

White Paper

Design and Refine: Make Patient Support Programs Work for your Patients

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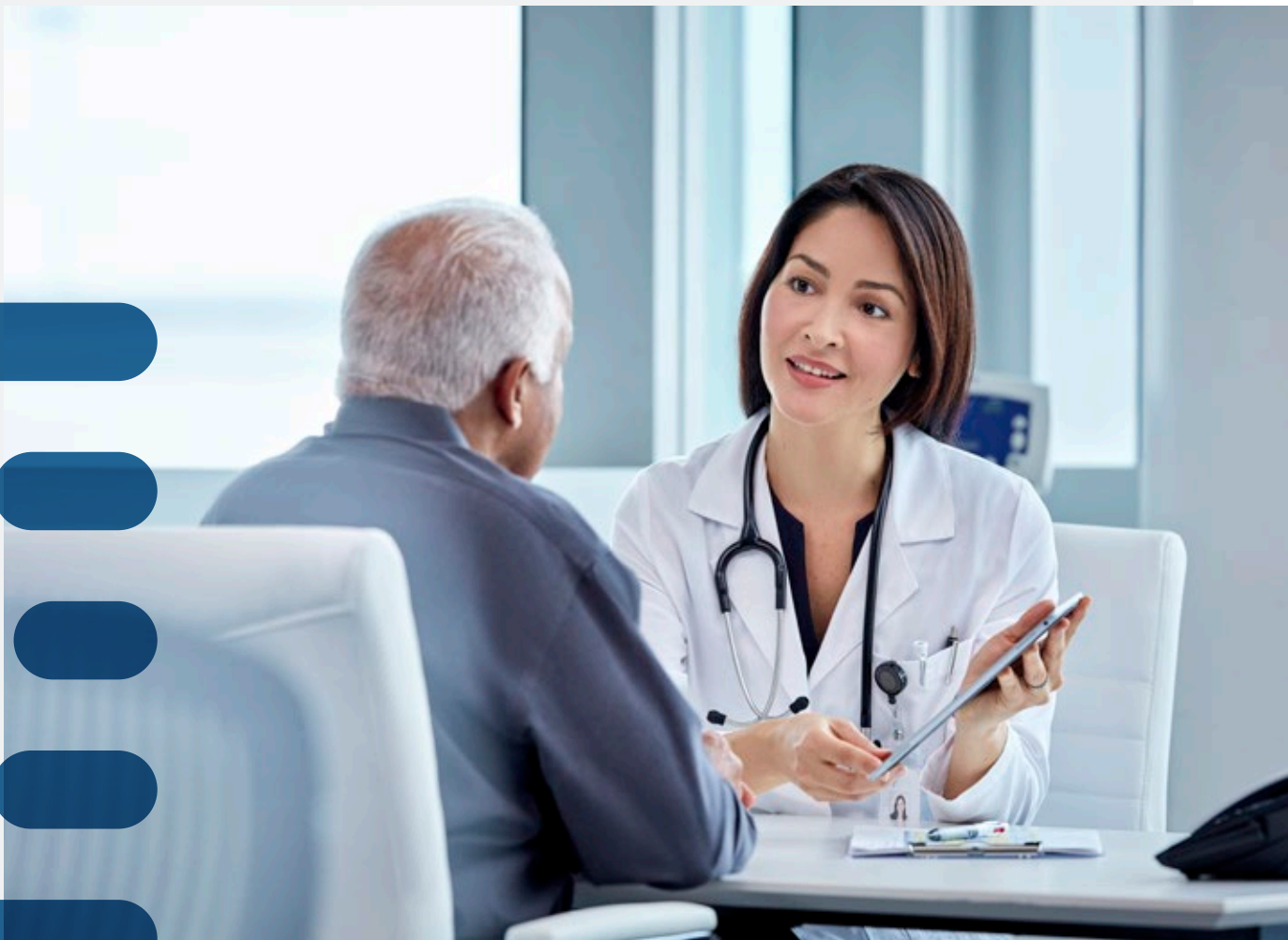


