

RANK	SCORE
<b>15</b>	<b>2.60</b>
19 (2021)*	

# Bristol Myers Squibb

Stock exchange: NYSC • Ticker: BMJ • HQ: New York, United States • Employees: 32,200

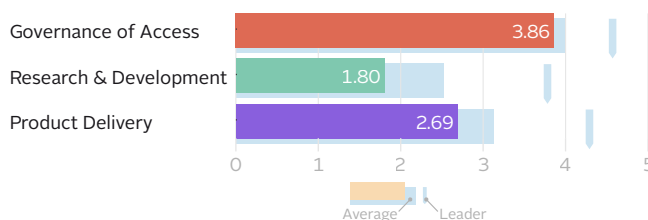
## PERFORMANCE IN THE 2022 INDEX

15<sup>th</sup> place. Bristol Myers Squibb performs below average in two of three Technical Areas. The company has performed below average for access strategies, yet it performs strongly in health systems strengthening. It has improved in access planning in R&D but has a small-sized priority pipeline.

**Governance of Access:** 14<sup>th</sup> place. Bristol Myers Squibb has an average performance in this area. It has an access-to-medicine strategy integrated within the overall corporate strategy. It provides evidence of financial and non-financial access-related incentives at the executive level but does not disclose whether in-country managers or the CEO are also incentivised toward access goals.

**Research & Development:** 17<sup>th</sup> place. Bristol Myers Squibb performs poorly in this area. The company has a structured access planning process in place, but it does not apply this to all late-stage candidates. The company has an average performance in R&D capacity building.

How score was achieved



**Product Delivery:** 15<sup>th</sup> place. Bristol Myers Squibb has a below average performance in this area. The company has strengthened its performance in manufacturing capacity building by participating in technology transfers, yet its performance in equitable access strategies is below average for certain products. It engages in high quality health systems strengthening initiatives but lacks involvement in supply chain capacity building. The company has non-exclusive voluntary licensing agreements in place for two compounds to enable generic supply in LMICs.

## OPPORTUNITIES FOR BRISTOL MYERS SQUIBB

**Develop access-related incentives for senior management.** Bristol Myers Squibb has an access strategy linked to sustainability goals, which includes all therapeutic areas in which the company is involved. Financial and non-financial incentives for the CEO and in-country managers can be tied to the achievement of the sustainability goals under their access strategy. The incentives can also be oriented toward long-term goals.

**Ensure all late-stage R&D projects have comprehensive access plans.** Bristol Myers Squibb can develop access plans for all projects from Phase II of clinical development. The company has plans in place for 73% of late-stage projects. These plans primarily consist of commitments to registering products in countries where clinical trials for that product have been conducted. Access plans for nivolumab (Opdivo®) and pomalidomide (Pomalyst®), indicated for multiple cancer types, can also include additional access components such as equitable pricing.

**Improve access to on-patent cancer drugs on WHO Model List of Essential Medicines (EML).** Bristol Myers Squibb has four on-patent products on the WHO EML, including dasatinib (Sprycel®), a product indicated for imatinib-resistant chronic myeloid leukaemia. The company provides access to dasatinib in at least one upper-middle income country via an equitable pricing strategy and to low-income countries and lower-middle income countries via the Max Foundation donation programme. Bristol Myers Squibb can expand access to the product via registration, equitable pricing and non-exclusive voluntary licensing agreements in more countries, especially those where the burden of disease is the highest, such as Afghanistan, Haiti and Ethiopia.

## CHANGES SINCE THE 2021 INDEX

- Launched the first ever Global Access Report, which highlights Bristol Myers Squibb' efforts and progress towards advancing access to healthcare and health equity globally.
- Newly demonstrates evidence that sales agent incentives are decoupled from sales volume targets.
- Introduced a structured framework to include access planning in all its pipeline projects.
- Started a new capacity building initiative with multiple partners to support sustainable and effective administration of innovative therapies for the treatment of cancer in LMICs.
- Newly licensed the >4000-member library to Medicines for Malaria Venture (MMV) in addition to donating USD 1 million to support the missions of both MMV and Drugs for Neglected Diseases *initiative* (DNDi).
- Joined the Access to Oncology Medicines (ATOM) Coalition, a new global initiative that aims to improve access to essential cancer medicines in LMICs.
- Acquired a global exclusive license to develop, manufacture and commercialise Rockefeller's novel monoclonal antibody duo treatment against COVID-19.

