

# Where does technology fit in a market access driven playground?



Access functions are becoming increasingly central to the customer engagement process. The shift in position of this function is one of the key trends faced by the pharma industry. Companies need to adapt to remain competitive and to be able to provide value to the patient faster without getting stuck in a position where they will not be able to serve the market. As in most cases, technology can help. Especially alongside renewed processes and organisational changes, a shift in technology usage can provide immediate benefits. Market access, being extremely data driven, could typically take advantage from this technology trend. This BASE whitepaper details the existing trends around the role of market access and elaborates on the synergies of using technology.

## **Market Access at the centre of the sales and marketing process**

Gone are the days when solid evidence would ensure reimbursement. Even with stellar results from Phase 3 trials, companies will have to go through multiple Health Technology Assessments (HTAs). The number of HTA agencies keeps increasing, and even countries such as South Africa and India, which previously did not require an assessment, are now asking for detailed data. In addition, the HTA agencies are becoming increasingly rigorous in the way in which they evaluate the data. The grouping of these organizations into the International Network of Agencies for Health Technology Assessment only reinforces the message and the centrality of the role of the market access department. The ever-increasing number of countries ensures that the movement is not about to vanish.

Furthermore, similar to the management of the HTA agencies, the messages provided to physicians need to evolve. The Patient & Doctors journey must start much earlier than the drug approvals to initiate the discussion when the technologies are assessed. This would open a lot of doors for marketing automation tools long before approvals and reimbursement of drugs. Furthermore, the marketing journey should address the comorbidities of a specific disease as well, increasing the number of potentially targeted stakeholders.

HTAs are one side of the coin. The other side of the coin is that the general pricing concern of the healthcare ecosystem complexifies the role of the pricing department (usually part of the market access team) within a company. Companies may now need to rely on outcome-based contracts to get access, shifting the role of the commercial excellence function completely from trying to sell in a competitive mode to a more data-driven function that focuses on establishing the right metrics and on validating the collection of data. New pricing models such as the Netflix model between Gilead and the state of Louisiana are other factors pushing the market access function into the centre of the customer engagement strategy.

In fact, the entire value chain is being shaken by the new manufacturing process. Gene and cell therapies are requiring the patient to first go to a centre, secondly to have the drug being manufactured, and finally coming again to get the newly engineered products. To excel in such an environment there is a need to alter the traditional commercial function to include additional touchpoints and to work more closely with the market access group and external stakeholders. Those aspects must be reflected in a solution going way beyond a standard customer relationship management (CRM) solutions. As a low hanging fruit, there is also a need to include the diffusion of Phase IV messages to relevant stakeholders.

Finally, the number of tenders is exploding. But more significant than the number is the change in the nature of the contracts. More than just agreeing on a specific volume, tenders such as framework agreements or dynamic

purchasing systems are a tool to limit access to a certain type of product within a specific market. This would result in geographies where hospitals or physicians may be limited in their choice of therapies. It means that the tender office and the sales team need to work together to maximize their reach in the right location while avoiding others. On top of that, the size of the geographies is increasing, as due to a multitude of local agreements some authorities now cover multiple countries. For instance, this is true in the Nordics, but also in the Gulf countries. Formulary positioning has a similar impact on limiting the access to a certain product within a specific account.

With all these dynamic aspects and new regulations at play, the landscape may be complex for many physicians to navigate. Taking the example of biosimilars, the knowledge of the compounds as well as the prescription rules depends a lot on the country as well as the specialty of a physician. In fact, this seems to be even more prominent in the case of general practitioners compared with more specialized doctors. GPs are more reluctant to prescribe biosimilars whenever they know it exists whereas other specialists are strong advocates and do not shy away from switching patients' treatments.

### **Technology to improve collaboration in commercial excellence**

Coping with the above reality requires a company to evolve and to improve its processes. Leveraging technology is one way to unlock efficiency or to simply become better at managing customers and patients.

Starting with the HTA aspect, it seems important for Medical Scientific Liaisons (MSLs) to obtain and use information related to the HTA agencies. Typically, MSLs would be the first in the field after the market access function. It may be of critical importance to create a platform where both groups can interact and understand the message delivered by the company in each case. A CRM platform may be the starting point as it contains a lot of similarities with the management of the HTA agencies. Essentially, there is a need to enable some form of planning around the HTA agencies for these groups. Also, there should be a way to segment these. Knowing which data is most relevant for each agency can be a critical competitive advantage and could be stored in such an HTA solution for easier access. Even if the data is currently public, it is difficult to retrieve it and make further use of it. A tool would help. One further step could be to ensure that the entire company knows which pieces of evidence were discussed with each member of the agency, to provide the complete picture and avoid redundancy. Besides, viewing the various activities that revolve around meeting a member of such an organization could be very valuable to maximize the spread of the message by MSLs while the market access group is working on getting the price discussion through the final line. Once passed, key account managers (KAM) should be armed with all previous discussions to add the new product to the formularies.

