



# Access to Health

Central to our purpose to save and improve lives is our commitment to expanding access to health through strengthened health systems and paths to reach more people with our medicines and vaccines. That commitment is embedded in our business strategies across functions and geographies.

**<u>Learn more</u>** about our Purpose for Progress Report

### **OUR GUIDING PRINCIPLES:**



# Discovery and invention:

Invent medicines and vaccines that address global health needs where we can have the greatest impact.



# Strengthening health systems and addressing systemic barriers to care:

Reduce hurdles for communities facing longstanding barriers in getting quality care globally.



## **Availability:**

Make available reliable, safe global supply of quality medicines and vaccines, and invest in solutions to deliver timely access to our products in a responsible and sustainable manner.



## Affordability and sustainable access:

Develop and implement sustainable solutions that address barriers to affordability and enable more people to access our products.

### **ACCESS TO HEALTH HIGHLIGHTS:**

450M+
people reached with our
medicines and vaccines





in 2024. 1

>247M

people enabled to access our innovative medicines and vaccines through access solutions in 2024.2 66M+

people underserved by health care, reached through our social investments (2021-2024) including 11.4 million in 2024 alone. **3, 4** 

Surpassing the goal to reach 50 million people in LMICs and people underserved by health care in high-income countries with our social investments, by 2025.

92%

of countries reached around the world with our products in 2024, surpassing our goal to reach at least 75% of countries around the world annually with our products. <sup>5</sup>



84%

of the top 20 global burdens of disease addressed by our pipeline and products. **6** 





# Access to Health

### NOTES

- 1. This people reached metric estimates the number of people who have received a Merck product through commercial channels, clinical trials, voluntary licensing or product donations. Product donations include people reached through the MECTIZAN Donation Program, U.S. Patient Assistance Programs, and the Merck Medical Outreach Program. Sources of data are Merck and third-party data sets that are tracked within an enterprise-wide internal database. The people reached metric for all sources is calculated as doses sold divided by the average dose schedule for a given market in a given year. People taking multiple products may be counted as multiple people toward the total estimate. In some instances, this estimate may include people enabled to access our products through access solutions, which are calculated as part of our goal to enable access to our innovative medicines and vaccines (page 31). The people reached metric does not include people reached through social investments, which are calculated as part of our goal to further advance access to health for populations in LMICs and groups with limited access to care in high-income countries (page 38).
- 2. Metrics contributing to this goal are displayed on an annual basis and provide information on the number of people who now have the option to access medicines and vaccines as a result of our sustainable access strategies, solutions and partnerships, including our commitment to Gavi and UNICEF (rather than doses shipped), collaborations to optimize resources in health systems, expanded financial coverage through insurance, and new community-based channel partnerships. "Innovative medicines and vaccines" refers to our Company's on-patent products. Enable "more people" is defined as populations in initiatives launched in markets as of 2025, in comparison to a 2020 baseline. Evidence for metrics is sourced from the best publicly available data and proxy sources by market. While proxies differ by market, all methodologies are evaluated and represent the best estimate of people enabled to access innovative medicines and vaccines. People who were enabled to access innovative medicines and vaccines and vaccines.
- 3. Social investments include our Company's philanthropic partnerships, programs and impact investments. "Underserved populations" are defined as those that face health disparities due to disadvantages related to insurance status, social determinants of health, race, ethnicity, gender identity/sexual orientation, age and/or language preference. The goal is cumulative across the reporting period of 2021-2025, and is independent of a baseline period. Actuals for each year to date are based on reports received between 1 March and 28/29 February of the corresponding performance year.
- 4. Third-party reporting is used to calculate the number of people reached through social investments. In some cases, third-party reports may include cumulative people reached for the reporting period, and/or data that are attributable to other partners as well as our Company's philanthropic investment.
- 5. (a) "Countries" are as defined by the World Bank Country and Lending Groups. Includes only human health products. (b) Reflects improved data capture through updated processes that now include previously unreported markets
- 6. All calculations for our Company's GBD impact are based on the latest IHME report available. Note that we do not include road injuries in our GBD accounting since they are not subject to pharmaceutical intervention.