



Patient support programmes

Driving competitive advantage and commercial success



Introduction

Patient support programmes (PSPs) are increasingly important for pharmaceutical companies. The ability to wrap services around their leading-edge therapies, in order to deliver superior patient outcomes, drive differentiation and strengthen patient and healthcare professional (HCP) relationships, and will increasingly determine success in the future.

This theme has become increasingly obvious across therapeutic areas in recent years. While companies must continue to strive to lead on the science, future success will be significantly influenced by the services that companies provide alongside their therapies, to support outstanding patient outcomes. Sometimes, the driver is patient safety and pharmacovigilance, where potentially severe side effects mean that patients have to be carefully on-boarded and monitored; sometimes, the driver is better disease management, especially for chronic conditions; sometimes, the driver is improved treatment efficacy, for instance, in degenerative conditions, where programmes enable physicians to slow progression by earlier intervention.

There is also evidence that healthcare systems are increasingly seeing the value of PSPs. A November 2018 briefing paper from the NHS Confederation¹ laid out a number of benefits including training on effective self-medication and administration of medicines; improved adherence; better information, pitched at the right level for the patient; and improved supply chains for home delivery of medications. The same paper highlighted that there are currently over 15 million patients in the UK with long-term conditions, so there is an imperative to better manage healthcare closer to the patient. This will both improve patient outcome and reduce the cost to the NHS of caring for this population. The House of Commons Health Select Committee recently estimated that care for long-term conditions is the largest

strain on NHS resources, accounting for 55% of GP appointments, 68% of outpatient and A&E appointments, and 77% of in-patient bed-days. Improving chronic care is clearly critical to managing the ongoing healthcare budgets and effective PSPs will increasingly be part of the solution to this challenge.

This paper will articulate a compelling value proposition for better patient support programmes (PSPs) by focusing on a number of key value drivers:



Augmenting the therapeutic pathway to improve patient outcomes.



Driving differentiation and building trust with patients and HCPs.



Building platforms to scale the approach and optimise the cost to deliver.

The paper will conclude that there is a significant opportunity for pharmaceutical companies to improve its offering for patient support programmes and drive a step-change in performance against all of the value-drivers listed above.

The Association of the British Pharmaceutical Industry (ABPI) definition of a Patient Support Programme (PSP)²

A PSP is an organised data collection system (ODCS) where a marketing authorisation holder (MAH) receives and collects information relating to the use of its medicinal products. Examples are post-authorisation patient support and disease management programmes, surveys of patients and healthcare providers, information gathering on patient compliance, or compensation/reimbursement schemes.

Examples of PSPs that aim to help patients, either directly or via HCPs to better manage disease outcome, understand their conditions and/or provide advice on managing disease, are:



