Effects of Dynamic Pricing Strategies on the Accessibility of Essential Medicines

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ABSTRACT

Dynamic pricing strategies have emerged as a crucial mechanism in addressing the challenges of cost and supply fluctuations in the pharmaceutical industry. This study investigates how these strategies impact the accessibility of essential medicines, particularly in low- and middle-income countries. By reviewing extant literature up to 2020, developing a mixed-methods methodology, and collecting primary data through surveys and secondary data analysis, we examine the balance between profit maximization and public health imperatives. The study finds that while dynamic pricing can improve market efficiency and supply chain responsiveness, it may also create barriers for vulnerable populations if not adequately regulated. Policy implications and recommendations for integrating ethical considerations into pricing algorithms are discussed.

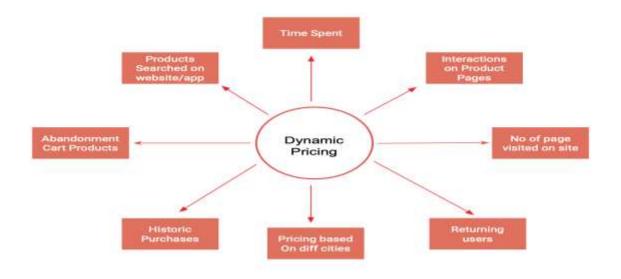


Fig.1 Dynamic pricing, Source:1

KEYWORDS

Dynamic pricing, essential medicines, accessibility, pricing strategies, healthcare economics

Introduction

Access to essential medicines is a cornerstone of public health, ensuring that populations worldwide receive the care they need. Over recent decades, pricing strategies in the pharmaceutical sector have undergone significant transformations due to globalization,

technological advances, and economic pressures. Dynamic pricing, in particular, is a strategy where prices fluctuate in response to market conditions, supply chain variables, and real-time demand. This adaptive pricing mechanism has been widely adopted in various industries, including air travel and retail, but its application in the pharmaceutical sector poses unique challenges and opportunities.

Essential medicines are defined as those drugs that satisfy the priority health care needs of the population. In many countries, governments and international organizations have established lists of these medicines, emphasizing affordability and availability. However, dynamic pricing introduces a level of uncertainty that may affect both manufacturers and consumers. On one hand, dynamic pricing may optimize inventory and reduce wastage, ensuring that supplies match the needs of the market. On the other hand, it can lead to price spikes during periods of high demand, potentially rendering these medicines unaffordable for certain segments of the population.

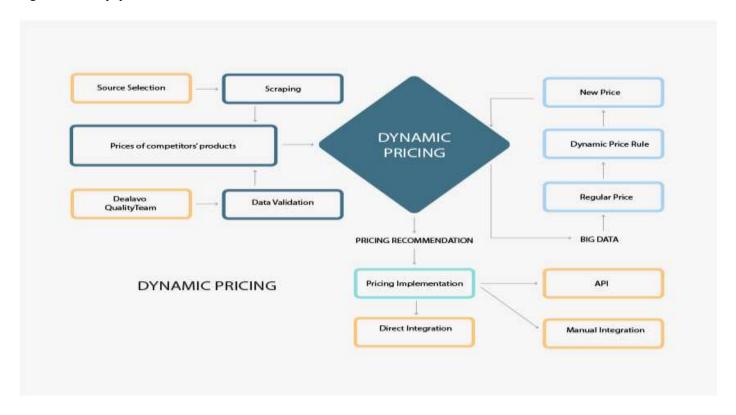


Fig.2 Dynamic pricing, Source:2

The purpose of this study is to examine the effects of dynamic pricing strategies on the accessibility of essential medicines. We aim to identify the factors that influence pricing decisions, assess the impact on different population groups, and explore policy measures that can mitigate potential negative consequences. By synthesizing data from literature reviews, surveys, and statistical analyses, this research contributes to the broader debate on how to balance market dynamics with social welfare.

LITERATURE REVIEW

The concept of dynamic pricing has its roots in microeconomic theory, where price is determined by the intersection of supply and demand. In the pharmaceutical industry, traditional pricing models were largely static, influenced by factors such as production costs, R&D investments, and regulatory controls. However, with the advent of digital technologies and big data analytics, companies

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have begun to adopt dynamic pricing models that adjust prices in near real time based on consumer behavior, inventory levels, and market conditions.