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Introduction

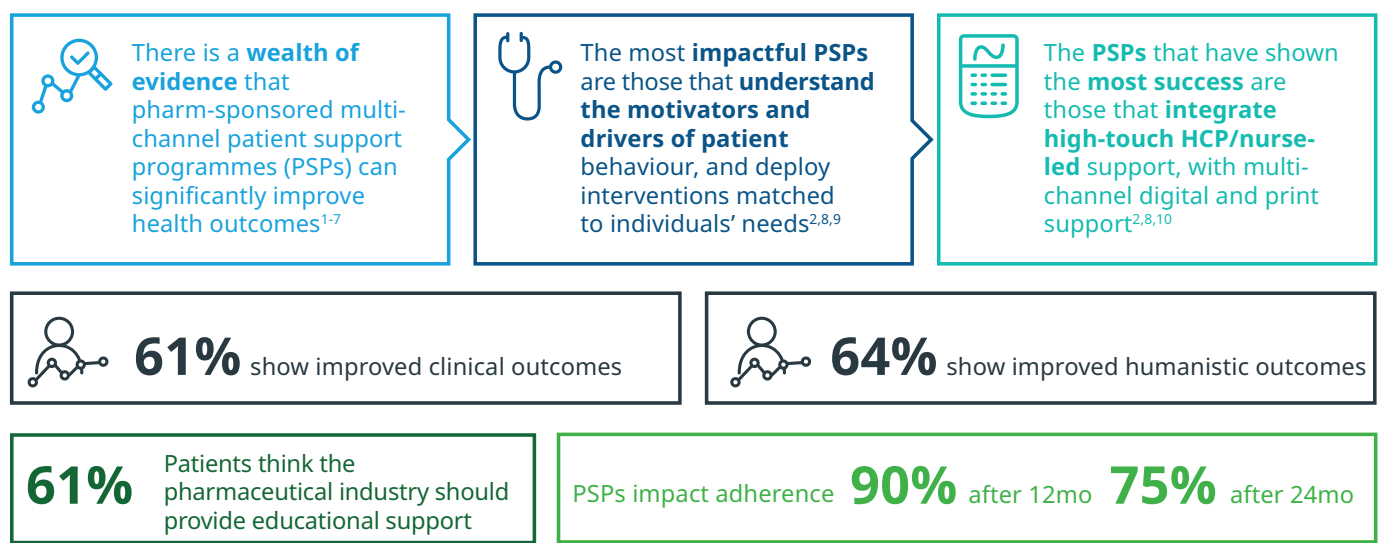
Patient Support Programs (PSPs) are an umbrella term to describe initiatives led by pharmaceutical companies to improve access, usage, and adherence to prescription drugs. These programs can have a financial component, support clinical investments, focus purely on education, or a combination.

One of the main challenges with PSPs is that they often have broad definitions and are often subject to misunderstandings and bias when being discussed with vendors, regulators or internal cross functional stakeholders. Though the definition of a PSP can be debated, the value PSPs bring to the community and company are inherent, and moreover expected of the pharmaceutical industry. IQVIA analysis demonstrated the most impactful PSPs are those that understand the motivators and drivers of patient behaviour and deploy interventions matched to need (See Figure 1).

PSPs are not a new concept, at IQVIA the longest running PSP was started in 2005. Now 15 years later, more than ever, patients and prescribers are seeking innovative solutions to engage with PSPs. With a plethora of health tech incubators and digital solutions across the APAC region, there are capabilities and technologies available to facilitate and execute PSPs that best fit patient and prescriber needs.

But are multinational pharmaceutical companies able to pivot, adapt and execute quickly enough to implement solutions that are demanded in a dynamic PSP landscape?

Figure 1: PSP’s Motivators and Drivers



Source: IQVIA Secondary Research

Figure 2: Categories of PSP



What is a PSP?

