WEEKLY REPORT

04/25/2026

BRAZILIAN MUNICIPALITIES RELY ON CONGRESSIONAL EARMARKS TO FUND HEALTHCARE AMID UNEQUAL DISTRIBUTION

Brazilian municipalities are becoming increasingly dependent on congressional earmarks to finance healthcare services, exposing significant regional inequalities in how federal resources are distributed. An analysis cited by O Estado de S. Paulo shows that a growing share of municipal health funding now comes from discretionary amendments made by lawmakers, with smaller cities often relying on these transfers to maintain basic services, purchase equipment and expand local care capacity. The report highlights that the allocation of healthcare earmarks remains highly uneven, often reflecting political influence rather than technical criteria tied to population needs or service demand. Public health experts warn that growing dependence on congressional amendments may distort long-term planning, create uncertainty for municipal health systems, and deepen disparities in access to care across Brazil. The debate comes as Congress and the federal government continue broader negotiations over transparency and oversight of budget earmarks. Read more.

BRAZIL'S CORPORATE HEALTH PLANS RISE AT TWICE INFLATION AS EMPLOYERS CUT BENEFITS

Corporate health insurance plans in Brazil are expected to rise between 9% and 10% in 2026, roughly double the country's projected inflation rate of 4.8%, increasing pressure on employers that provide healthcare benefits to workers. While lower than the average 11% increase seen in 2025, the hikes continue to reflect elevated medical inflation, pharmaceutical costs, and healthcare utilization trends in Brazil's supplementary health market. To contain costs, insurers are increasingly tightening reimbursement rules, expanding co-payment models and reducing access to premium hospital networks. Data from the National Supplementary Health Agency – ANS show that corporate plans with co-payments rose from 53.3% in 2020 to 59.1% in 2024, as insurers push beneficiaries toward lower-cost provider networks. Analysts say the sector's financial recovery may ease future adjustments, but companies are likely to continue redesigning benefits as healthcare affordability remains a major concern. Read more.

BRAZIL'S PRIVATE HEALTH INSURANCE MARKET FACES PRESSURE FROM AGING BENEFICIARIES AND HIGH TURNOVER

Brazil's private health insurance market is expanding, but new data from the Institute for Supplementary Health Studies (IESS) show that growth is being driven by intense beneficiary turnover rather than sustained new enrollment. Over the 12 months through February 2026, the sector recorded an average of 1.3 million new enrollments and 1.2 million cancellations per month, reaching roughly 53 million beneficiaries. The figures suggest that recent growth reflects constant churn, with monthly entries and exits each representing about 2.5% of the total customer base. At the same time, insurers are facing a steadily aging membership base, with beneficiaries aged 60 and older now representing nearly 16% of the market, up from about 11% in 2000. The number of beneficiaries in this age group rose by approximately 260,000 over the past year alone, increasing pressure on healthcare costs as older patients typically require more complex care. Corporate health plans continue to drive most of the market's expansion, while individual plans continue to decline — a trend that could intensify regulatory and affordability debates in Brazil's supplementary health sector. Read more.

BRAZIL'S ANS SHIFTS FOCUS FROM LIMITED HEALTH PLANS TO REGULATING DISCOUNT HEALTHCARE CARDS

Brazil's National Supplementary Health Agency – ANS has shelved its proposal to create lower-coverage health plans limited to elective consultations and basic exams, redirecting its efforts toward regulating the fast-growing market for healthcare discount cards and prepaid medical services. Companies operating these products now have 60 days to submit operational data to the agency, including information on pricing models, service coverage, and geographic reach. The move follows concerns that loosely regulated discount card products could mislead consumers by resembling traditional private health insurance plans without assuming the same financial risk for medical care. ANS also created an internal committee to develop regulatory guidelines after Brazil's Superior Court of Justice (STJ) affirmed the agency's authority to oversee the segment. The agency simultaneously ended discussions around a regulatory sandbox for simplified health plans, signaling a broader consumer protection focus in Brazil's supplementary health market. Read more.

