



Notice on Issuing the Key Tasks for Correcting Unhealthy Practices in the Field of Pharmaceutical Procurement and Medical Services in 2025 ¹

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I. Comprehensively Strengthen the Top-Level Design of Rectification Work

(1) Strengthen the Party's Overall Leadership over Rectification Work. Guided by the Third Plenary Session of the 20th Central Committee of the Communist Party of China and General Secretary Xi Jinping's important expositions on building a Healthy China, efforts shall be made to strengthen system-wide study and implementation, ensuring that the Party's health and medical work policies in the new era are fully implemented. Active efforts shall be made to secure the support of Party committees and government authorities in terms of work priorities, resource allocation, and personnel deployment.

(2) Always Uphold the Correct Direction of Work. The rectification of improper practices and corruption affecting the public shall be continuously incorporated as a key focus in improving industry conduct, ensuring that all decisions and deployments of the CPC Central Committee and the State Council regarding the rectification of "mass corruption" are implemented faithfully and without deviation. The new situation and tasks of rectification work shall be thoroughly analyzed, close coordination with disciplinary inspection and supervisory bodies shall be

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maintained, and mechanisms for the concurrent investigation and rectification of improper practices and corruption shall be improved.

(3) Strengthen Integrity Construction in the Pharmaceutical and Health Sector. Consolidate and deepen the results of Party discipline education, make effective use of rectification work mechanisms, and ensure that tasks for strengthening integrity construction in the pharmaceutical and health sector are fully implemented. Substantially enhance Party building within medical and health institutions, prevent and mitigate risks and hidden dangers of improper practices in key areas and critical links of the pharmaceutical and health sector, and deepen reforms through lessons learned from cases. These measures aim to promote the establishment of new ethical standards and integrity within the industry.

II. Continuously Deepening Governance in the Pharmaceutical Procurement and Sales Sector

(4) Consolidating Governance Outcomes. Firmly prevent any resurgence of improper practices within the industry. Strengthen the analysis and early-warning mechanisms for new, evolving, and covert issues in the medical and health sector. Maintain strict oversight of “key personnel” and critical positions, and focus on regulatory priorities such as pharmaceuticals, high-value medical consumables, medical devices, infrastructure and information-technology project bidding, and logistical services. Continue to regulate conduct in key processes, including external transmission of testing samples, outsourced prescriptions, project approvals, and fund utilization. Increase the 力度 of administrative enforcement and judicial case handling.

(5) Strengthening Primary Responsibilities. Incorporate conduct-management requirements throughout the full administrative process of pharmaceutical procurement and sales. Give full play to the coordinated functions of relevant departments in institutional development, industry planning, standard formulation, market access, and administrative enforcement within the pharmaceutical procurement and sales sector. Ensure effective linkage among governance processes, promote the improvement of industry compliance systems, and comprehensively enhance standardized management across the pharmaceutical sector.

(6) Enhancing Penetrative Oversight. Leverage the advantages of penetrative auditing and strengthen special audits targeting the pharmaceutical industry. Establish regulatory pathways connecting raw-material procurement, production of pharmaceuticals and consumables, and tendering and procurement processes, and extend regulatory focus to the production side. Explore the establishment of a full-process traceability mechanism covering the manufacture, processing, distribution, and use of pharmaceuticals, and comprehensively advance the full-scenario application of traceability codes for pharmaceutical consumables. Strengthen publicity and guidance, encourage pharmaceutical enterprises to enhance compliance management with




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reference to the *Compliance Guidelines for Preventing Commercial Bribery Risks by Pharmaceutical Enterprises*, promote compliance management of pharmaceutical representatives in medical institutions, and continue to purify the order of pharmaceutical procurement and sales.

(7) Reinforcing Industry Self-Discipline. Urge the improvement of internal compliance governance bylaws within the industry. Improve the credit system for the pharmaceutical distribution sector and strengthen industry credit management. Improve the blacklist system for bribe-givers and bribe-takers, as well as the record system for non-compliant entities in the pharmaceutical procurement and sales sector. Implement supervisory responsibilities over social organizations in the pharmaceutical industry that provide business guidance, regulate compensated concurrent positions, journal management, and conference organization, strictly review the establishment of branch institutions, and actively guide industry organizations to enhance their professionalism and credibility.