PSPs can be grouped into three main categories; adherence support, financial assistance, and clinical support—a single PSP could incorporate all aspects of these category types (See *Figure 2*).

Adherence PSPs

The support focuses on addressing patient's persistence with products who offer a complex regimen, side effect complexity, education to adherence especially where the effects are not readily

noticeable to the patient, counselling, adverse event reporting or healthcare professional (HCP) load (See *Case Study 1*).

Financial PSPs

As the name suggests, these focus on financial/affordability issues for patients either starting or continuing treatment. Navigating the changing regulatory landscape can be challenging for pharmaceutical companies who want to provide and track appropriate funding mechanisms for eligible patients, whilst being compliant (See *Case Study 2*).

Case Study 1: Rare & Orphan Disease

Background

- April 2005 - Ongoing.
- Multiple Sclerosis Nurse Educators to address quality training and education.
- Current Home Health Nurses do not specialize in MS.

Goals / Objectives

- Provide consistent, quality training on MS and therapy to new patients.
- Schedule adherence visits in-person.
- Support to Sponsor's sales organization to educate physicians, nurses and office staff.



Benefits to Customer

- Support from nurses is critical.
- Regular contact with patients, consistency of care & a trusting relationship.
- Development of several industry-supported nurse administered patient assistance support programs.

Results

- 40% improvement in 1-year adherence rates from year 1 to year 4.

Case Study 2: Implementation of a patient access program for patients unable to afford Oncology, Immunology and HCV drugs in the UAE



Situation

- Patients facing insurance coverage limitations in the UAE are unable to cover costs of their indicated treatments.
- In the UAE NGOs and Charity organizations are the main contributors to financial aid.
- Patients are required to submit various documents for an eligibility assessment.



Solution

- Implementation of a Patient Access Program for patients unable to afford their indicated treatment.
- Mapping out the requirements of the identified charities.
- Acts as the Single Point of Contact (SPOC) for all stakeholders.
- Supports the "Patient Dossier" for submission.



Result

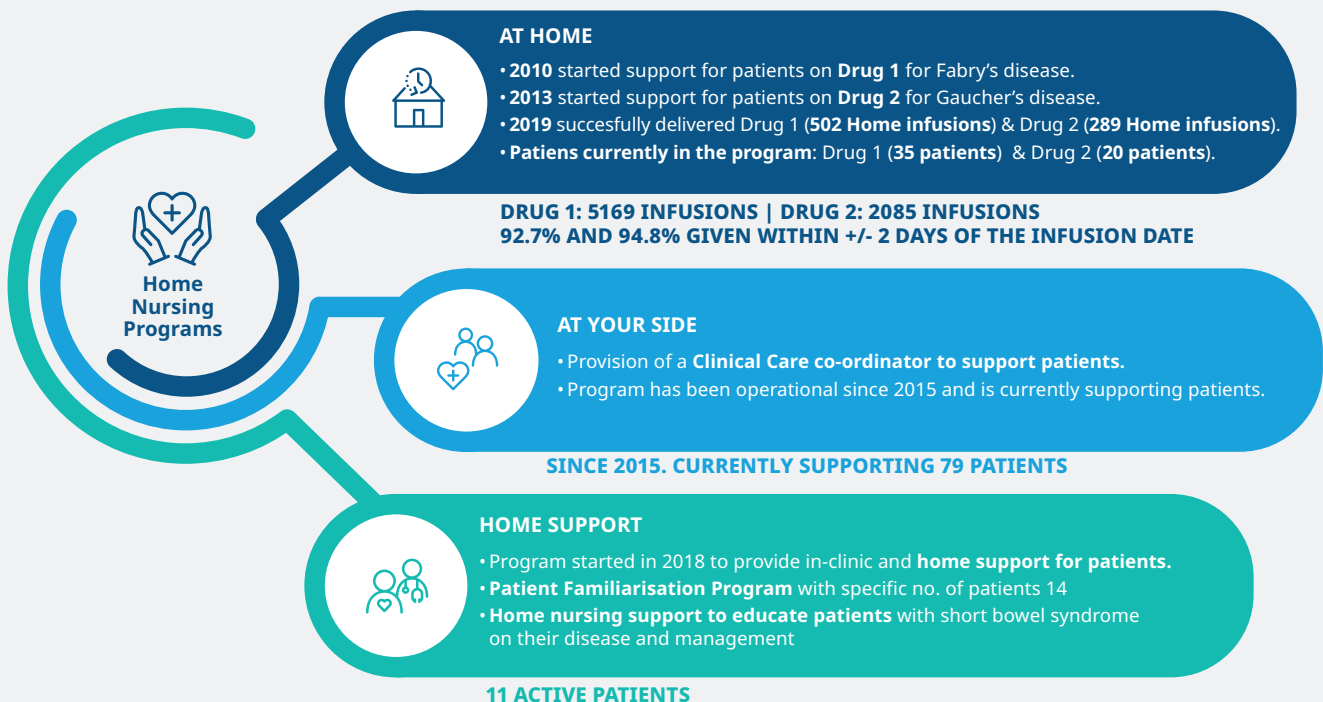
- Improved patient access to treatment.
- Patient and physician satisfaction.
- Treatment interruptions have been avoided.
- Improved Patient Outcomes.