BRAZIL STUDY DETAILS NEW SUPREME COURT CRITERIA FOR COVERAGE OUTSIDE ANS REIMBURSEMENT LIST

A new legal and scientific study released in Brasília maps the practical effects of Brazil's Supreme Federal Court (STF) ruling in ADI 7265, which reshaped when health insurers can be required to cover treatments not included in the mandatory reimbursement list maintained by the National Supplementary Health Agency (ANS). The study argues that the long-running debate over whether the ANS list is exhaustive has become less relevant after the court established five cumulative criteria for exceptional coverage. Under the ruling, patients seeking coverage for out-of-list treatments must demonstrate: a valid medical prescription, no express rejection by ANS, lack of an adequate therapeutic alternative already covered, strong scientific evidence supporting efficacy and safety, and regulatory approval from the Brazilian Health Regulatory Agency – Anvisa. The study also highlights that courts are expected to give greater deference to ANS technical decisions, potentially narrowing judicialization in Brazil's private healthcare market. Read more.

BRAZIL'S HEALTH INSURERS COULD FACE RENEWED CONGRESSIONAL SCRUTINY IN ELECTION YEAR

Brazil's private health insurance sector may once again face pressure from Congress in 2026, even though lawmakers and industry executives do not expect a major overhaul of the long-debated health insurance bill. According to stakeholders interviewed by Futuro da Saúde, election-year politics could still accelerate narrower legislative proposals tied to high-profile consumer complaints, coverage disputes, and politically sensitive healthcare issues. Industry representatives warned that Congress has recently advanced complex healthcare measures during election cycles (including legislation on nursing wage floors and broader coverage obligations) often under intense public pressure. While there is limited visibility on specific proposals likely to move this year, executives say issues such as reimbursement disputes, cost-sharing models and regulatory oversight remain vulnerable to renewed legislative action as Brazil's supplementary health sector faces growing affordability and sustainability pressures. Read more.

BRAZIL'S ANVISA EXPANDS MOUNJARO APPROVAL TO CHILDREN WITH TYPE 2 DIABETES

The Brazilian Health Regulatory Agency (Anvisa) has approved the use of Mounjaro (tirzepatide), developed by Eli Lilly and Company, for children and adolescents aged 10 to 17 with type 2 diabetes. The decision expands the drug's label beyond adults and makes Mounjaro the first dual GIP/GLP-1 receptor agonist authorized for pediatric patients in Brazil. The approval was supported by data from the phase 3 SURPASS-PEDS trial, which showed a reduction of more than two percentage points in hemoglobin A1c levels and up to a 12% decline in body mass index among adolescent patients. Anvisa said the label expansion addresses a

growing public health challenge, with roughly 213,000 Brazilian adolescents living with type 2 diabetes, as demand rises for newer metabolic therapies in the country. Read more.

BRAZIL TIGHTENS OVERSIGHT OF COMPOUNDED WEIGHT-LOSS DRUGS AMID POLITICAL PRESSURE

Brazil's health regulator, the Brazilian Health Regulatory Agency (Anvisa) is tightening oversight of compounded weight-loss drugs and products entering the country from Paraguay amid growing concerns over illegal imports, counterfeit ingredients, and rising political pressure tied to consumer demand for cheaper alternatives to blockbuster obesity treatments such as Ozempic and Mounjaro. The move follows federal investigations that identified irregular imports of active pharmaceutical ingredients and unauthorized large-scale compounding operations. According to local reports, Anvisa is considering stricter controls on raw materials used by compounding pharmacies and reinforcing prescription requirements. The debate has intensified as lawmakers, consumers, and medical groups pressure regulators over access and pricing, while authorities warn about safety risks involving unapproved products — including compounds containing retatrutide, which remains under development by Eli Lilly and Company. Read more.