III. Systematically Rectifying Irregularities in Medical Services

(8) Strengthening Special Governance of Prominent Issues. Make integrated use of prescription inspections, intelligent alerts, unannounced inspections, performance evaluations, hospital inspections, reviews of cases with abnormal hospitalization expenses, as well as statistical, audit, and complaint-handling mechanisms. Focus on unlawful and irregular conduct in key areas such as patient privacy protection, genetic testing, assisted reproduction, medical aesthetics, prevention and control of myopia in children, and the issuance of medical certificates. Carry out in-depth rectification of corruption and misconduct in the funeral and burial sector, and maintain a sustained high-pressure stance against corruption.

(9) Regulating Internet-Based Medical Practices. Focus regulatory supervision on key aspects of online medical services, including qualification requirements, consistency of online medical activities with the service scope of affiliated physical medical institutions, the conduct of diagnostic and treatment activities, and the management of online prescriptions. Intensify oversight of “online medical services.” Target unlawful activities such as online medical impostors, illegal dissemination of pharmaceutical advertisements, and schemes that use purported medical science popularization or conference activities for improper “traffic generation” or product marketing, as well as the fabrication, alteration, or misuse of videos of current or retired medical personnel for commercial gain. Establish and improve a multi-departmental coordinated enforcement mechanism for addressing online violations related to medical services.




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(10) Strengthening Internal Management of Medical Institutions. Strictly implement the system under which the president assumes overall responsibility under the leadership of the Party committee. Establish and improve internal control mechanisms, strictly enforce the “three majors and one large” decision-making system, and create institutional arrangements enabling Party branches in public medical institutions to participate in major decision-making within their scope of duties and authority. Strengthen the development of discipline inspection bodies within public medical institutions. Advance coordinated medical-education reform to reinforce the construction and management of university-affiliated hospitals. Implement key requirements for conduct-management systems in public medical institutions, reinforce internal special audits, improve internal control and compliance systems, establish risk-warning and prevention mechanisms, intensify accountability for violations, and refine supporting measures for institutional conduct management.

(11) Strengthening Management of Medical Ethics and Professional Conduct. Ensure that medical institutions fully assume their primary responsibilities and effectively fulfill their obligations in managing medical ethics and professional conduct. Enhance routine education and guidance for medical personnel and integrate the cultivation of professional conduct with efforts to improve professional competence. Maintain “zero tolerance” for individual medical personnel who violate medical ethics, undermine professional conduct, harm the public interest, infringe patient rights, or damage the reputation of the industry, and impose strict disciplinary measures.

(12) Safeguarding the Security of Medical Insurance Funds. Maintain close oversight of designated medical institutions, designated retail pharmacies, and professional insurance defrauders, and impose strict penalties on fraudulent medical insurance activities and violations involving improper use of medical insurance funds. Make full use of multi-department joint disciplinary mechanisms. Fully implement the *Guiding Opinions on Establishing a Qualification Management System for Medical Insurance Payment by Personnel of Designated Medical Institutions*, thereby achieving true “person-level” supervision. Accelerate efforts to improve and expand volume-based centralized procurement of pharmaceuticals and high-value medical consumables, and optimize provincial pharmaceutical centralized procurement platforms and intelligent regulatory systems. Advance governance of online-listed drug prices in greater depth and promote inter-regional harmonization and standardization of online-listing rules.

IV. Conscientiously Advancing Implementation and Safeguard Measures

(13) Strengthening Overall Coordination. Leverage misconduct-correction mechanisms to enhance unified planning, act proactively, and strengthen face-to-face communication among departments to improve policy coordination and operational alignment. Further reduce burdens on primary-level institutions, conduct coordinated “dual-random, one-public” inspections,




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innovate regulatory approaches, and enhance regulatory effectiveness through information sharing and intelligent supervision.

(14) Improving Long-Term Mechanisms. Strengthen the culture of integrity in the pharmaceutical sector and reinforce the construction of medical ethics and professional conduct. Carry out comprehensive and routine education on laws, regulations, and disciplinary requirements. Vigorously promote the spirit demonstrated in combating SARS, the great spirit of epidemic prevention and control, and the noble professional ethos of the medical community, thereby enhancing humanistic literacy and legal literacy in the practice of medicine. Conduct effective evaluations of medical ethics and explore mechanisms linking evaluation results with job appointments, professional-title reviews, compensation, and awards, to foster a clean and upright industry environment.

(15) Strengthening Organizational Implementation. Ensure that rectifying misconduct in pharmaceutical procurement and medical services is incorporated as a key component of departmental responsibilities, with clear and detailed task lists to guarantee effective implementation. Deepen policy interpretation and guidance, and continuously enhance legal publicity and warning education. Encourage broad participation from society in supervisory efforts and steadily improve a governance framework characterized by government oversight, industry self-discipline, and social co-governance.



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