Assessing the evolving landscape of digital engagement between healthcare decision makers and biopharma companies

Joanna Ng¹; Jasmine Knight¹; Tasmina Hydery¹; Laurie Fazio¹; Henry Lee¹ ¹Xcenda, part of Cencora, Conshohocken, PA, USA

Background

- The exchange of scientific information between healthcare decision makers (HCDMs) and biopharma companies through digital channels has increased over the years, especially during the peak of the COVID-19 pandemic.1
- Demand for pre-approval information has also increased and continues to grow. The timing in which to provide HCDMs with pertinent information to inform their formulary and coverage decisions is of utmost importance to ensure that patient access is not delayed.²
- HCDMs have reported that digital resources are an integral part of guiding pharmacy and therapeutic (P&T) committee decisions, and 80% of HCDMs prefer to access information digitally.^{3,4} Previous market research has also found that HCDMs spend more than 3 hours a day looking through digital resources.4
- However, despite increases in digital engagement, there is limited information available related to HCDM perceptions of digital resources and the influence they have on formulary evaluations.

Objective

 To gain a better understanding of HCDM digital communication resource utilization trends when using digital tools to assist in the formulary decision making process.

Methods

- A double-blinded, web-based, 25-question survey was fielded to HCDM users of FormularyDecisions® Network and Xcenda's Managed Care Network from June 23, 2023, to July 5, 2023.
- Participation in this survey was voluntary and a modest honorarium was paid by Xcenda to participants who completed the survey.
- Respondents were from health plans, integrated delivery networks, and pharmacy benefit managers
- Quantitative analysis was used to summarize multiplechoice and Likert-scale responses.

Scan QR Code

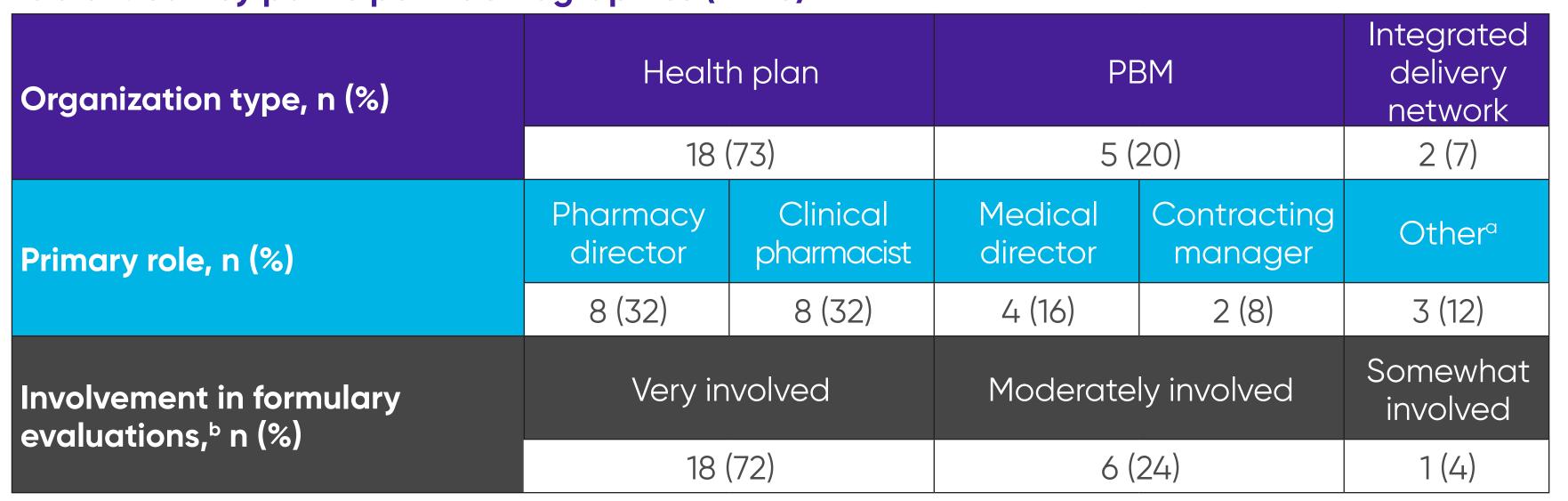
to view a digital copy of this pos



Results

• A total of 25 HCDMs responded to the survey. As seen in **Table 1**, the organization type with **Figure 2. Impact of COVID-19 on work environment for HCDMs (N=25)^a** the largest participation was health plans followed by PBMs.