Clinical PSPs

These may involve providing support should patients be unable to travel to clinics/hospitals for the administration of treatment; or may assist hospitals themselves with additional support for specific and challenging regimens, such as chemotherapy, whilst noting and being available on site for adverse events. Simply put, this could just be

providing other support to the patients, based on their needs and the market scenario. During the COVID-19 pandemic, where it has been challenging for patients to travel to clinics/ pharmacies for prescription collection, concierge services or delivery of their drugs could be considered a PSP (*See Case Study 3*).

Case Study 3: Home Nursing Programs with Care Coordinators

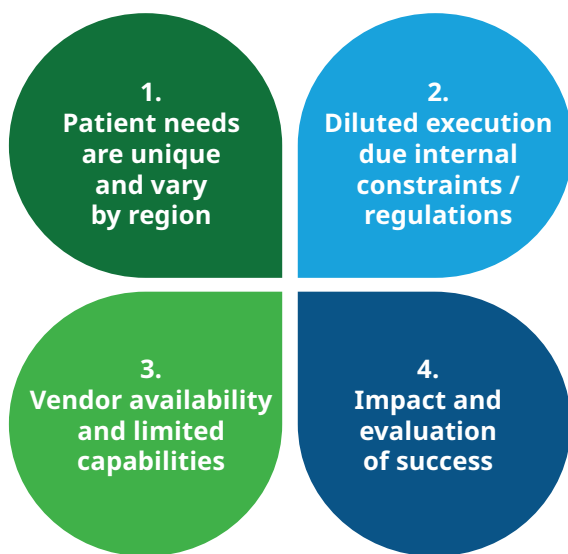


DESIGN, IMPLEMENT AND MONITOR A PSP

IQVIA approaches PSPs with specific tools, this modular approach assists the design, implementation and continued monitoring of a PSP. As with all solutions, the first step is to understand the challenges you may face while balancing the opportunity.

Challenges associated with PSPs

Each type of PSPs has unique challenges, just as each a country, product or therapeutic area may have, but as a category there are four main reasons why PSPs can be perceived as difficult, to design, implement and monitor.



1. PATIENT NEEDS ARE UNIQUE AND VARY BY REGION

Each PSP is unique, and that is a challenge in of itself. There is opportunity to leverage learnings, but there is no plug-and-play method when it comes to PSPs. What is successful for one product in one region, will struggle to be directly lifted into a new region —namely because across countries and regions the patient journey will differ. Facilitating a patient journey mapping exercise and looking at pain points can enable regional or global learnings to be adapted and applied.

