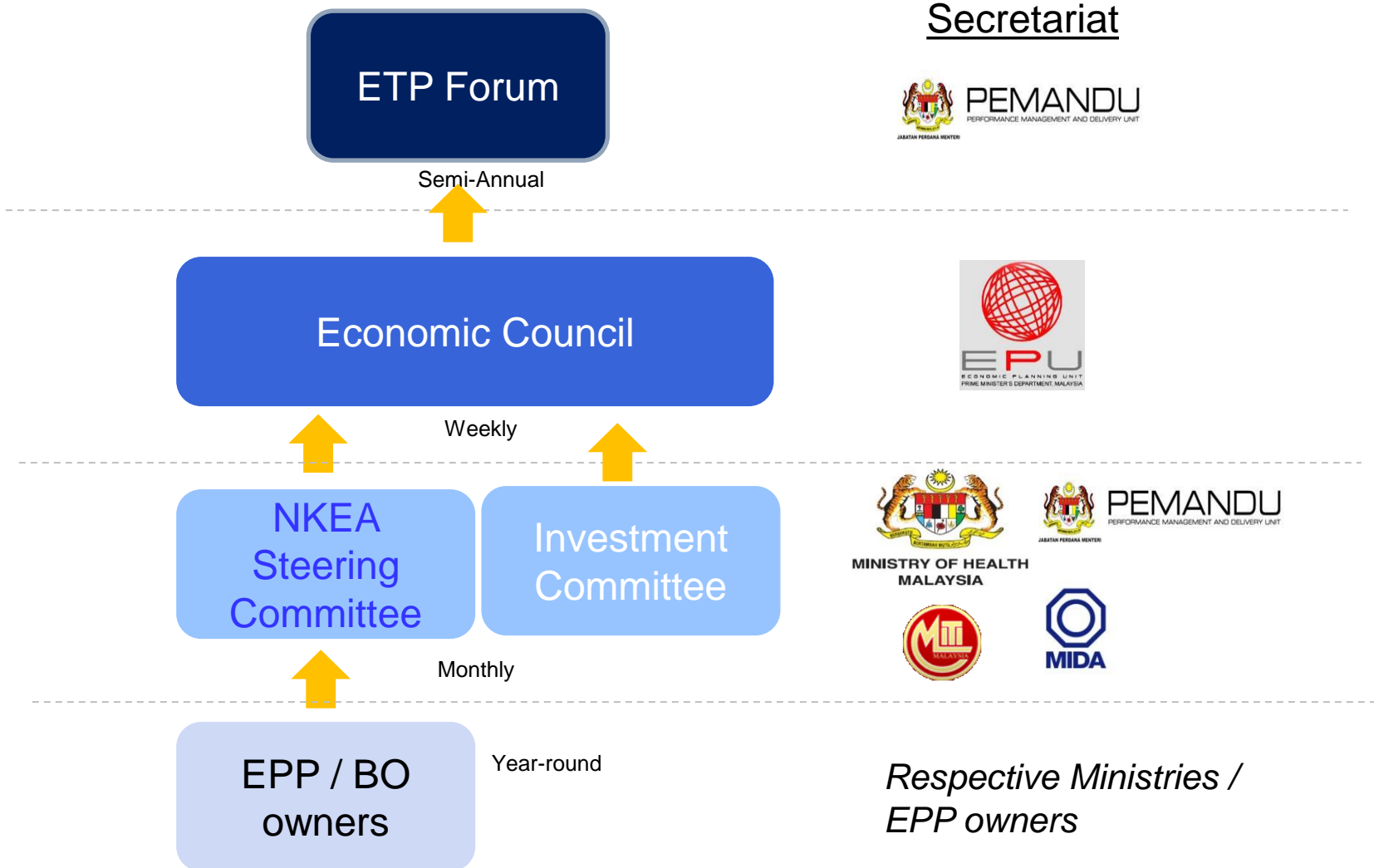


Traditional Role of MOH



New Role of MOH

# ETP Governance Structure to ensure delivery



# GTP, ETP Results Endorsed By An International Panel & Audit Firm



**Michael Hershman**  
Co-founder –  
Transparency  
International



**Sir Michael Barber**  
Ex-Head of  
PM's Delivery  
Unit UK



**Dr Yukon Huang**  
Senior  
Advisor,  
Carnegie Asia



**Andrew Lee**  
Strategy,  
Governance -  
Gov't Western  
Australia



**Dr Alex Mourmuras**  
Division Chief,  
IMF



**Dr Ravi Balakrishnan**  
Resident  
Representative  
IMF



**Michael Thatcher**  
Chief Tech  
Officer, Asia,  
Microsoft Corp



**Stephen Sedgewick**  
Public Service  
Commissioner  
Australisa



**Ambassador Ombeni Sefue**  
Gov't of  
Tanzania



**HK Yong**  
Advisor,  
Commonwealth  
Secretariat





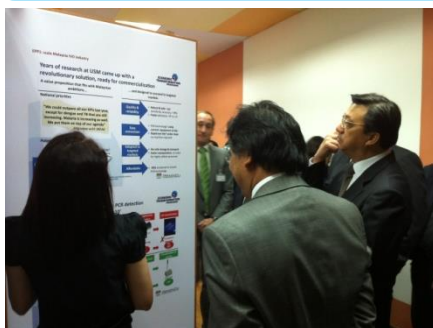
# How to participate in Healthcare NKEA?