Another area of opportunity lies in the tracking of reimbursement decisions and outcomes of the HTAs process. Some software vendors are already providing capabilities of this kind. There is no reason to not integrate those aspects in a comprehensive card of an agency. Web-crawling information could provide further insights into the outcome. In the long run, this could become extremely valuable if coupled with some natural language processing (NLP) capabilities as it could transform any published document into a source of insights (at a much faster pace than a human reading). This could support a better understanding of all the stakeholders at hands.

Outcome-based contracting is a significant challenge from a process standpoint, but that is also one of the places where technology could support. One of the most difficult aspects would be the collection of data. Blockchain could potentially be leveraged by providing a decentralized trusted data sharing mechanism for that purpose. The sales force would then analyze the results to provide the right level of rebates to the hospital. Smart contracts could even



### **About BASE life science**

BASE life science is a fast growing, fast paced consultancy focused on the life science industry. Established in 2007 and based in Copenhagen, Denmark, BASE targets a local as well as a global customer base. Since inception, BASE life science focuses on helping life science companies create real business value from digital platforms and data within its area of expertise; Commercial Excellence, Clinical, Regulatory Affairs and Quality & Compliance. Since 2007, the company has been active globally from Denmark and employs more than 50 employees.

be implemented to automate this aspect. The commercial team would not focus on overseeing the explanation of a molecule to a doctor, but more on the expectation from the patient (e.g. simply have a wearable) and what the purpose is. To make life easier for the sales force, it may be a good strategy to connect those contracts with the CRM system to provide an overview of the representatives visiting a centre.

Finally, regarding the tender aspect, this is another area where NLP could support the process by enabling information to be captured and stored on a platform where representatives have access and where the territory alignment solution can run its algorithm to assign the right physicians to the representatives. Essentially, as by law all contract award notices must be published, it would be possible theoretically to retrieve all decisions, points results of each awarding criteria, as well as some competitive information. This data should flow to the territory alignment tool where the segmentation could be updated properly, ultimately updating the list of HCPs to be contacted.

### **Time for a tender authority management system?**

Mirroring the idea of the HTA solution, it may be very interesting for the representatives to get a complete picture of the tender authority. Key opinion leaders (KOLs) are often part of the procurement committee within a tender authority, and as discussions with those physicians could be beneficial for the company it therefore may be very valuable for the representatives to know exactly who to target in that regard within their territory. More specifically, those discussions should happen months before the tender is published. Knowing the status of the current tender linked to a physician's location, and what message to deliver specifically to this tender authority, could ease a lot the work of MSLs.

Technologically, this would not be a very difficult task. Most of the capabilities built for a CRM system could apply to a tender authority management system. It may be a bit more difficult from the data side. Contrary to Healthcare Professionals (HCPs) or Healthcare Organizations (HCOs), the tender authority data is more complex to purchase. Even if some vendors would provide a list, given the fact that not all tenders are published at the European level, some authorities would be missing from those data sets. It would therefore involve having users creating tender authority data directly into the system. This requirement would complexify master data management and impose a stewardship effort, which would have to be kept in mind when moving to daily operations. If planned properly, data quality may last, ultimately delivering great insights. Of course, additional tender specific capabilities around pricing and contracting could be included although these are already covered by today's solutions.

### **Unleashing the power of analytics**

All those different "point capabilities" should be integrated into a single platform. This would enable creating analytics almost end-to-end from HTA to tenders and sales. The pricing function may be temporarily out, but could be included in a second phase to get a complete picture. If all data is available on the platform, there is no reason not to use artificial intelligence capabilities to identify patterns. It may be valuable knowing beforehand the areas of easier HTAs and more aggressive tenders. Classifying which hospitals are more likely to have a more open approach to outcome-based contracting before a visit could be very valuable for the representatives in the field and could ultimately create a competitive advantage. One step further could be to leverage AI for the design of the content itself. Using the power of picture analysis on top of the pattern identification could facilitate the creation of more valuable content, attracting the attention of the right stakeholders at the right time.

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## Technology to bridge the gap

In conclusion, the evolving place of market access in the pharmaceutical value chain will force companies to increase the collaboration between functions, in this case the sales force and the market access team. Collaboration is a domain where technology historically has been a strong enabler, and there is no reason this would be any different for market access. Creating a platform where companies can manage HTAs, tender authorities, as well as the status of the outcome-based contracts while simultaneously performing its more typical sales activities could create a wealth of valuable insights ensuring an improved decision-making process. Once in place, such a platform could become the basis for an AI engine as well as a setup to apply marketing automation technics to a new set of customers.

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