All companies were assessed based on information that was valid in the latest period of analysis (ending at 31 May 2022). This data was either submitted by companies, found in the public domain or was accessible through other sources.

The term LMICs is used to denote all low- and middle-income countries in scope of the Index, except when analysing companies' access strategies where the use of LMIC refers to lower-middle income countries as per the World Bank

income groups classification. Likewise, the terms LIC and UMIC refer to low income countries and upper-middle income countries.  
\*In the 2021 Index, dense ranking was used. In the 2022 Index, standard

competitive ranking is used. Therefore, a direct comparison with Bristol Myers Squibb's previous rank is not possible.

### SALES AND OPERATIONS

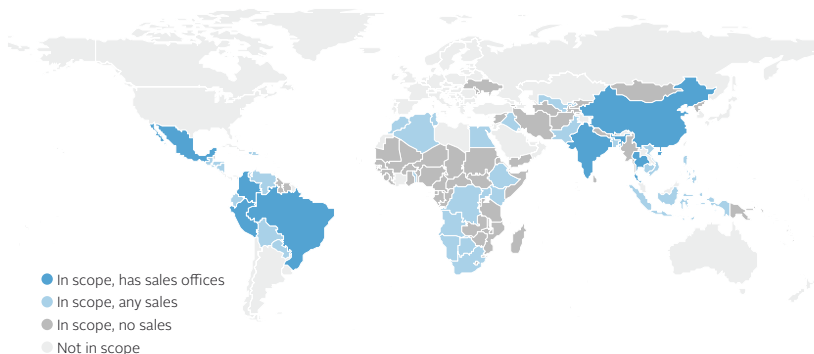
**Business segments:** Pharmaceutical.  
**Therapeutic areas:** Cardiovascular disease, fibrotic disease, haematology, immunology and oncology.  
**Product categories:** Innovative medicines.  
**M&A news:** Bristol Myers Squibb acquired Turning Point Therapeutics in June 2022 for USD 76.00 per share.

Bristol Myers Squibb's products are sold in **38 out of 108 countries in scope of the Index**. Bristol Myers Squibb has sales offices in 7 countries, and sells via suppliers and/or pooled procurement in an additional 31 countries.

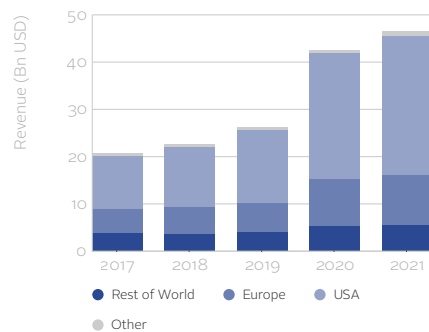
**Revenue by segment (2021) – in USD**

Pharmaceutical	46.39 bn
<b>Total</b>	<b>46.39 bn</b>

#### Sales in countries in scope



#### Sales by geographic region



### SAMPLE OF PIPELINE AND PORTFOLIO ASSESSED BY THE INDEX

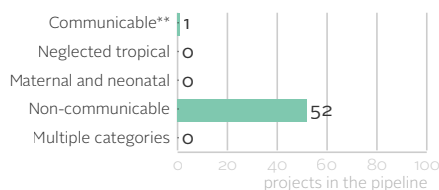
#### PIPELINE for diseases in scope

Bristol Myers Squibb has a total of 53 R&D projects in scope with one project targeting a priority disease. This project targets COVID-19. The other 52 R&D projects target other diseases in scope. These projects mainly focus on oncology (47 projects). Eleven R&D projects are in late-stage development that target either a priority disease (1) or address a public health need in LMICs (10)\* Evidence of access planning was in place for 73% of these projects: none targeting a priority disease and eight addressing a public health need in LMICs.