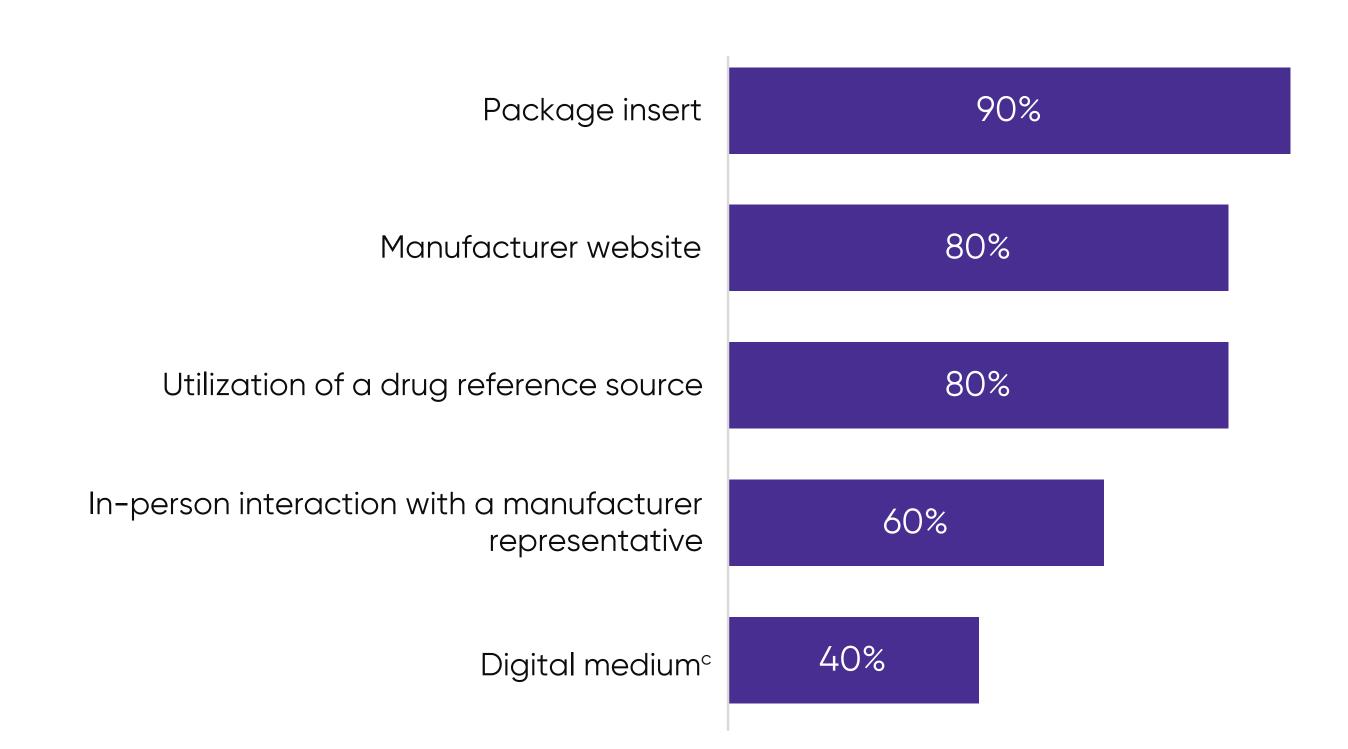


"Other" roles included senior manager, formulary pharmacist, and VP of pharmacy. b There were no responses for "Not very involved" or "Not involved at all."

Key: PBM – pharmacy benefit manager.

