

The Role of Patient Access During Pre-Launch Phases



Months before the first scripts are written, and long before revenue actuals are compared to sales forecasts, a launch brand's patient access future has largely been determined. So why aren't pharma teams shifting market access strategies to earlier phases of drug development? The influence of payers and PBMs is often poorly understood.

Design

24+ months

Planning Challenge: Limited visibility to the complexities of payers/PBMs and lives controllers

Impact of Poor Planning: Inaccurate data can lead to false market assumptions and misinformed decisions

Planning Challenge: Team/resource building and territory coverage mapping

Impact of Poor Planning: A large, skilled team without the right tools may lead to inefficiencies with greater risk

Planning Challenge: Lack of familiarity with specialty classes where pharmacy and medical are both relevant

Impact of Poor Planning: Limited insight into management strategies of each benefit can lead to misinformed decisions during early planning

Plan

12-24 months

Planning Challenge: Payer/PBM's response to an upcoming launch is uncertain

Impact of Poor Planning: Forecasting surprises at launch due to inaccurate information can lead to poor brand performance in first 6-12 months

Planning Challenge: Align multi-phase and matrixed resources to define launch strategy

Impact of Poor Planning: Misaligned resources could overrun budgets or underperform against targets

Planning Challenge: Lack of experience launching into a dual-benefit class

Impact of Poor Planning: Ignoring a market sector that may have market opportunity will negatively impact launch performance goals

Countdown

0-12 months

Planning Challenge: Define sales team territory coverage that can execute

Impact of Poor Planning: Unproductive field team activities can result in reduced prescription performance

Planning Challenge: Field team messaging development and objection handling

Impact of Poor Planning: Coverage communication breakdown can lead to a lack of field/rep confidence to answer market access questions

Planning Challenge: Real-time policy and restriction details that translate to stories in the field

Impact of Poor Planning: Failure to understand competitive advantages across access and restrictions could result in poor HCP uptake

Ten Ways to Achieve Optimal Pharma Patient Access

Pharmaceutical executives responsible for brand management and patient access must develop effective and agile payer marketing strategies or risk product launch failure. These ten best practices, and associated playbook downloads, will help brand managers reach their market access goals.

1. Understand the patient access landscape.

For the target therapeutic class, understand payer and PBM customer groups who have significant patient access influence.

2. Leverage therapeutic analogues.

Understand the target therapeutic market and let historical analysis of relevant analogues guide forecasting models — especially if launching into a new class.

3. Analyze payer and PBM behavior.

Get the new-to-market policies for every payer and PBM so that, until P&T determinations are made, patient and HCP experiences on launch “Day 1” are well understood.

4. Gather patient assistance program data.

Consider what the data indicates regarding the merit of a rebating strategy versus patient assistance programs.

5. Take the guesswork out of forecasting.

Use a reliable dataset for market uptake forecasting so realistic expectations are set internally.

6. Empower field teams with information.

Remember that HCPs won't prescribe a brand if it is a hassle. Empower field teams with intuitive tools to convey policies and restrictions simply.

7. Staff for success.

Hire knowledgeable field teams where patient access is strong and stakeholder attitudes are favorable toward the launch brand.

8. Keep your eye on the market.

Continually monitor where each brand is being placed on formularies and what the coverage statuses are.

9. Leverage a credible third-party dataset.

Monitor coverage status to ensure contracted status levels are consistently applied by payers.

10. Plan for a changing future.

Anticipate the impact new market entrants will have on brand performance and take proactive steps to limit disruption from changing payer and PBM attitudes and policies.

About MMIT

MMIT is a product, solutions and advisory company that brings transparency to pharmacy and medical benefit information. MMIT is 100% focused on market access.

Our team of experts focuses on pharmaceuticals, business drivers, market intelligence and promotional behavior. Our products and services support brands approaching launch, commercialization efforts, pre-P&T market planning, launch strategy and readiness.

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