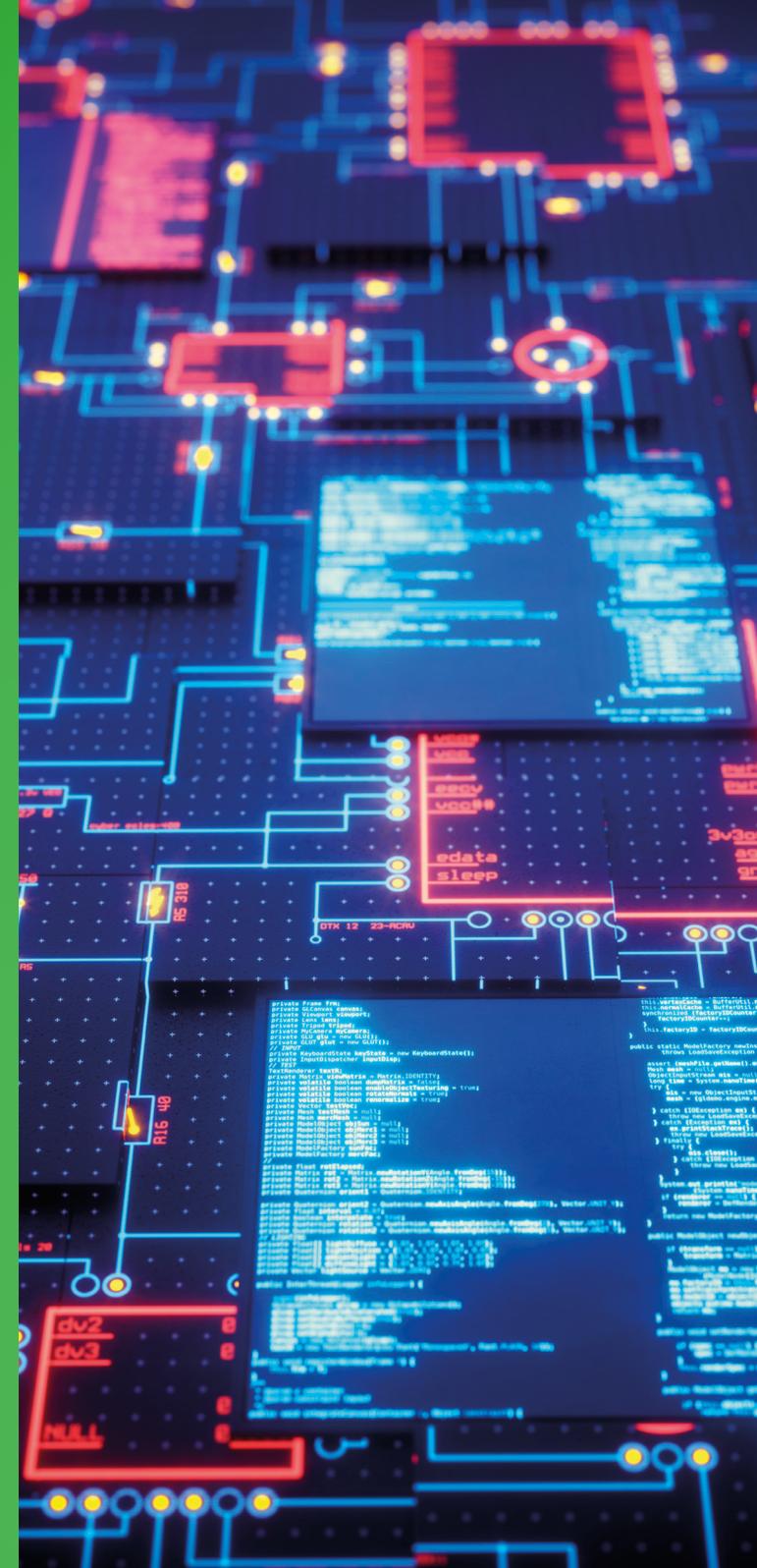
Compliance/adherence programmes where consenting patients on a medication are contacted to see how they are managing with their medication;



Call centres where patients or patient carers can contact the MAH to obtain further information on medication or a particular disease area as part of a structured programme (this excludes routine 'medical information' services);



'Nurse educator' programmes where nurses (either employed directly by an MAH or through a third party) interact directly with patients to provide education or disease awareness, to help them properly administer medications and/or manage their disease.





Augmenting the therapeutic pathway to improve patient outcomes

Health systems and payers are increasingly taking a more holistic view to therapies and treatments.

Increasing affordability pressures on healthcare systems mean that pharmaceutical companies have to demonstrate value propositions to payers that go beyond clinical efficacy. This is particularly true for chronic conditions and degenerative diseases, where there is a long-term burden of care, but also increasingly important for cancer therapies, which can require a complex care regime, and can also be very debilitating for patients. Here, quality of life and the patient experience are hugely important and pharmaceutical companies are increasingly being measured on these 'quality of life' dimensions. For instance, in the Affordable Care Act, patient outcomes and patient satisfaction are now key metrics and the Centre for Medicare & Medicaid Services (CMS) has declared that patient satisfaction is a key indicator of value in the new value-based purchasing system.³

Patient outcomes can be improved through a number of means. Better education is an obvious avenue, both for healthcare professionals, and for patients and care-givers. Importantly, for the patients and care-givers, information needs to be pitched at the right level to ensure that it is properly understood. A well-designed PSP can address this challenge and new digital technologies open up new avenues to effect this.