2. DILUTED EXECUTION DUE INTERNAL CONSTRAINTS / REGULATIONS

A challenge often faced by ambitious teams is how to navigate through internal compliance and legal regulations. Countries across the APAC region have

specific rules regarding data privacy and patient protection constraints, and these laws are also rapidly changing. Without a strong PSP leadership at a company, internal departments may not have the latest information for their internal processes. The company may be limiting itself, and be stricter than the country, and thus limits a PSP managers ability to design the solution identified during the patient journey mapping. It's best practice to involve the compliance team early and often during the design of the PSP; by doing this the team will better understand the foundational issues and can help better support to ideate on solutions when regulations create a roadblock.

3. VENDOR AVAILABILITY AND LIMITED CAPABILITIES

PSPs are often run through a third-party vendor these vendors may also carry out the distribution of the product as well. In the APAC region there are a number of country specific vendors, but there are a limited number of vendors that span the region/ provide regional solutions. Aside from vendor presence, vendor capabilities can also be a challenge. A vendor can make or break a PSP, the worst scenario is a pharmaceutical company limited by a vendors capabilities and ability to build new capabilities quickly to fit the need for the PSP. When reviewing vendor RFPs look for vendors who can offer customized yet buildable solutions or have demonstrated the ability to work with other vendors to meet the need.

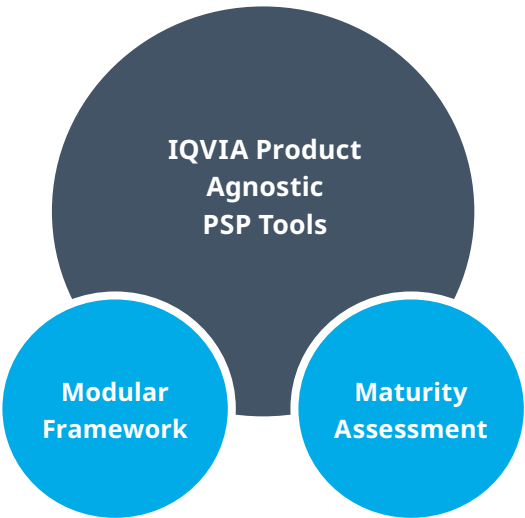
4. IMPACT AND EVALUATION OF SUCCESS

PSPs are multi-year investments that have a varying degree of growth. There are strict rules regarding how companies can measure patient support program success. In the past, pharmaceutical companies have designed PSPs and captured KPIs around enrolment numbers, but an increase in enrolment cannot be tied back to value add for the company. It is difficult for a company to measure, for example, the impact on health outcomes, but now we are seeing more companies using real world evidence (RWE) to show how PSPs are impacting disease prevalence.

PSP opportunities

The environment in APAC is ripe for innovative and comprehensive PSPs. Firstly, with an increasing prevalence of noncommunicable diseases (NCDs), adherence is a critical factor for chronic disease. Secondly, with the introduction of new drugs, with more complicated supply chain pathways, PSPs are necessary for patient treatment delivery. Precision and personalised medicine will never be able to thrive without corresponding personalised patient delivery. For example, the support required for a sick patient travelling to a major hospital and timing arrival perfectly to receive gene therapy for 3-4days —one example, ripe for a robust PSP to make it possible.

IQVIA has two product agnostic tools, that can be used across the three main categories of PSP, that we use to work with companies to better support strategic PSP decisions.



For existing PSPs, the Maturity Assessment can identify weak links before using the Modular Framework to bring these to gold standard. For a new PSP, starting with the framework and referencing the Maturity Assessment will bring the gold standard from the beginning.