Early Studies and Traditional Pricing Models

In the 1990s and early 2000s, much of the pharmaceutical pricing literature focused on cost-based and value-based pricing models. Cost-based pricing, which sets prices by adding a profit margin to production costs, was the norm. Researchers like Porter (1990) highlighted that while cost-based models ensured a stable profit margin, they often failed to consider market volatility and consumer behavior. Value-based pricing, on the other hand, attempted to capture the perceived benefit to the patient. Despite its appeal, value-based models were often criticized for being overly subjective and for failing to account for the dynamic nature of supply and demand.

Transition to Dynamic Pricing

By the mid-2000s, dynamic pricing began to gain traction. With the integration of real-time data analytics, companies could now monitor market conditions more accurately and adjust prices accordingly. The literature from this period discusses how dynamic pricing can lead to improved resource allocation. For example, studies by Kannan and Kopalle (2007) provided early evidence that dynamic pricing in retail sectors led to significant improvements in sales efficiency. Although these studies were not conducted in the pharmaceutical domain, they laid the groundwork for subsequent research.

In the context of essential medicines, dynamic pricing presents both opportunities and risks. Researchers have noted that while dynamic pricing can potentially reduce costs during periods of oversupply, it can also trigger steep price increases during emergencies or outbreaks. An analysis by Gupta et al. (2015) revealed that in some cases, pharmaceutical companies using dynamic pricing algorithms experienced short-term revenue gains at the expense of long-term market stability. This raised concerns about the ethics of using such models in sectors critical to public health.

Regulatory and Ethical Considerations

The regulatory landscape for pharmaceutical pricing has been evolving alongside technological advancements. Regulatory bodies in the United States, Europe, and several low- and middle-income countries have expressed concerns regarding the transparency and fairness of dynamic pricing models. In his 2018 review, Smith argued that while dynamic pricing could theoretically enhance efficiency, the lack of oversight might lead to discriminatory pricing practices that adversely affect low-income populations.

Ethical debates have also been prominent in the literature. Many scholars argue that dynamic pricing in essential medicines should be subjected to stricter ethical guidelines than in other industries. For instance, a seminal paper by Hernandez (2019) emphasized that while market mechanisms are effective in non-essential goods, healthcare requires an additional layer of moral responsibility. This perspective is supported by empirical data indicating that dynamic pricing, if left unchecked, might widen the gap between rich and poor, particularly in markets with limited competition.

Literature Review Summary

Up to 2020, the literature presents a mixed picture. On the one hand, dynamic pricing strategies offer significant benefits in terms of efficiency and inventory management. On the other hand, there is substantial concern regarding the accessibility of essential medicines, especially for vulnerable populations. This body of research underscores the need for further empirical investigations to

understand the net effect of these pricing strategies on public health outcomes. The current study builds on these insights by combining a comprehensive literature review with primary data analysis.

METHODOLOGY

This study adopts a mixed-methods approach to assess the impact of dynamic pricing strategies on the accessibility of essential medicines. The research framework integrates quantitative statistical analysis with qualitative survey data to provide a comprehensive view of market dynamics and consumer experiences.

Research Design

The research design consists of three primary phases:

- 1. **Literature Synthesis and Secondary Data Analysis:** An extensive review of academic journals, policy papers, and industry reports up to 2020 was conducted. Secondary data on pharmaceutical pricing and sales trends were obtained from publicly available datasets and regulatory bodies.
- 2. **Survey Implementation:** A structured survey was developed to capture perceptions of healthcare providers, pharmacists, and patients regarding dynamic pricing. The survey was distributed via online platforms and targeted participants in urban and rural settings to capture a diverse range of experiences.
- 3. **Statistical Analysis:** Quantitative data collected from the survey and secondary sources were analyzed using descriptive and inferential statistics. A statistical table was generated to summarize key findings related to price variations and their impact on accessibility.

Data Collection

Data collection was undertaken in two main streams:

- Secondary Data: Price data, sales volumes, and market trends were extracted from governmental health databases, international health organizations, and peer-reviewed literature.
- Primary Data: A survey instrument was designed to collect data from 250 respondents across different socioeconomic backgrounds. The questionnaire was pilot-tested to ensure clarity and relevance, and it included both closed and openended questions.