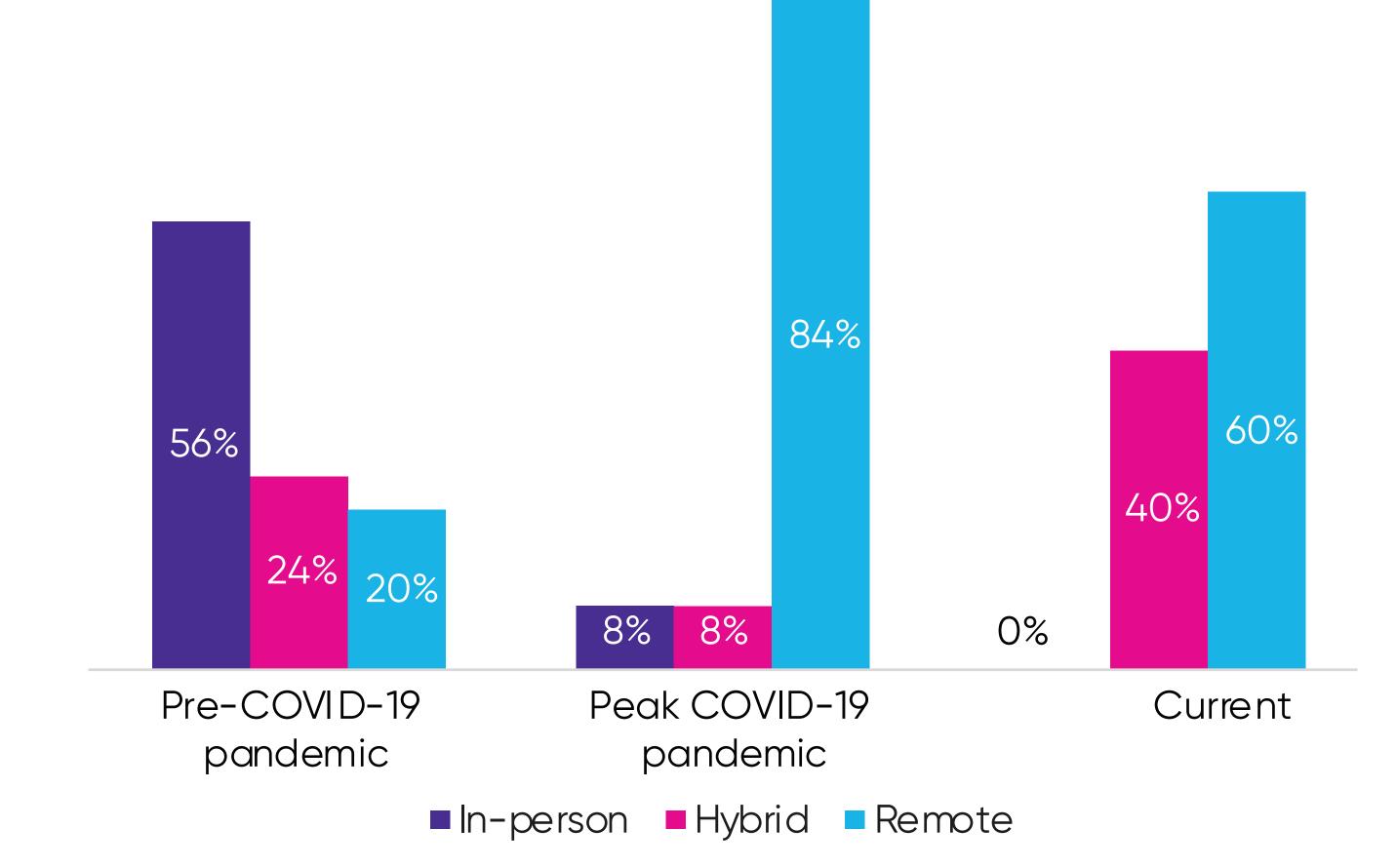
- According to 88% (N=25) of the HCDMs surveyed, clinical pharmacists were the most likely individuals to prepare the scientific-/medical-related information for formulary evaluations.
- The top 3 ways in which HCDMs access scientific-/medical-related information were through package inserts (90%; N=10), manufacturer websites (80%), and drug reference sources (80%) (**Figure 1**).

Figure 1. Resources HCDMs access for scientific-/medical-related information for formulary evaluations (N=10)a,b



^a Q: How do you access scientific/medical-related information for a product you are reviewing? b Only HCDMs who responded as personally preparing materials for formulary evaluations answered this question, leading to a lower Digital medium includes email/video call with a manufacturer representative; emailing manufacturers' medical information/department; digital platform; and webinars/podcasts.

