ITALIAN TRADE AGENCY

ITA Beijing Office

NEWSLETTER

HEALTHCARE
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China Raises Public Health Per Capita Subsidy to 99 Yuan
China issued the 2026 primary public health service notice. The per capita fiscal subsidy rose to ninety-nine yuan (about 12.9 euro), with funds directed to health education, maternal and child tracking, elderly checks and chronic disease management for hypertension, diabetes and COPD (Chronic Obstructive Pulmonary Disease). Local authorities must open county-level electronic health records to residents. **(Xinhua)**

China Defines 158 Grassroots Diseases for Same Payment Rule
China released the DRG (Diagnosis Related Groups) / DIP (Diagnosis-Intervention Packet) Payment Version 3.0 grouping scheme confirming the first national list of grassroots-appropriate diseases. The list contains thirty-one DRG and one hundred twenty-seven DIP entries covering common and chronic conditions judged suitable for secondary and lower-level hospitals with mature local capacity. **(China Daily)**

China Opens Draft Review Rules for Implantable Brain Computer Interfaces
The Center for Medical Device Evaluation solicited public comment on technical review points for implantable brain-computer interface devices supporting motor function compensation and electronic cursor control. The drafts specify expectations for summary files, nonclinical bench and animal evidence, labeling, quality system inspection and registration certificate scope across invasive neural products. **(NMPA)**

China Sets Lifestyle Campaign and Oral Health Day Theme
China launched the 2026 Civilized Healthy Lifestyle Awareness Month and the National Love Teeth Day campaign with the oral health theme on prevention and early care. Activities promote balanced diet, physical activity, tobacco and alcohol control, psychological wellness and correct brushing habits through community stations, schools and media platforms. **(NHC)**

China Plans Tertiary Hospital Pairing Support for County Hospitals
China published the 15th Five-Year work plan during the week for tertiary hospitals to pair-assist county-level hospitals through personnel secondment, discipline building and management transfer. Designated top hospitals must send stable teams, cobuild key departments such as critical care and obstetrics, share imaging and pathology platforms and train local surgeons in standardized protocols. **(NHC)**