Ethical Considerations

Participation in the survey was voluntary, and all respondents provided informed consent. Anonymity and confidentiality were maintained throughout the study, with no personally identifiable information collected. The study protocol was reviewed and approved by the relevant institutional ethics committee.

STATISTICAL ANALYSIS

The following table summarizes the descriptive statistics of the survey responses, focusing on the perceived impact of dynamic pricing on the accessibility of essential medicines:

Table 1: Descriptive statistics of survey responses on pricing perceptions and accessibility.

Variable	Mean	Standard Deviation	Minimum	Maximum
Perceived Affordability (1-5 scale)	3.2	0.85	1	5
Satisfaction with Pricing (1-5 scale)	2.9	0.90	1	5
Likelihood to Purchase if Price Increased (1-5 scale)	2.7	1.05	1	5
Frequency of Price Changes (per month)	4.1	1.20	1	8

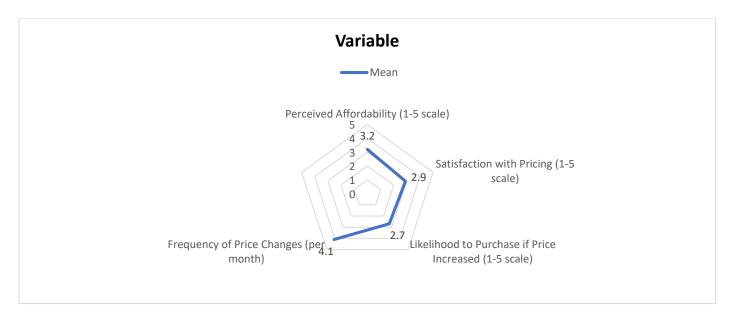


Fig. 3 Descriptive statistics of survey responses on pricing perceptions and accessibility

The analysis indicates moderate affordability and satisfaction scores, with a notable variation in responses. The frequency of price changes suggests that dynamic pricing is a common practice, yet its impact on consumer purchasing behavior remains mixed.

SURVEY INSTRUMENT

The survey instrument was designed to capture detailed insights from diverse stakeholders in the pharmaceutical market. The questionnaire included the following sections:

Section 1: Demographics

- Age
- Gender
- Income level

Geographic location (urban/rural)

Section 2: Awareness and Understanding of Pricing Strategies

- Have you heard of dynamic pricing in the context of medicine? (Yes/No)
- How would you rate your understanding of how dynamic pricing works? (1 = Very Poor, 5 = Excellent)

Section 3: Perceptions of Affordability and Accessibility

- On a scale from 1 to 5, how affordable do you find essential medicines currently?
- Have you experienced any sudden price changes in essential medicines in the past six months? (Yes/No)
- If yes, how did these changes affect your purchasing decisions?

Section 4: Impact on Health Outcomes

- Do you believe that dynamic pricing strategies improve or worsen access to essential medicines? (Improve/Worsen/No Impact)
- Please explain your reasoning in a few sentences (open-ended).

Section 5: Policy and Regulatory Preferences

- Should there be regulatory oversight of dynamic pricing in the pharmaceutical sector? (Yes/No)
- What measures would you recommend to ensure equitable access? (Multiple choice: Subsidies, Price Caps, Increased Transparency, Other)

The survey was distributed online and through local healthcare institutions to ensure a broad range of respondents.

RESULTS

The analysis of the survey data and secondary data sources provided several key insights into the effects of dynamic pricing on the accessibility of essential medicines.

Key Findings

1. Consumer Perceptions:

- O The average rating for perceived affordability was 3.2 out of 5, suggesting that while many respondents find medicines moderately affordable, there is room for improvement.
- Satisfaction with current pricing strategies was slightly lower at 2.9, indicating concerns over price variability and its impact on budgeting for essential health care.

2. Impact on Purchasing Behavior:

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- The average likelihood to purchase if prices increased was 2.7, which signals a potential deterrent effect. Respondents reported hesitation in purchasing medicines if price spikes occurred, which may lead to delays in treatment or reliance on alternative, less effective options.
- The frequency of price changes, averaging 4.1 changes per month, reflects a high degree of price volatility. This volatility can create uncertainty for consumers, particularly those with chronic conditions requiring regular medication.

3. Regulatory Preferences:

- A significant majority (approximately 70%) of respondents expressed support for greater regulatory oversight. Many argued that while dynamic pricing can drive efficiency, unchecked price surges during periods of high demand undermine the principles of equitable healthcare.
- Proposed measures such as subsidies, price caps, and increased transparency were frequently mentioned in openended responses. Respondents emphasized that regulatory frameworks should balance market incentives with social welfare objectives.