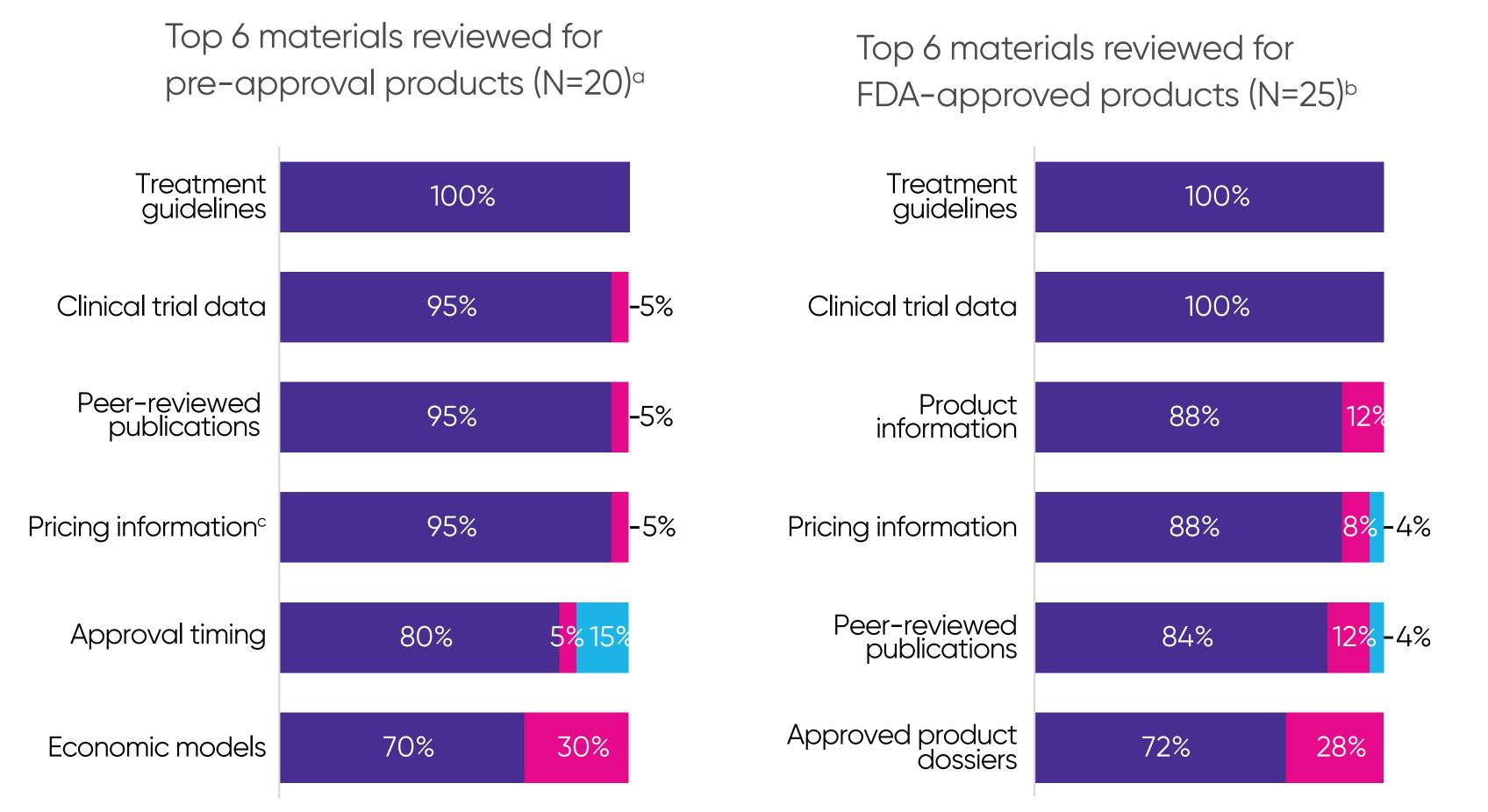
- Irrespective of the work environment and COVID-19 impact, HCDMs (N=25) spent over double the time reviewing digital resources compared to non-digital resources (ie, average 2.3 hours per day vs 0.7 hours per day). Due to COVID-19, HCDMs reported their use of digital resources had either stayed the same (70%; N=10) or increased (30%) but did not decrease.
- Over the course of the COVID-19 pandemic, there was a shift from a mostly in-person (56% pre-pandemic; N=25) to a hybrid/remote work environment (100% post-pandemic) (**Figure 2**).



^aQ: What type of work structure has your organization followed during the following time periods?