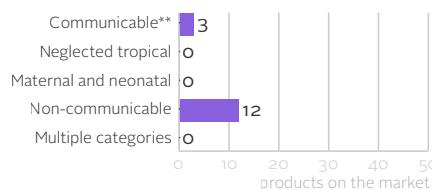
#### PORTFOLIO as selected for analysis by the Index

Bristol Myers Squibb has 15 medicines in scope, 12 of which are on patent. 33% of these medicines (5) are on the WHO EML. The off-patent medicines target mainly non-communicable diseases such as cancer (2) and thalassaemia (1). The on-patent medicines mainly target cancer (9), HIV/AIDS (2) and viral hepatitis C (1).

#### 53 projects in the pipeline



#### 15 products as selected for analysis by the Index\*



#### Breakdown of projects

	Discovery	Pre-clinical	Phase I	Phase II	Phase III	Registration/approval	Other***	Total
Targets established R&D priorities	0	0	0	1	0	0	0	1
Addresses needs of LMICs*			4	3	5	2	0	14
Other projects in scope			25	10	2	1	0	38

#### Breakdown of products

	WHO EML	Non-EML	WHO EDL	Other	Total
Medicines on patent	4	8	0	0	12
off patent	1	2	0	0	3
Vaccines	0	0	0	0	0
Contraceptives	0	0	0	0	0
Diagnostics	0	0	0	0	0
Other†	0	0	0	0	0

\*50 diseases and 243 product gaps in scope have been established as a priority by global health stakeholders. For other diseases, the Index used a set of criteria to determine which projects in the pipeline offer a clear public health benefit to patients in LMICs. Only projects in

the clinical phase of development were included for this analysis. \*\*Neglected tropical diseases, while also communicable, are highlighted separately throughout the Index. \*\*\*Other includes projects that have a technical lifecycle and projects that fol-

low a different development cycle (e.g. diagnostics). †Products included in the analysis were selected using a set of criteria determined by stakeholder consensus. ‡Other includes vector control products.

# Bristol Myers Squibb

## GOVERNANCE OF ACCESS

RANK 14

SCORE 3.86

**Has an access-to-medicine strategy with measurable objectives.** Bristol Myers Squibb performs strongly. Its strategy is fully integrated within the overall corporate strategy and covers all of the therapeutic areas in which the company is involved. The highest responsibility for access lies directly with the board, with the Board Chair and CEO responsible for final decisions regarding the development of each product's access strategy and programs.

**Provides evidence of financial and non-financial access-related incentives at the executive level.**

Bristol Myers Squibb performs below average. It incentivises its senior executives to take action on access to medicine with financial and non-financial rewards. It does not disclose, however, whether in-country managers or the CEO are also incentivised toward access goals.

**Publicly discloses outcomes its access-to-medicine activities.**

Bristol Myers Squibb performs strongly in transparency of access activities. It publicly discloses commitments, measura-

ble goals, objectives and sustainability targets, including enhancing patient access to medicines. It facilitates accountability and transparency by consistently sharing the outcomes of its access-to-medicine activities in a centralised manner within its Global Access Report.

**Performs above average in responsible promotional practices.**

Bristol Myers Squibb's sales agents are not solely incentivised on sales volume. However, the level at which sales targets are set varies at the individual, team, business unit, national and global level, as well as by therapeutic area. It publicly discloses information related to transfers of value to healthcare professionals in countries in scope of the Index (e.g., payments for attending events or promotional activities) in accordance with laws and regulations.

**Has a robust set of compliance controls to ensure that governance efforts are not undermined by non-compliant or corrupt activities.**

Bristol Myers Squibb performs strongly, demonstrating evidence of all components looked for by

the Index: fraud-specific risk assessment, country risk-based assessment, a continuous system to monitor activities, audits (both internal and external, covering third parties and in all countries where it operates) and has formal processes to ensure compliance with company standards by third parties. No breaches in countries in scope of the Index were publicly found in the period of analysis.

**Does not publicly support the Doha Declaration on TRIPS and Public Health.**

Bristol Myers Squibb does not publicly share any support of the Doha Declaration on TRIPS and Public Health. There is evidence of industry association lobbying on IP and the usage of TRIPS flexibilities, namely of compulsory licensing, by national governments in some countries in scope of the Index. As a member of the industry association, Bristol Myers Squibb, like all other member companies in scope of the Index, is by default connected to this activity.