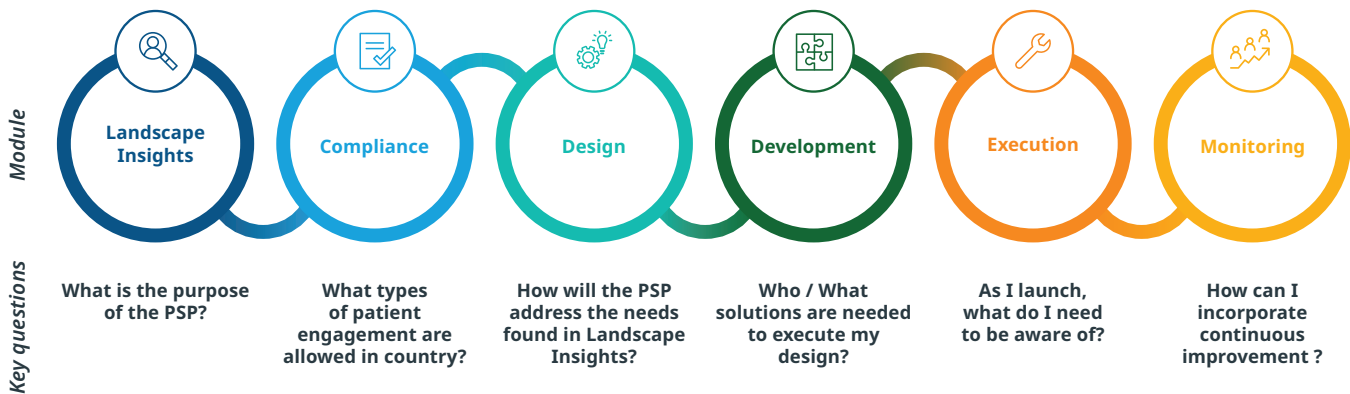
Standardizing PSPs with a modular framework

The Patient Support Program Framework is a modular framework for the designing, executing, and monitoring of patient support programs. The framework is a designed to facilitate cross functional conversations to support a streamlined execution of the PSP.

Each module includes sub modules that dive into the why, what, and how of executing PSPs. Each sub module includes detailed information, research articles, and best practices collected across the company and provides a granularity to support regional heads as well as PSP Managers. The benefit of using this kind of framework is that the PSP Manager – or responsible person – can anticipate the needs of the program throughout the PSP lifecycle and work with key stakeholders to find optimal solutions.

The value of using a framework that is modular, as opposed to linear, is that it can easily be adapted and flexed to support a product or brand’s specific needs. In addition, the framework allows the company to understand a any weakness in the PSP, regardless of where in the PSP journey they are.

Figure 6: PSP Modular Framework



1. WHY - why the steps and process within this module are important to complete and how and where they will impact the PSP in the long run.

2. WHAT - what tasks need to be accomplished in this module before moving to next steps, and goes into detail on how they interact with each other

3. HOW - provides guidance and when to have conversations with the regional and local cross functional players. The guidance also includes what information is needed for which types of conversations throughout the PSP lifecycle (*See Figure 6*).

Bringing a gold standard PSP with a maturity assessment

The challenge with PSPs is that there is no single view of what, 'good' looks like, especially across differing therapy areas and regions. Maturity Assessment for PSPs should pull on international PSP experiences to create a clear view of what 'good looks like' for PSP design, execution, and monitoring. This Maturity Assessment could be used by teams executing innovative CAR-T patient support programs or call centres for well-established drugs.

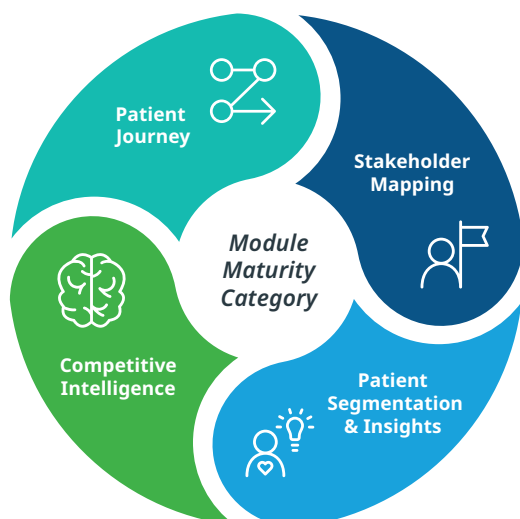
A good patient support program is defined not by the complexity of the offering, but by the process that offering was designed and executed.