 Knowing the types of materials HCDMs are most interested in could provide biopharma companies with insights as they develop their digital engagement strategy on which types of vital information to provide to HCDMs. Figure 3 shows the most common materials that HCDMs review for pre-approval and FDA-approved products.

Figure 3. Materials that HCDMs review for pre-approval and FDA-approved products

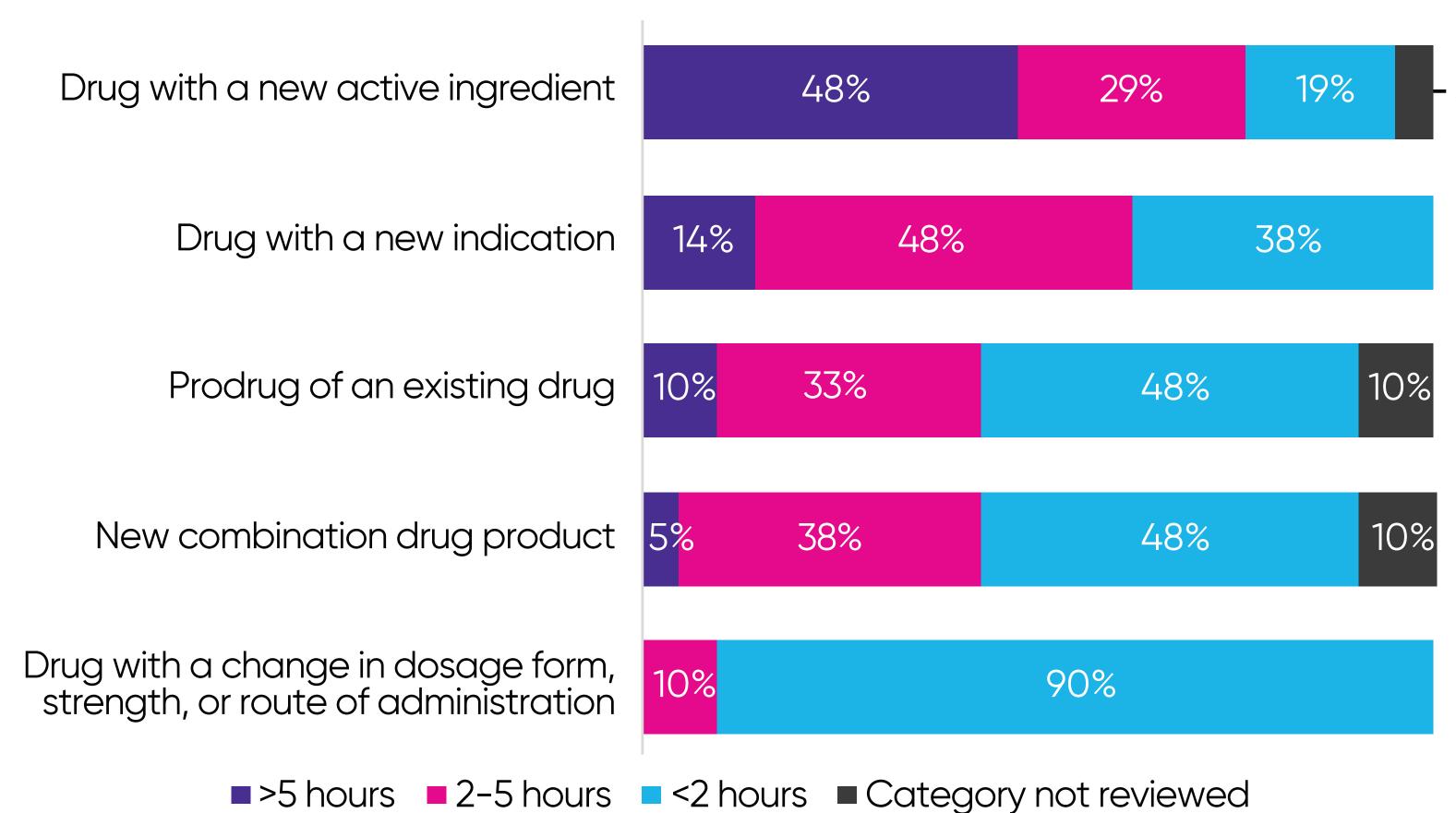


Always/Frequently used Occasionally use Never use

- 2: Durina the product review of pre-approval products, please indicate the extent to which your organization uses each of the items listed below b Q: During the product review of FDA-approved products, please indicate the extent to which your organization uses each of the items listed below For pricing information related to pre-approval products, HCDMs are often referring to analysts who have published proxy estimates based on