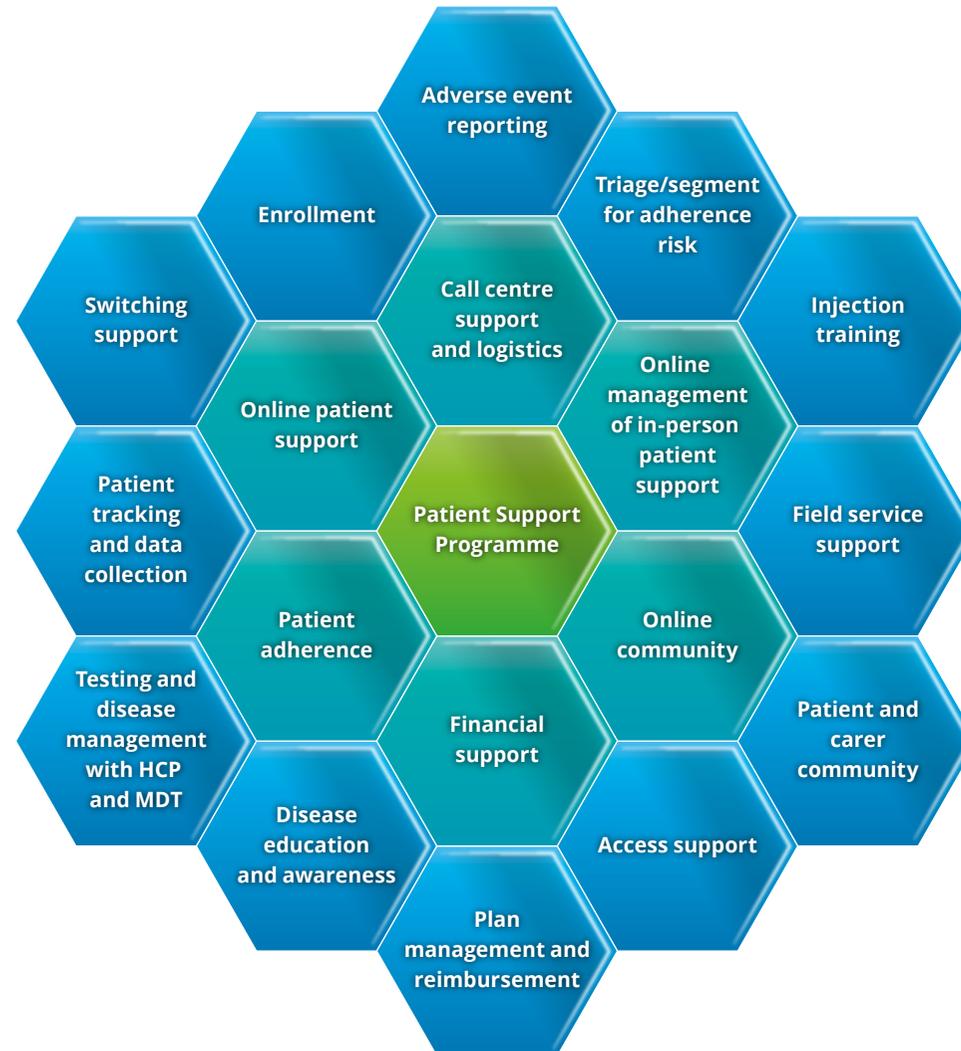
Adherence is another important factor, especially where treatment benefits may not be immediately felt by patients. Many therapies have unpleasant side-effects and, while these may abate over time, patients can often discontinue treatment too early. Appropriate patient support can help patients through the on-boarding and initial treatment period, improve long-term adherence, reduce discontinuation, and ultimately, deliver a better health outcome. Again, new digital technologies in areas such as smart devices, user experience, and data modelling open up new opportunities to improve patient adherence.

At a more tactical level, many therapies are more involved than simply taking a pill once or twice a day. PSPs can provide training on effective self-medication, and they can do this in the comfort of the patients' homes. This negates the need to travel to a hospital or clinic, which can be time-consuming, stressful and, indeed, expensive for patients. Switching patient care from the clinic to the home, where sensible and safe, is a stated goal of many health systems, including the NHS, as they look to improve the patient experience. PSPs are an obvious weapon in the arsenal to achieve this objective.



