

Interview: Ricardo Barros - Minister of Health, Brazil



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03.10.2017

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In an exclusive interview, Minister of Health of Brazil Ricardo Barros provides insights into his main achievements since being appointed in May 2016 and his key priorities to further improve the management and delivery of Brazil's public health system, while highlighting his expectations for pharmaceutical companies implanted in the country.

You became Brazil's Minister of Health in May 2016; what have been some of your main priorities since you took over?

One of the greatest challenges at stake for our country's health system is to square two competing dynamics: on the one hand, a rising healthcare demand driven by Brazil's rapidly aging population, and - on the other - the integration of new technologies that make health costs increase faster than the inflation rate. In the meantime, one should not overlook the comprehensiveness of Brazil's public health system, which provides all Brazilian citizens with access to more than 4,500 medical procedures and 860 pharmaceutical products.

In this context, improving the management and resource allocation of our country's Unified Health System (SUS) emerge as fundamental objectives of the Tripartite Inter-Managerial Commission, which gathers together the Ministry of Health (MoH), the Federal States' Health Secretariats and the Municipal Health Secretariats. As per the working of the Commission, we notably implemented a true paradigm shift in moving from a top-down approach - where the MoH used to be the sole entity in charge of policy design while the States and the Municipalities were only entitled to these policies' implementation - to a new model based on joint-resolutions including all parties. This

collaborative approach is aimed at enabling a higher level of commitment across all layers of our health system and its four million workers, especially through a more efficient management of the SUS' BRL 250 billion [USD 81 billion] annual budget.

In this regard, we implemented a stringent control and review of the SUS' spending. As per medicines, the comprehensive review of all purchasing schemes allowed us to save over BRL 4 billion [USD 1.3 billion] between 2015 and 2016 - out of a total budget of BRL 18 billion [USD 5.77 billion] annually allocated to medicine purchasing.

Additionally, in 2016 we implemented a joint-resolution regarding healthcare spending and investment that enacts the transfer of BRL 75 billion [USD 24 billion] of federal funding to the states and municipalities in order to reach a sounder balance between the three poles that compose our public system. As part of this new model, 50 percent of the overall health budget will be managed by the federal government, 25 percent by the states, and 25 percent by the municipalities.

Healthcare digitalization seems to hold a strategic importance in your agenda. What have been some of your main achievements and upcoming projects in this area?

We just started an ambitious plan to computerize Brazil's 40,000 primary care units, which notably includes the biometric registration of both patients and employees - an aspect that is fundamental to optimizing the resources invested in health. This comprehensive upgrade of our primary care centers will also ensure that those centers are better integrated into the overall health system while reducing waiting times and allowing a better follow-up of patients.

We consider digital solutions as great tools to further heighten the transparency of the SUS' processes - especially with regards to product purchasing. In addition to the abovementioned savings made when reviewing medicine purchasing, we also publicly release all data regarding the product prices, quantities, and providers involved in government tenders on a digital platform.

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Finally, we also developed a digital tool - called S-code - to monitor the evolution of the judicialization of health in the country *[which relates to Brazilian patients filing lawsuits to access a given healthcare product or service through the public health system, leveraging the fact that healthcare in Brazil is a constitutional right - Ed.]*. In 2016, the federal government, the state and the municipalities all together spent more than BRL 7 billion [USD 2.25 billion] as part of health-related lawsuits, which is particularly substantial. The S-code system will provide us with a better

control of all legal expenses involving the provision of healthcare and allow us to crosscheck information in order to combat fraud. In partnership with the National Council of Justice, we also set up expert centers to help judges for health-related lawsuits. These expert centers gather healthcare professionals in various fields with the objective to ensure that judges are able to swiftly receive medical insights before giving their verdicts. So far, such expert centers have already been implemented in 19 States and we plan to broaden this initiative to the rest of the country.

In the meantime, how do you go about concretely strengthening the country's medical capacities?

We notably concentrate our efforts at the first level of care. With regards to the SUS' 26,000 community agents, we implemented a specific training program and these agents are now be able to control blood pressure and perform diagnostic tests for leukemia, which will enable a closer control of chronic diseases and contribute to avoid their degeneration. Alongside the Ministry of Education and Culture, we also continue deploying the "Health at School" program, which aims to expand the implementation of vaccine cards and guidelines tackling obesity, while setting up tighter controls of eyesight, hearing, and oral health for Brazilian children.

In the meantime, we are strengthening the "More Doctors" program which aims to continuously increase the number of physicians in activity across the country - through three main pillars. The first one relates to the hiring of foreign physicians [*more than 60 percent of them being Cubans to date - Ed.*] who are then employed in rural and isolated areas of our country as part of an international agreement supervised by the Pan American Health Organization (PAHO). In the meantime, we have increased the number of institutions providing medical education and training in Brazil and added more than 150 medical courses to those already available.

The third pillar of our strategy specifically targets primary care physicians, who are around 67,000 in Brazil, and we want to further heighten this number by broadening the offering of residency programs available. We also plan to steadily implement a telemedicine-based system which will provide patients with support for diagnosis, recommendations, and prescriptions, following a successful pilot project set up in the state of Santa Catarina [*in the south of Brazil - Ed.*] which showed that - out of total of 5,000.000 appointments - 70 percent of them were treated without having to consult a specialist, thanks to this digital service.

Last but not least, I would also like to highlight that we made great progresses in tackling viral diseases: in comparison to 2015, we reduced by more than 85 percent the cases of dengue and by 35 percent those of chigungunya. Looking specifically at Zika virus, we were also able to put an

end to the state of emergency, as the number of cases decreased by more than 93 percent in comparison to 2015.

What are your expectations of pharmaceutical companies implanted in Brazil?

Pharmaceutical companies have a crucial role to play in building a more sustainable health system in Brazil, especially through the establishment of Partnerships for Productive Development (PDP). The latter notably encompass technology transfers and local manufacturing of patented, highly needed products through partnerships with Brazil's public laboratories. These partnerships then allow significantly lowering product prices and therefore extending healthcare access to all Brazilians. As we speak, scheduled investments related to PDPs amount to over BRL 6.5 billion [USD 2.1 billion] and will create more than 7,500 new jobs – only for the set-up of manufacturing facilities that will handle these technology transfers.

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In this regard, we invite new pharmaceutical companies owning strategic products and patents to reach out to the Ministry of Health and set up or develop their footprints in Brazil through PDPs.

You were appointed Minister of Health 18 months ago and the next Brazilian general elections will take place in exactly one year. Looking forward, what would you like to be seen as your legacy at the head of the Ministry of Health of Brazil?

Over the past months, we have developed a new way to design and implement health policies in this country, and I believe that this aspect is absolutely fundamental.

Furthermore, I believe that the rapid development of our health system's digital capacity will also stand as a significant legacy, as it will allow us to tremendously increase patient outcomes and generate substantial savings. We also expect the review of all purchasing schemes contracted by our health system to generate savings of over BRL 20 billion [USD 6.5 billion] annually, which also stands as a great progress with regards to our objective to deliver greater outcomes with existing resources.

In the grand scheme of things, my mission and that of my teams is to build a strengthened public health system whose management has been improved and optimized in all areas – and this is exactly the legacy that I want to leave.

As Minister of Health of Brazil, what would be your final message to our international readers?

Brazil undoubtedly holds great development opportunities for the global pharmaceutical, medical devices, and healthcare industries. In this regard, we hope to gain the trust of an increasing number of international investors in the upcoming months and jointly work on improving the healthcare products and services available to our 207 million Brazilian citizens.

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