- d Answer choices: "Always use" and "Frequently use" were combined into one category: "Always/Frequently use." Note: Other materials reviewed for pre-approval products that were not in the top 6 answers shown above: pre-approval information exchange studies, indirect treatment comparison, economic models, healthcare economic information, value assessment frameworks, patient access programs, formulary kits, payer value proposition, guidelines, and systematic literature reviews.

- FDA-approved product dossiers were noted as being always/frequently used or occasionally used by HCDMs reviewing approved products (Figure 3). The most reviewed section of the approved product dossier was the clinical evidence (72%; N=25).
- Overall review time for an approved product dossier depended on the drug approval category. Nearly half of HCDMs (48%; N=21) reported that drugs with a new active ingredient took more than 5 hours to review, while 90% reported that drugs with a change in dosage form, strength, or route of administration took less than 2 hours to review (Figure 4).

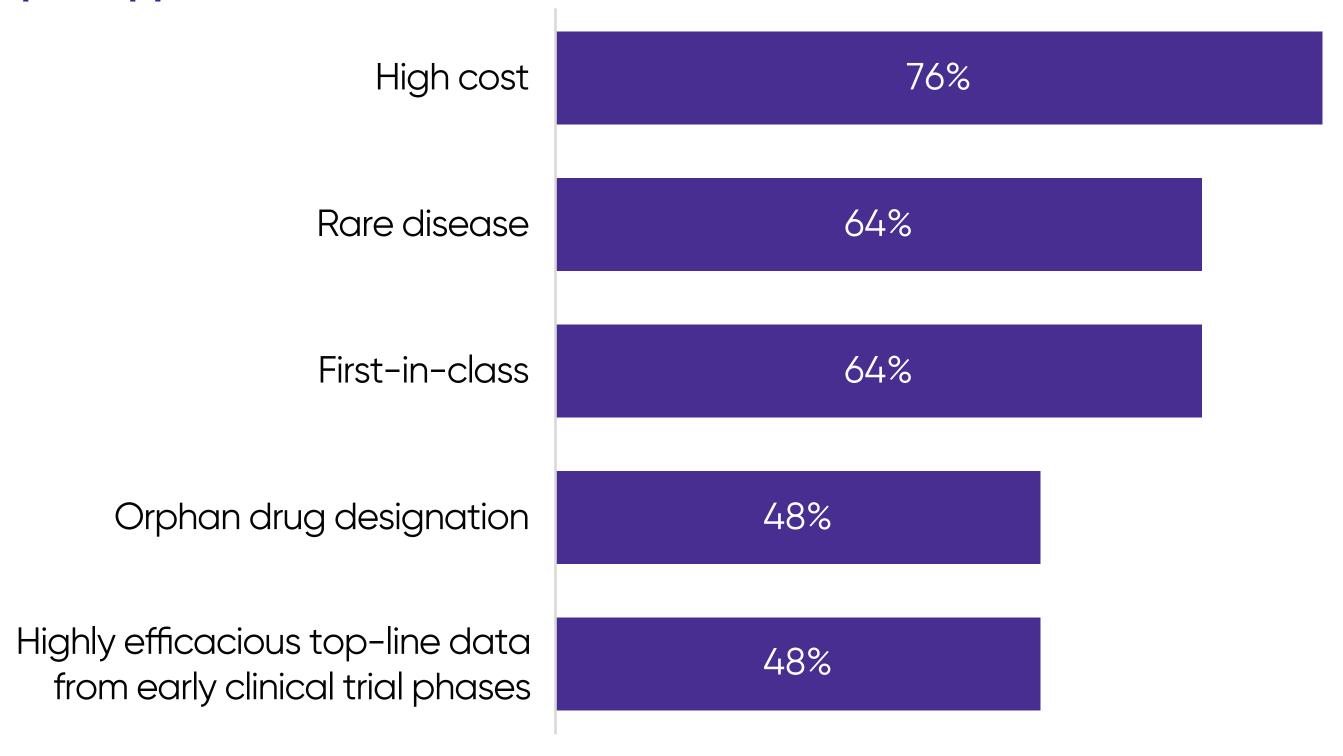
Figure 4. Length of time for HCDMs to review an approved product dossier based on drug approval category (N=21)a,b