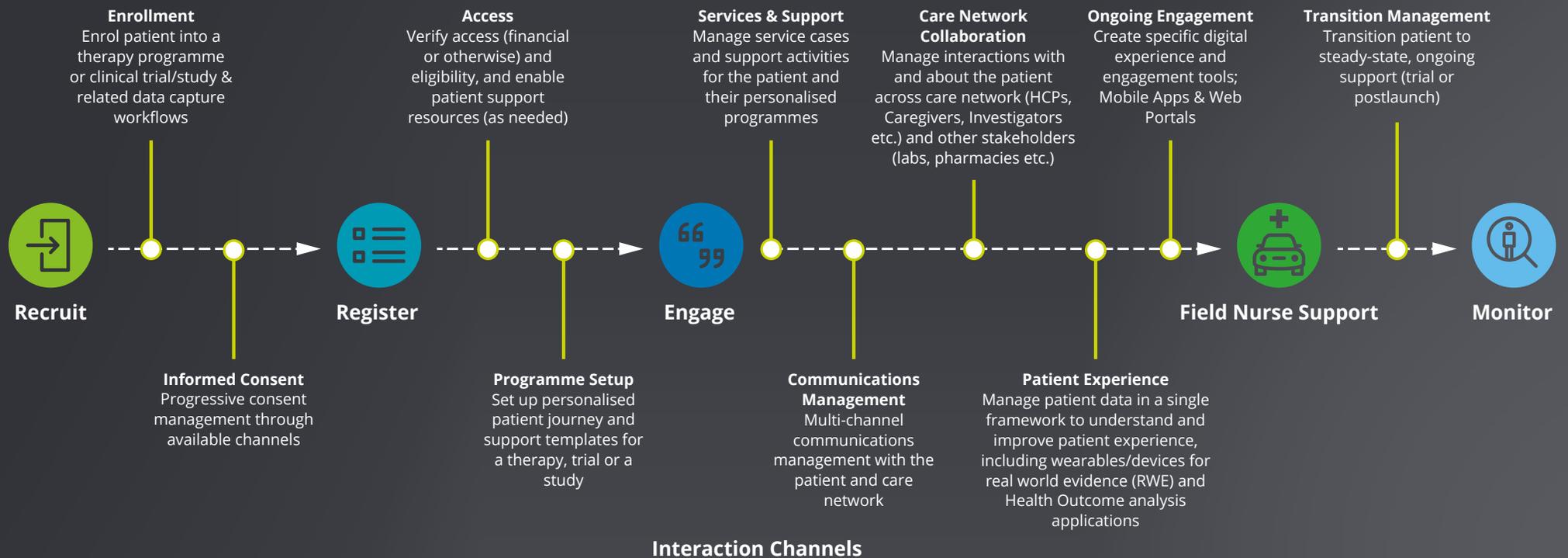
The value case for patient support programmes is backed up by a wealth of research. A major review, in 2016, of 64 patient support programmes, across multiple chronic disease states,⁴ showed a clear positive impact of PSPs on adherence, clinical outcomes, and the overall experience. Another study, specifically into multiple sclerosis,⁵ although the findings likely apply to other degenerative diseases, highlighted the importance of patients being empowered to manage their disease, in order to improve treatment outcomes and quality of life. A study on adherence, again for multiple sclerosis,⁶ concluded that a personalised support programme significantly increased the probability of patients staying on regime. Finally, a systematic review of research on patient portals showed that digital patient services can improve patient satisfaction and retention, as well as improving adherence (e.g. up to 37% increase).⁷ In short, the evidence is overwhelming and shows that better patient support programmes can deliver a significant improvement in patient outcomes, and, in doing so, benefit both the health systems and the pharmaceutical companies at the same time.

Common patient support activities



Example patient journey

A strong patient engagement platform is valuable, both as the system of record for all interactions and workflows with the patient and about the patient, and, crucially, as an aid to help the patient better manage her disease and treatment.





Drive differentiation and build trust with patients and HCPs

In the modern, digitally-enabled world, patients are increasingly taking ownership and becoming more engaged in the management and treatment of their diseases. This phenomenon can be observed in the sheer number of companion apps that have been downloaded in recent years.

There are now tens of thousands of mHealth apps on the Apple and Google stores and a study by Rock Health⁸ showed that almost \$6B was invested in digital health in 2017, with 2018 showing a continued momentum (\$1.6B in Q1). Disease management and consumer health information continue to be major focus areas for investors.