The IQVIA Maturity Assessment introduces global industry benchmarks using bronze, silver, and gold measurement. This assessment is used to understand the current state of an organizations PSP process, and can diagnose the sophistication of a PSP and detect untapped opportunities to strengthen the team's execution. The Maturity Assessment should be done as a baseline assessment to pinpoint areas of opportunity

This kind of framework provides continued value, it provides a structure and a common language for a company to speak. As noted in the challenge section above, PSPs have different meanings to different stakeholders. In APAC, with many different experiences and expertise coming through the region, having a common language and framework helps to align teams and alleviate the frustration felt with executing the PSPs.

Figure 7: PSP Maturity Assessment & Hypothetical Maturity Assessment for BRAND X Patient Support Program in 5 key markets

PSP Maturity Assessment



Hypothetical Maturity Assessment







for strengthening internal operations and strategy concerning PSPs. The Maturity Assessment can be completed as an informal self-assessment or as a formal diagnostic by IQVIA.

The Maturity Assessment is especially helpful in APAC, where there is a high variability in the sophistication of PSP programs, and can be used for a fair comparison.

For example, a basic PSP may be gold compared to digital PSP, if it was designed with longevity and adaptability. The rating is not based on the final offering, but rather on the journey to get to the product. For example, if a standard PSP call centre could receive an overall gold rating if it were designed and executed correctly.

When it comes to PSPs the goal is to design a program that relieves a certain pain point along the patient, caregiver, or HCP journey, and to measure and evaluate if the PSP has relieved this pain point.

What is the future of PSPs?

One of the major trends seen from the COVID-19 global pandemic, is an increase telehealth. As the point of enrolment into a patient support program goes digital, PSP programs need to adjust. This seismic shift in the way we seek and receive treatment will require companies to revisit and potentially update their, 'Landscape Insights', work (Module 1). Any findings during this research will require updates throughout the PSP, and a re-alignment from cross functional players —made easier with the modular framework.

With an increase in digital enrolment there are now more opportunities to capture data points and utilize technology. PSP sponsors can consider working with partners who have a platform that can easily be integrated across various vendors and partners.

The goal is to have a platform that is all encompassing, yet customizable for different personas.

As the world continues to evolve, the needs of patients become more sophisticated and specific. A 'gold' maturity ranked PSP can be the difference in choice of therapy by a patient or prescriber.

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Alyssa Palmer is consultant in the APAC Consulting team based out of Singapore, where she specializes in market access, commercial strategy, and patient support programs for clients in both the public and private sectors.

Prior to joining IQVIA, Alyssa worked at the intersection of supply chain and healthcare with multinational pharmaceutical companies and global health organizations. She holds a BSc in Supply Chain Management from Arizona State University ASU (US) and is currently enrolled in an MSc in Public Health from the London School of Hygiene & Tropical Medicine (UK), and a MEng in Supply Chain Management and Logistics from the MIT-Zaragoza Logistics Center in Spain.



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Shriharsha (Shri) is a Senior Principal in the APAC Consulting team based out of Singapore. He has led engagements across Asia Pacific covering market entry, growth strategy, pricing, market access and commercial excellence for clients across Pharmaceuticals and MedTech sectors. Shri has over 12 years of consulting experience in life-sciences, delivering projects across South East Asia, South Asia, and broader APAC region. He has advised senior business leaders on cross-region strategy and implementation planning projects. Prior to IQVIA, Shri has previously worked with Ernst & Young (EY) in their life-sciences consulting practice in India. Shri holds an MBA from NITIE in Mumbai and a BSc in engineering from University of Mumbai, India.

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