## RESEARCH & DEVELOPMENT

RANK 17

SCORE 1.80

**Access planning processes encompass all projects in the pipeline.**

Bristol Myers Squibb has a structured process in place to develop access plans during R&D. The process is intended to be applied to all R&D projects (both in-house and collaborative) for diseases in scope of the Index. The phase at which access planning begins depends on the product.

**A small-sized priority R&D pipeline compared to its peers, with no access plans in place.**

Bristol Myers Squibb has one late-stage candidate in its pipeline that targets a priority product gap. This is the clinical development of abatacept (Orencia®) to treat COVID-19. Bristol Myers Squibb did not submit evidence of an access plan for this project.

**Some projects address a public health need in LMICs,\* with 80% (8/10) of late-stage projects covered by access plans.**

In this analysis,

Bristol Myers Squibb has ten late-stage R&D projects that target a disease and/or product gap not yet established as a priority by global health stakeholders. These projects are all deemed by the Index to offer a clear public health benefit for people living in LMICs.\* Primarily, these projects concern clinical trials in countries in scope of the Index and/or are first-in-class molecules. Most target cancer. These plans primarily relate to Bristol Myers Squibb's commitment to register in the countries where it is carrying out clinical trials. Therefore, plans for registration in countries within scope of the Index apply to eight pipeline projects.

**Does not publicly disclose R&D investment data disaggregated by disease category, product type or phase of development.**

Bristol Myers Squibb does not disclose disaggregated R&D investment data to global health organisations.

**One R&D capacity building initiative included for analysis meets all Good Practice Standards.**

Bristol Myers Squibb's performance is average in this area. The number of initiatives meeting all inclusion criteria is lower than average and fewer initiatives meet all Good Practice Standards than what is average for this indicator. Bristol Myers Squibb supports the sustainable and effective administration of innovative therapies for the treatment of cancer in LMICs through its Innovative Cancer Medicines (ICM) partnership with the Parker Institute for Cancer Immunotherapy and the Clinton Health Access Initiative.

\*50 diseases and 243 product gaps in scope have been established as a priority by global health stakeholders. For other diseases, the Index used a set of criteria to determine which projects in the pipeline offer a clear public health benefit to

patients in LMICs. Projects in the clinical phase of development were included for this analysis.

## PRODUCT DELIVERY

RANK 15

SCORE 2.69

**No public commitment not to enforce patents in countries in scope.** Bristol Myers Squibb does not have a public commitment not to file or enforce patents in LMICs. Bristol Myers Squibb commits to ensure that its patents do not prevent inexpensive HIV/AIDS therapy in resource-constrained countries and regions such as sub-Saharan Africa and India.

**Publicly discloses information on patent status.** Like most of its peers, Bristol Myers Squibb discloses the patent statuses for small molecules in scope via the Pat-INFORMED database. Bristol Myers Squibb discloses this information also in other websites regarding a subset of products.

**Is an average-performing company in terms of sharing intellectual property (IP) assets with third-party researchers.** Bristol Myers Squibb engaged in one new IP-sharing agreement with third-party research institutions or drug discovery initiatives established during the current analysis period that meets all inclusion criteria for evaluation. The company does have existing agreements of this nature in place that were established before the current period of analysis and meet all inclusion criteria for evaluation.

**Uses licensing to enable generic supply.** Bristol Myers Squibb has non-exclusive voluntary licensing agreements in place for two compounds (for the diseases in scope). Its broadest licence, for atazanavir sulfate (Reyataz®), encompasses 97 countries within the scope of the Index, including 71 middle-income countries.

**Filed to register new products in four countries in scope on average.** Bristol Myers Squibb did not disclose evidence of filing for registration any of its new products in more than half of the top ten high burden countries. Among old products, its most widely filed is lenalidomide (Revlimid), for non-Hodgkin lymphoma, filed for registration in 20 countries in scope of the Index, including three high burden countries (Bolivia, Ecuador and Peru). Eight out of its ten products analysed have been filed for registration in one LIC.