There is increasing evidence of demand for digital patient services, with 48% of adults using or interested in using pharma digital assets and 68% of physicians more likely to prescribe a product with good patient support and services.⁹ Pharmaceutical companies understand this trend and most, if not all, have launched various digital engagement programmes in recent years.¹⁰

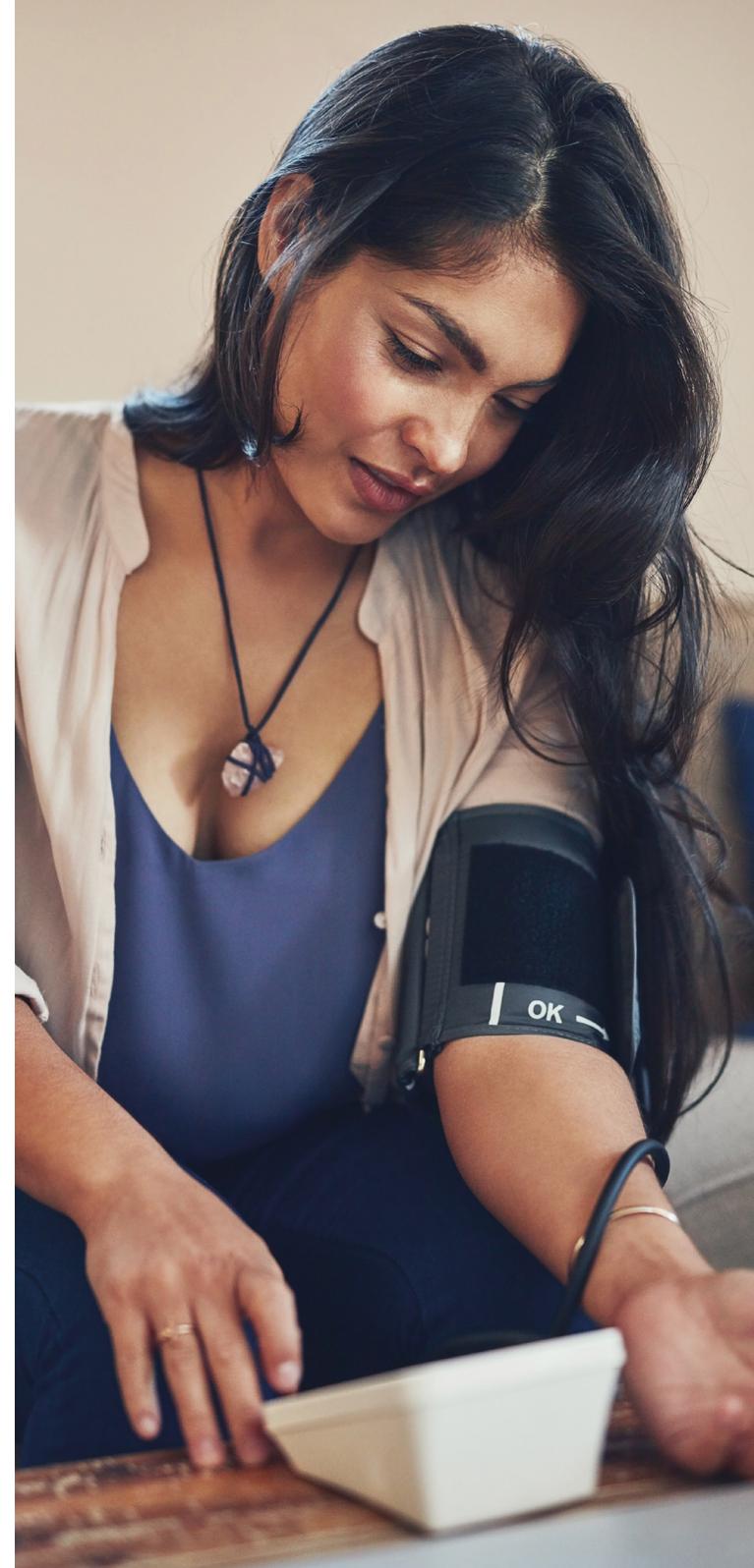
As mentioned earlier, new digital technologies are opening up new channels and enabling more holistic patient support programmes. Moreover, a recent study¹¹ identified a clear trend away from a transactional focus (e.g. enrolment, training, etc.) to more collaborative and integrated programmes that really focus on helping the patient live with her disease (e.g. tailored interventions, focus on modifying behaviours, support for the care network).