BRAZIL DRUGMAKERS WARN OF REGULATORY GAPS IN ANVISA'S NEW RULES FOR COMPOUNDED WEIGHT-LOSS INJECTABLES

Pharmaceutical companies are raising concerns over potential enforcement gaps in a new proposal from the Brazilian Health Regulatory Agency (Anvisa) aimed at tightening oversight of compounded GLP-1 and GLP-1/GIP weight-loss drugs, including tirzepatide. While the industry welcomed stricter controls on the import, storage, quality testing, and transportation of active pharmaceutical ingredients used by compounding pharmacies, executives argue the draft still leaves critical questions unanswered about enforcement responsibilities and compliance monitoring. According to industry representatives cited by Folha's Painel S.A., the proposal creates a regulatory "gray area" because it does not clearly define who will verify ingredient quality, how testing results will be audited, or how transparency requirements will be enforced. The debate reflects the explosive growth of Brazil's obesity drug market, where GLP-1 therapies generated roughly BRL 10 billion in sales in 2025 and demand continues to rise amid shortages, compounded alternatives, and broader regulatory scrutiny. Read more.

BRAZIL ASSOCIATION PUSH ANVISA TO CURB MARKETPLACE DRUG SALES

Brazil's largest drugstore chains, represented by the Brazilian Association of Pharmacy and Drugstore Chains (Abrafarma), are pressuring the Brazilian Health Regulatory Agency – Anvisa to crack down on the sale of medicines through digital marketplaces, arguing that current practices violate sanitary rules and create public health risks. The association submitted a dossier to regulators alleging irregular storage, distribution, and commercialization practices by digital platforms, including concerns over so-called "dark store" operations used for rapid deliveries. The dispute reflects growing tension between traditional pharmacy retailers and technology platforms such as Mercado Livre and Rappi, which are expanding into pharmaceutical delivery and e-commerce. Abrafarma argues that current rules — particularly RDC 44/2009 — allow platforms to provide logistics and delivery services, but not directly intermediate medicine sales. The debate intensified after Brazil enacted Law No. 15,357/2026, which explicitly allows licensed pharmacies to contract digital platforms for delivery, but leaves room for conflicting interpretations over marketplace intermediation. Anvisa has signaled that it may update regulations to clarify responsibilities and tighten enforcement. Read more.

BRAZIL UPDATES LIST OF PRIORITY CLINICAL GUIDELINES FOR 2026

Brazil's Ministry of Health has updated the list of Clinical Protocols and Therapeutic Guidelines (PCDTs) that will be prioritized for development and revision in 2026, as part of efforts to accelerate evidence-based treatment recommendations across the public health system. The update was published by the National Commission for the Incorporation of Technologies in the Unified Health System (Conitec) and includes protocols tied to high-burden diseases, rare

conditions, and areas where new therapies have recently entered regulatory or reimbursement discussions. According to the ministry, the prioritization process considers epidemiological relevance, judicialization risks, technological innovation, and gaps in existing treatment guidance. Updated protocols help define which medicines, procedures and care pathways are covered by the Unified Health System – SUS and often serve as an important signal for pharmaceutical companies, patient groups and healthcare providers monitoring future market access decisions in Brazil. Read more.

BRAZIL INDUSTRY LEADERS PUSH HEALTH MINISTRY FOR FASTER INNOVATION POLICIES

Leaders from Brazil's Business Mobilization for Innovation – MEI met with Health Minister Alexandre Padilha this week to press for policies aimed at accelerating pharmaceutical innovation and expanding Brazil's role in global drug development. During the meeting, industry executives highlighted the need for higher investment in research and development, faster intellectual property approvals, and greater agility in clinical trial processes to help transform Brazil from a major consumer market into a global hub for pharmaceutical innovation. Padilha pointed to recent government efforts to strengthen the Health Economic-Industrial Complex, including expanded Productive Development Partnerships (PDPs), reduced backlogs for clinical trial and product approvals at the Brazilian Health Regulatory Agency – Anvisa, and new incentives for domestic innovation. The discussion comes shortly after the government launched the National Clinical Research Program (PPClin), backed by BRL 120 million to expand research infrastructure, decentralize clinical trials, and attract investment in new therapies for the Unified Health System (SUS). Read more.