**Has access strategies for its supranationally procured product in scope for this analysis.** Bristol Myers Squibb has an average performance in securing access for its product procured supranationally. The company demonstrates strategies both in countries eligible for supply from such procurers and in at least one non-eligible country. For example, it provides atazanavir sulfate (Reyataz®) at a not-for-profit price through a supranational agreement with The Global Fund. Bristol Myers Squibb has also signed a non-voluntary licensing agreement with the Medicine Patent Pool (MPP) to facilitate access to 97 countries in scope of the Index, including Algeria, a

country non-eligible to benefit from The Global Fund supranational procurement agreement. The company provides evidence of patient reach, reporting that through the MPP license, 2.1 million patients per year were reached.

**Has few access strategies for its health-care practitioner-administered products in scope of this analysis.** Bristol Myers Squibb performs below average in this area. It provides evidence of access strategies in UMICs and LMICs for three products assessed. For example, in China, it ensured the inclusion of two cancer drugs nivolumab (Opdivo®) and ipilimumab (Yervoy®) on private insurance lists. To maximise patient reach, Bristol Myers Squibb works with a charity organisation, Cancer Foundation of China, to implement a patient assistance programme whereby Bristol Myers Squibb shares the medicines' costs with the patient. Evidence of an increase in patient reach through these approaches is available.

**Has few access strategies for its self-administered products for some countries in scope of this analysis.** Bristol Myers Squibb performs below average in this area. It provides evidence of access strategies in countries of all assessed income levels (UMIC, LMIC, LIC) for one of the two products assessed, dasatinib (Sprycel®), an oncology medicine. Bristol Myers Squibb demonstrated to consider relevant payers' ability to pay by securing public reimbursement of dasatinib and lenalidomide (Revlimid®) in Mexico and Morocco respectively, where public coverage is approximately 83% and 30% of the population. Evidence that demonstrates patient reach through these approaches is available.

**The one manufacturing capacity building initiative included for analysis meets all Good Practice Standards.** Bristol Myers Squibb's performance is average in this area. The number of initiatives meeting all inclusion criteria is lower than average and fewer initiatives meet all Good Practice Standards than what is average for this indicator. From 2011 until February 2022, the company was involved in a technology transfer agreement to expand access to atazanavir sulfate (Reyataz®) in Brazil.

**No supply chain capacity building initiatives included for analysis.** There is no evidence — in the public domain or disclosed to the Index — of supply chain capacity building initiatives active during the period of analysis that met inclusion criteria for evaluation. Bristol Myers Squibb's performance is below average in this area.

**All five health systems strengthening initiatives included for analysis meet all Good Practice Standards.** Bristol Myers Squibb is one

of the leaders in this area. The number of initiatives meeting all inclusion criteria is higher than average and more initiatives meet all Good Practice Standards than what is average for this indicator. For example, the company collaborates with University Research Co. (URC) on the Multinational Lung Cancer Control Program — a lung cancer programme implemented in seven countries to improve access to early diagnosis by addressing barriers to care.

**Has no inclusive business models that meet all inclusion criteria.** There is no evidence that Bristol Myers Squibb has engaged in the piloting or scale-up of any inclusive business models that aim to meet the access needs of populations at the base of the income pyramid (including other underserved populations) in LMICs. Bristol Myers Squibb performs below average in this area.

**Shows average performance in terms of ensuring continuous supply of medicines in LMICs.** Bristol Myers Squibb manages a buffer stock of relevant products, is involved in technology transfers to local manufacturers in LMICs, and shows evidence of working with stakeholders to communicate issues that may impact the supply chain. The company does not show evidence of efforts to work with multiple active pharmaceutical ingredient suppliers or engage in supply chain capacity building initiatives that meet inclusion criteria for evaluation.

**Has a policy for reporting substandard and falsified (SF) medicines in countries in scope of the Index in less than ten days.** Bristol Myers Squibb has a policy for reporting SF medicines to relevant health authorities within the timeframe of ten days looked for by the Index. There is no evidence found publicly of a shortened timeframe for reporting cases which only require visual inspection to be confirmed.

**Donates in response to expressed need and monitors delivery.** Bristol Myers Squibb has public policies and supply processes in place to ensure ad hoc donations are carried out rapidly in response to expressed need, and it shows some evidence of monitoring the delivery of donations.

**Has no long-term donation programmes for neglected tropical diseases or malaria that are eligible for analysis under this indicator.** However, the company is engaged in another structured donation programme: the Max Access Solutions programme where it donates dasatinib (Sprycel®) for leukaemia to 29 countries since 2017.