These trends, allied with digital technologies and better access to patient data offer pharmaceutical companies an opportunity to design bespoke, tailored solutions to meet the needs of the different patient groups in a targeted, focused, value-additive manner. We know that online disease management services can improve chronic disease management by up to 10%.¹² We know that patients value simplicity and customisability¹³ so that they are better able to take ownership of their own wellness and participate in their own care.¹⁴

The patient support programme, in of itself, does not drive differentiation and increase trust and engagement. Programmes need to be well-designed and offer patients the flexibility to tailor these to individual preferences. Moreover, there needs to be a consistent core across markets to allow players to derive insights and continuously improve the patient experience. The good news is that the technology is there to achieve this.

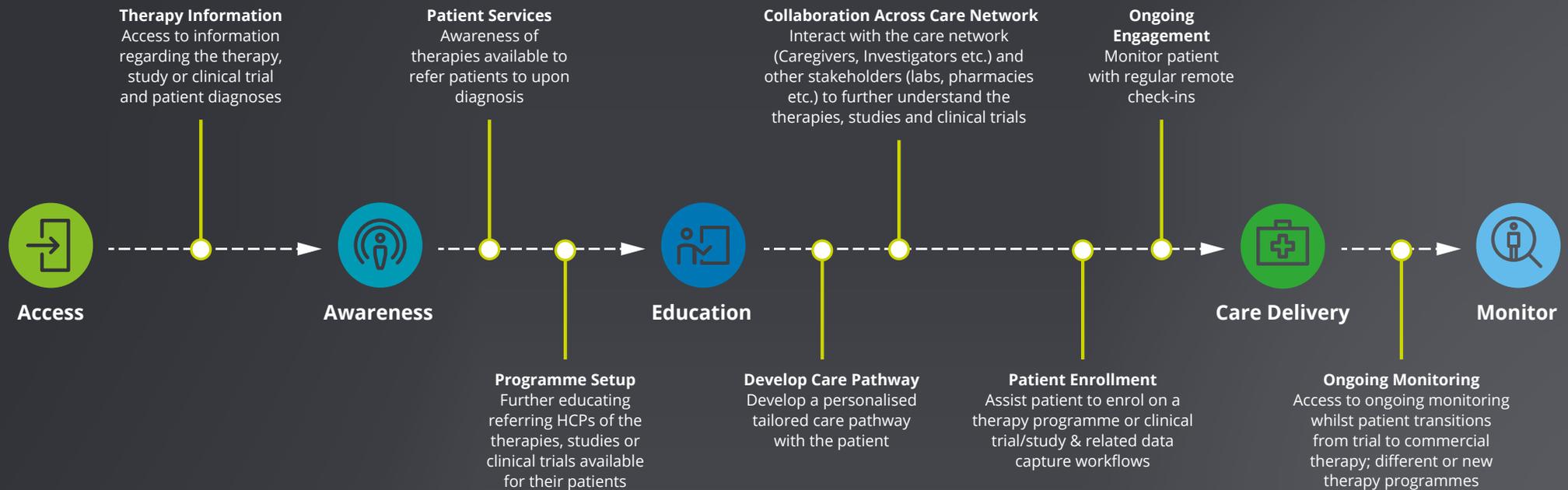
Pharmaceutical companies also need to ensure that the benefits of its PSPs are properly articulated and understood by patients, care-givers, payers and physicians. This is not always the case. The aforementioned NHS Confederation briefing document¹⁵ highlights that awareness of patient support programmes within the NHS is low and that, where extant, programmes are not realising their full potential. It states that a lack of knowledge and understanding of PSPs among NHS staff is widespread, with the result that patients are not enrolled even when there is a clear benefit, for the patient and for the NHS, in doing so.

This is the challenge that pharmaceutical companies must rise to. The good news is that the same new digital technologies that allow pharma companies to design and build a tailored, targeted, patient engagement experience are the same technologies that it can use to drive better HCP engagement and education. The outcomes that the pharma companies want from PSPs are the same outcomes that the physicians, practice nurses and care-givers want, and the pharma company should involve the HCPs in the design of the programmes and the supporting assets. This will both drive awareness and ensure that the solution meets the needs and expectations of the physicians, the health system, and, ultimately, the patients.



Example HCP journey

A PSP must engage with the HCP and care delivery network as the physician will always retain oversight of the clinical treatment plan for the patient, while the nurses and social care team are the people who engage more regularly with the patient.



Interaction Channels





Building platforms to scale the approach and optimise the cost to deliver

The current approach to patient support programmes at many pharmaceutical companies is to design and deliver these in a bespoke fashion, market-by-market.