**NKEA Labs**

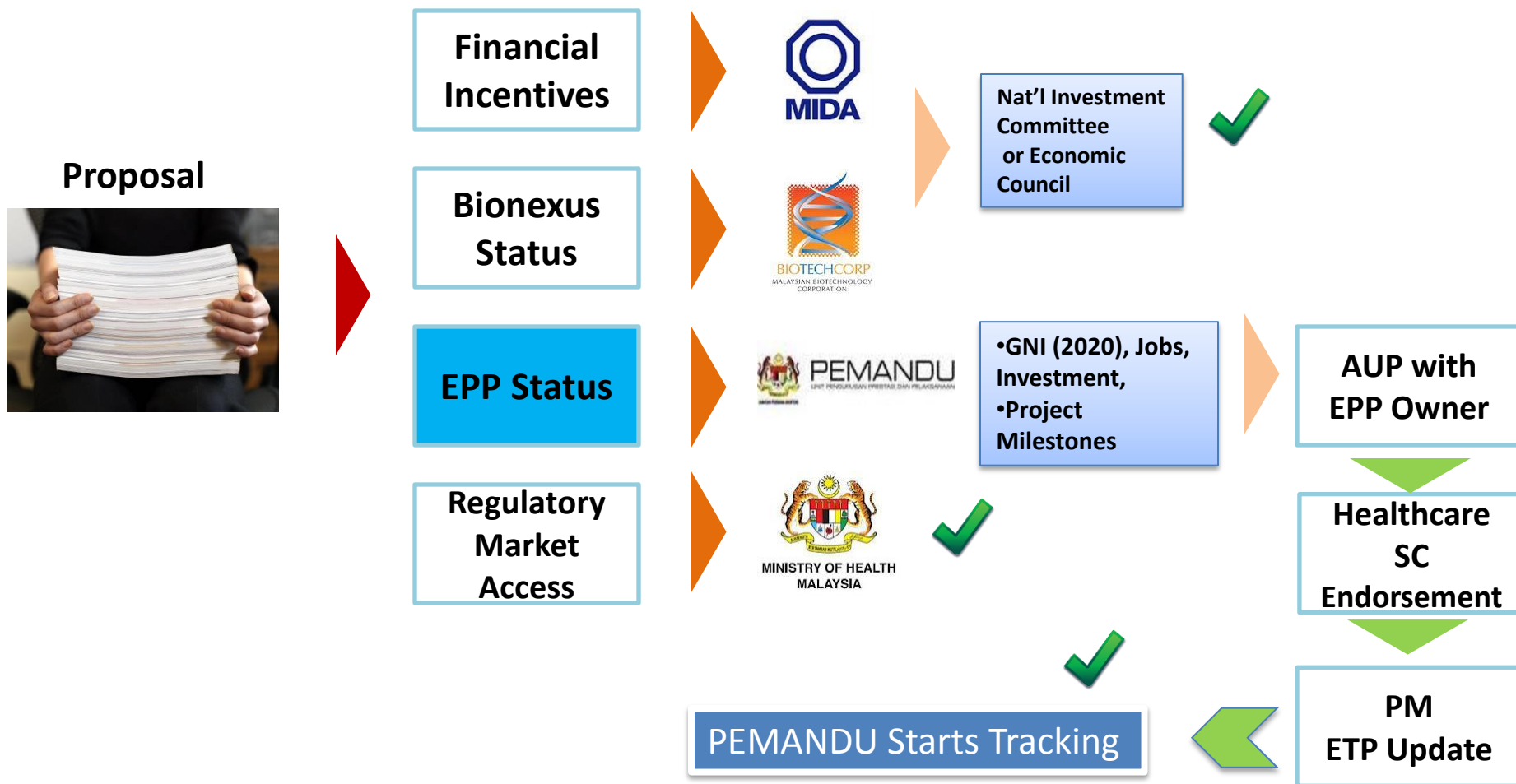
**Sources  
of EPPs**

**Agencies e.g. AIM,  
Biotech Corp, SME  
Corp, Commercial  
Banks, etc**

**Independent  
Proposals**



# Health Related EPPs - **Proposals**



# Healthcare Team's Role in NKEA

## Conduit between private Sector & Gov. ✓

- 1 Open doors to Central Agencies, Depts and Regulators (MOH)
- 2 Access to Top Decision Makers via PSM, NKEA SC and other Forums
- 3 Facilitation financing from both public & private sources
- 4 Recommend new policies, market access like Off-take Agreement
- 5 Initiate Dialogue/Cooperation between both public and private sectors

## Inter-NKEA Cooperation ✓

Mandated by PM to drive Transformation Programmes



PEMANDU  
PERFORMANCE MANAGEMENT AND DELIVERY UNIT

Cuts across all sectors and jurisdictions

## Programme Manage ✓

- 1 Track progress weekly
- 2 Intervene and Problem Solve
- 3 Facilitate smooth & Faster Execution

## Business Matching ✓

## Publicity ✓

- 1 Online Media
- 2 PM's ETP Progress Updates
- 3 Press Releases/Public Forums

## We track all NKEA on weekly basis

[Discipline of action]



# Online Dashboard

## From: Healthcare Team

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