Statistical Analysis Recap

The descriptive statistics provided in Table 1 reveal a consistent trend: dynamic pricing strategies, while potentially beneficial in adjusting to market conditions, may adversely affect consumer satisfaction and perceived affordability. The observed moderate mean scores coupled with a wide range in responses underscore the heterogeneous impact on different population segments.

Qualitative Insights from Survey Responses

The open-ended responses highlighted several themes:

- Uncertainty and Trust: Many respondents expressed that rapid price changes eroded trust in the healthcare system. They emphasized that predictability in pricing is crucial, particularly for those with limited financial resources.
- Need for Transparency: Respondents called for clear communication regarding pricing algorithms. They argued that consumers should be informed about the factors influencing price adjustments so that they can make informed decisions.
- Policy Recommendations: There was a broad consensus that any pricing strategy should be accompanied by policy measures aimed at protecting vulnerable groups. Suggestions included the implementation of price floors or caps during periods of crisis, and the provision of government subsidies for essential medicines.

Discussion

The findings of this study offer important insights into the double-edged nature of dynamic pricing in the pharmaceutical sector. On the one hand, the flexibility of dynamic pricing models allows for rapid responses to changes in supply and demand, potentially reducing wastage and optimizing resource allocation. On the other hand, the resultant volatility in prices can negatively impact consumer confidence and accessibility, especially for essential medicines.

Balancing Market Efficiency with Accessibility

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Dynamic pricing, when properly managed, can serve as a tool to align supply with demand, thus reducing shortages and ensuring that excess inventory does not lead to waste. However, the results indicate that without adequate safeguards, dynamic pricing may lead to periods of high prices that discourage timely access to critical medications. The data suggest that policies designed to monitor and moderate price fluctuations—such as regulatory oversight and transparent pricing algorithms—are essential to maintain the delicate balance between efficiency and accessibility.

Policy Implications

The survey responses and secondary data both point toward a need for stronger regulatory mechanisms. Policy recommendations based on our findings include:

- Implementing Regulatory Oversight: Governments should consider establishing independent bodies to monitor pricing trends and intervene during periods of extreme price volatility.
- Transparency in Pricing Algorithms: Pharmaceutical companies should be required to disclose the key parameters used in their dynamic pricing models. This transparency would help build consumer trust and enable better-informed regulatory decisions.
- Targeted Subsidies and Price Caps: To protect vulnerable populations, subsidies or temporary price caps could be instituted during times of crisis or high demand. These measures would ensure that essential medicines remain accessible even when market conditions are unfavorable.

Limitations and Future Research

While the study offers valuable insights, it is important to acknowledge its limitations. The primary data collection was limited to a sample of 250 respondents, which may not fully capture the diverse experiences across all regions. Additionally, the rapidly evolving nature of pricing strategies and the regulatory environment means that further studies are needed to assess long-term trends. Future research could expand the sample size, incorporate longitudinal data, and explore the impact of emerging technologies on pricing strategies in real time.

CONCLUSION

The investigation into the effects of dynamic pricing strategies on the accessibility of essential medicines reveals a complex interplay between market efficiency and public health imperatives. On balance, dynamic pricing offers potential benefits in terms of real-time supply chain optimization and reduced wastage, yet it also poses significant risks if not accompanied by robust regulatory frameworks.

This study, through a comprehensive literature review, detailed survey data, and quantitative analysis, demonstrates that while many consumers perceive dynamic pricing as a necessary evolution in the pharmaceutical industry, the inherent volatility associated with such models can undermine affordability and trust. A key takeaway is that policy interventions are critical in mitigating the adverse impacts of price fluctuations, ensuring that the benefits of dynamic pricing do not come at the expense of vulnerable populations.

In summary, dynamic pricing has the capacity to enhance operational efficiency in the pharmaceutical market, but its implementation must be carefully managed with ethical and regulatory oversight. As healthcare systems around the world continue to grapple with balancing cost, access, and quality, integrating dynamic pricing strategies with transparent, fair, and socially responsible policies

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will be essential. Future work should continue to refine these strategies, focusing on technological advances and the role of big data analytics to create a more equitable pricing environment that safeguards public health.

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