The actual interactions with patients (e.g. training, home visits, etc.) are typically performed by third parties, market-by-market. The total aggregate cost for these various programmes is guaranteed to be sub-optimal due to this market-by-market approach. Moreover, the lead time to design and deploy a programme can be long.

Because programmes are owned and operated independently, there is little opportunity to compare programmes, analyse effectiveness, and understand how to optimise cost and maximise value. Today, the cost scales almost linearly with each additional PSP; a consistent platform, scaled and leveraged across affiliates, would drive down the incremental cost for each new programme by sharing and re-using components. Moreover, it would collect consistent performance data from all programmes to enable pharma companies to optimise design and delivery of its PSPs.

There are often multiple, similar, over-lapping solutions covering the healthcare practitioner and patient. This multiplicity of platforms can be confusing, when the key to patient satisfaction has been documented as simplicity and consistency.¹⁶ Furthermore, this diversity of platforms can create a regulatory and compliance risk, given the challenge in tracking interactions.

Deloitte estimates that, depending on the complexity of the solution, the break-even point between custom-build and platform-build can be as low as 3-5 markets. For one of the deployments of Deloitte's Patient Connect™ platform, the new programme on-boarding time was reduced from 4 months to 2 weeks. Plus, a platform solution has the massive benefit of providing a single repository for data, and the ability to analyse these data and derive insights on the effectiveness of the support programmes across therapeutic areas, patient populations and geographies.

Deploying a platform solution offers additional benefits in terms of standardisation of core functionality, as this provides the common core, around which you can tailor and deploy patient engagement applications. Even where local market conditions or specific regulations constrain the solution, the common core ensures that you maintain interoperability and standardised data taxonomies and ontologies. The component level design decisions also mean that the package core is easily extensible to accelerate the time to value for enterprise Patient Engagement solutions (i.e. "one platform, many markets").

Another benefit of adopting a platform approach to designing and building a platform solution is the standardisation of the core data that underpin the PSPs. If the programmes use consistent data models and open standards, it is much easier to compare performance across programme to improve and optimise. Open data standards improve interoperability and allow for seamless integration, be it Fast Healthcare Interoperability Resources (FHIR) for electronic medical records or Observational Health Data Sciences and Informatics/ Observational Medical Outcomes Partnership (OHDSI/OMOP) for observational data. An open platform solution allows easy integration of user applications, wearables, and sensor data via standard APIs and microservices.

The other big benefit of a standard core functionality is that it allows companies to easily and cost-effectively design different types of programme to meet the needs of different types of patient cohorts. Some diseases demand a very active and engaged care network, so the PSP would need to be high-touch and really focus on getting the care network around the patient working effectively. PSP features might include personalised support for each patient, disease education and awareness, treatment administration, social support network for care-givers, longitudinal symptom tracking, and integration into the electronic health record. Delivering this sort of programme in a bespoke, market-by-market, approach will simply not work. Pharma companies will need a standardised, scaled patient support platform to underpin the various programmes in each country, with an ability to ingest various data to drive analyses and insight generation.

The cost of running these programmes becomes even more of a challenge when you consider new, next generation therapies like CAR-T, gene therapies, etc. where patients have to be monitored for very long periods post treatment, where time horizons can run to tens and scores of years. A robust, underlying platform can be leveraged to design, build and run these monitoring programmes much more effectively than the traditional, bespoke solutions.





Conclusion

A standardised, improved, platform-based approach to patient services will deliver benefit to the entire healthcare ecosystem – patients, providers, and pharma companies.

From the pharmaceutical company's perspective, PSPs help deliver a better overall patient outcome and, as the industry increasingly pivots to more outcomes-based reimbursement models, improving the actual patient outcome will be a critical success factor. A good patient support programme will be a factor in treatment approvals and market authorisations, and will increase patient enrolment. At the same time, anecdotal evidence also points to PSPs improving patient retention and reducing switching between therapies. Even single digit increases in market share will drive significant improvements in top and bottom line performance for the pharma company while, at the same time, reducing the overall cost of care to the ecosystem. This makes PSPs a clear win-win for everyone.

Improving, standardising, and extending patient support programmes must be a top priority for all pharma companies but, particularly, for those that operate in chronic disease areas, degenerative disease, and oncology. New digital technologies and solutions offer new opportunities to design and deliver these PSPs in novel, impactful and cost-effective ways.

This is the challenge that Pharma must rise to.

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