BRAZIL HOSPITAL FOUNDERS BUY BACK ASSET AT HALF ITS PREVIOUS VALUATION AMID SECTOR DISTRESS

The founders of Brazilian hospital operator Hospital Care have repurchased control of the business at roughly half of its previous valuation, underscoring ongoing financial stress across Brazil's hospital sector. According to Valor Econômico, the transaction reverses an earlier investment cycle in which private equity funds backed aggressive expansion strategies that later struggled with rising debt costs, weaker profitability and lower-than-expected returns following the pandemic. The deal reflects broader consolidation pressures in Brazil's healthcare provider market, where hospitals continue to face high operating costs, weaker demand for elective procedures and tighter access to capital. Analysts say the transaction may signal a shift toward more conservative growth strategies as healthcare companies reassess expansion plans and investors become more selective about hospital assets in Brazil. Read more.

BRAZIL LAUNCHES EMERGENCY DISTRIBUTION OF ONCOLOGY DRUG AFTER SUPPLY DISRUPTION

Brazil's Ministry of Health has started an emergency nationwide distribution of cyclophosphamide to prevent treatment disruptions for cancer patients in the Unified Health System – SUS after the country's sole domestic supplier reported production issues. The federal government intervened with an international purchase of 140,000 units (including 100,000 50 mg tablets and 40,000 1g vials) to stabilize supply of the chemotherapy drug, which is widely used in treatments for breast cancer, ovarian cancer, leukemia, and lymphoma. The first shipment of 7,000 vials has already been delivered, with more than BRL 1 million in initial federal funding. The National Cancer Institute (INCA) is among the first institutions receiving the medicine, and additional purchases may be made if needed. The episode highlights ongoing vulnerabilities in Brazil's supply chain for essential oncology drugs and comes as the Health Ministry expands its centralized procurement model under the new Oncology Pharmaceutical Assistance program (AF-Onco). Read more.

BRAZIL CHEMOTHERAPY SHORTAGE FORCES HOSPITALS TO ALTER CANCER TREATMENTS

A nationwide shortage of intravenous cyclophosphamide — a low-cost chemotherapy drug widely used in cancer care, bone marrow transplants, and severe autoimmune diseases — is forcing Brazilian hospitals to modify treatment protocols and leaving some patients without their preferred therapy. Oncologists and rheumatologists are replacing the drug with oral alternatives, delaying treatment stages, or switching to less ideal regimens as inventories run low across both public and private healthcare systems. Medical associations have issued emergency treatment guidelines, warning that substitute therapies may carry different efficacy, toxicity, and cost profiles. The Ministry of Health is pursuing emergency purchases to restore supply, while manufacturer Baxter said production disruptions at a partner facility affected global output and that supply normalization is expected gradually throughout 2026. The shortage has renewed concerns over Brazil's dependence on older, low-margin imported medicines that remain critical in standard oncology protocols. Read more.

MORE HIGHLIGHTS

Brazilian Medical Association releases AI guidelines for physicians amid new regulation

Brazil releases preliminary list of approved proposals for InovaSUS digital health program

Brazil clones first pig in milestone for future animal-to-human transplants

Brazil expands access to contraceptive implants through public health system

Brazil's Anvisa expands Nucala approval for COPD patients

Brazil's Anvisa approves new treatment for rare Dravet syndrome epilepsy

Brazil's ANS expands mandatory coverage for autoimmune disease treatment

Brazil adopts multidisciplinary tumor boards to improve uterine cancer treatment decisions

BRAZIL NEWS

Brazil revokes credentials of US immigration officer, claims reciprocity

Brazil blocks prediction platforms, tightens rules to curb 'bet-like' products

Brazil aims to regulate critical minerals without tax breaks, finance minister says

Brazil posts wider-than-expected current account deficit in March

Brazil shackles public pension funds after Banco Master meltdown

Brazil to start tests for diesel blend containing 20% biofuel in May

Brazil proposes using oil windfall to offset fuel tax cuts

Brazil regulator approves deeper probe into Google's news content use

Brazilian exports to rise 13% by 2038 amid full enforcement of EU-Mercosur trade deal, says VP