^a Q: How long, on average, does it take for you to review an approved product dossier for the following drug approval categories? Select the option that best applies to each of the following drug approval categories. ^bOnly HCDMs who indicated having reviewed approved product dossiers answered this question, leading to a lower number of

- The top 3 changes to the Academy of Managed Care Pharmacy (AMCP) dossier that HCDMs indicated they would like to see included more real-world evidence (86%), having the dossier be more interactive and multimedia in design (67%), and to be shortened in length (57%).
- There has also been an increased interest among HCDMs in obtaining pre-approval materials. Among HCDMs surveyed (N=25), 56% stated that the value of having access to pre-approval materials was somewhat or very important; 36% rated access to pre-approval materials as being of neutral importance.
- Factors that influence when HCDMs may seek out pre-approval materials included key product characteristics (eg, high-cost, rare disease, first-in-class) (Figure 5) and timing with the Prescription Drug User Fee Act (PDUFA) date.
- Over half (56%) of the HCDMs surveyed stated that their organization reviews preapproval materials 3 to 12 months prior to the PDUFA date. Additionally, a quarter of respondents (24%) reviewed these materials up to 3 months prior to the PDUFA date. The remaining 20% of HCDMs responded that their organizations do not review any sort of pre-approval materials.

Figure 5. Top 5 product characteristics that increase the likelihood of HCDMs seeking out pre-approval materials (N=25)a



^a Q: Which of the following product characteristics, if any, increases the likelihood that your organization will seek out pre-approval Note: Other answer choices included breakthrough therapy designation, fast track designation, accelerated approval designation,

priority review designation, improved patient experience, and other (ie, no product characteristic could increase the likelihood of the organization seeking out pre-approval materials).

Limitations

- Respondents were recruited through the FormularyDecisions Network or Managed Care Network, so the results may not reflect the opinions of the general HCDM population.
- Additionally, HCDMs that chose to take the survey described here may be more interested in digital resources or utilizing digital resources more than the general HCDM population, which may have led to responder bias.
- Small sample size

Conclusions

- HCDMs are spending more time accessing materials through digital channels. COVID-19 has led to the shift to a remote working environment. This shift emphasizes the importance of biopharma companies in developing a digital engagement strategy to provide HCDMs with the resources they need to guide formulary decisions.
- The dossier remains an essential resource for HCDMs to make formulary decisions. HCDMs seek an interactive, multimedia design for dossiers, which should encourage biopharma companies to invest in creating more digital experiences through their dossiers to increase HCDM engagement.
- Pre-approval information is increasingly being considered by HCDMs during formulary decision making. As seen from this survey, HCDMs are reviewing pre-approval products most commonly 3 to 12 months before the PDUFA date. Providing information for up to 1 year ahead of expected approval will allow HCDMs to make more informed formulary and coverage decisions.
- This survey has provided insight into the increasing utilization of digital resources among HCDMs and what types of materials they use most often in formulary reviews. However, further research is needed to identify the types of characteristics HCDMs look for in digital resources and how biopharma companies are implementing these changes.

Acknowledgements: The authors would like to acknowledge Tina Chiang, PharmD, MBA and Sarah Dunlap for reviewing the survey questions; Janet Hughes for programming the survey; Jill MacManis for fielding the survey; Amy Pearson for visualizing the data; Christina Schnell for copyediting the poster content; and Richard Jordan for graphically designing the poster layout.

References: 1. FormularyDecisions. Data on file. 2022. 2. Mody L. Closing the gaps in pre-approval information exchange to accelerate product success and patient access. PharmExec.com. August 24, 2022. https://www.pharmexec.com/view/closing-gaps-pre-approval-information-exchangeaccelerate-product-success-patient-access 3. Certara. How pharmaceutical companies can engage payers digitally. July 29, 2022. https://www. certara.com/blog/how-pharmaceutical-companies-can-engage-payers-digitally/ 4. Asselin R. Integrating payers into your digital communication plan. PharmExec.com. April 4, 2021. https://www.pharmexec.com/view/integrating-payers-into-your-digital-communication-plan

