How to Understand and Find the Networks of Clinical Patient Advocate, Market Access, Governmental, and Physician Stakeholders that Matter in Europe, Asia, Latin America, U.S., Canada, and Emerging Markets

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White Paper
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New product launches in high-cost and competitive specialty areas are driving a rethinking of stakeholder engagement. As payers exert a stronger influence on potential market share by implementing efforts to control costs, companies are looking at non-traditional stakeholders to drive integrated marketing efforts that can impact the perceptions of payers, physicians, and patients around their new products. Market access functions are also shifting toward a higher degree of value message promotion and engagement, reflecting the importance of these new stakeholders.

**It is essential to identify decision-makers and their influence networks.**

The landscape of these stakeholders differs for each country and therapeutic area. A decision-maker at a payer will rely directly or indirectly on the advice of expert and unbiased clinicians, clinical guidelines, and cost-effectiveness guidance. They will also rely on the opinions of patient groups and the level of advocacy promoting patient access for a new product. Only understanding the decision-makers is limiting. Identifying how an expert clinician, a health economist, a patient group, an academic center, all play a role in affecting payer decision-making enables companies to build integrated strategies that communicate value through this chain of credible voices. There is a shift in the industry — where payers increasingly want to ensure the voice of clinicians they speak to are unbiased. Life sciences companies must identify these clinicians who are not necessarily the same key opinion leaders (KOLs) previously identified for marketing or medical affairs efforts.
Figure 1: A diverse but interconnected stakeholder landscape

- Regulatory
- Patient Advocates
- Clinical Experts
- HEOR and Public Health
- National Stakeholders
- Regional Stakeholders
- Policy

Experts  Decision-makers

Figure 2: Understand each stakeholder you need to target and level of connectivity to a decision-maker

- Guideline Authors
- Public Health Experts
- Scientific Experts
- HTA
- Scientific Experts
- Patient Advocates
- Government Officials
- Private Payers
- Public Payers
**Identifying these networks is a challenge for any life sciences company.**

In many cases these networks are built on relationships and trust, and relationships are not public knowledge. In cases where information does exist, it is very difficult and consuming to find, analyze, evaluate, and connect these stakeholders. There are degrees of relationships — direct contact and discussions between stakeholders, or indirect and impersonal influence driven through scientific and economic literature, speaking, or guideline development. Understanding the proximity a stakeholder has to a payer is a core element of network mapping and allows for market access strategies that target each stakeholder with the right message.

**Profiling a stakeholder is essential for developing and executing market access strategies.**

Once a stakeholder is identified as important in a market access network, companies must begin to assess how these individuals collaborate with others in their professional network. Companies must fully understand their scientific or economic professional history. Many times, digging deep into a stakeholder’s history can reveal that they have spoken on cost effectiveness or collaborated with clinicians or other economists on access issues. Using these profiles, life sciences companies can uncover whether a stakeholder has participated in industry-sponsored engagements and on what topics. These insights ensure that when planning collaboration among stakeholders, activities are targeted to their expertise and experience, leading to stronger outcomes. Additionally, companies can learn whether a stakeholder has experience working with other life sciences companies on market access issues, further justifying potential engagement.

**Identifying networks is not enough.**

To build and execute a strategy, companies must uncover the unmet needs for each stakeholder that will drive collaboration or engagement. Life sciences companies are used to planning engagements with KOLs for marketing or medical purposes, but are often at a loss when planning engagements for health economists, payers, or clinical experts working with payers. Some questions companies must ask: What types of data can a company provide that will assist payers in their decision-making process? What professional goals for a KOL or a health economist can a life sciences company support in the next year? Has this stakeholder collaborated with the industry in the past? Is there an interest in future collaboration? This guides the development of a strategy that not only benefits the company, but also provides benefits to the stakeholders with whom you collaborate.
Selected Case Examples — Non-traditional Market Access Stakeholder Strategies in Key Markets

**North America**

**United States:**
A pharmaceutical company was looking to drive formulary placement for a new oncology product within the U.S. managed care market. The company was working in a highly competitive indication, with multiple new molecular entities launching within the U.S. The company targeted decision-makers at key Managed Care Organizations (MCOs), including United Healthcare, Aetna, and Wellpoint; group purchasing organizations (GPOs), including 21st Century Oncology and ION Oncology; and integrated delivery networks (IDNs). With a significant impact of leading KOLs on decision-making within these private organizations, a comprehensive map uncovered how targeting specific thought leaders will communicate messages to the decision-makers at each group. The impact was a coordinated strategy within a highly fragmented market.

**Canada:**
A top 10 pharmaceutical company launching new oncology drugs worked with Heartbeat Experts, now a Truven Health Analytics™ company, to map the stakeholder networks around specific provincial cancer boards, such as Cancer Care Ontario, and the stronger and less transparent cancer boards in British Columbia and Alberta. These boards drive the use of new cancer products within Canada, so reaching key physicians on these boards had a major impact on driving market share for the client at launch.

**Latin America**

**Brazil:**
A top 10 pharmaceutical company working in cardiology was looking to understand the key stakeholders involved in driving health technology assessments (HTAs) in Brazil and the influence of these assessments onto public and private formulary placements. Through stakeholder mapping, we uncovered the key decision-makers and influencers within the ANVISA (Brazilian National Health Surveillance Agency) structure, including HTA decisions at CONITEC (Brazil’s health technology assessment body). Through this process, KOLs and influencers were identified at key private payers, including Unimed and Bradero.

**Mexico**
We worked with a top 10 pharmaceutical company launching a new oncology product, uncovering the clinical KOLs, health economists, and patient groups seen as influential with key payers, including Mexican Social Security Institute (IMSS), EESTEE, and PEMEX, a Mexican state-owned petroleum company. Through interviews with key stakeholders, we uncovered collaboration opportunities between the payers and the pharmaceutical company, providing avenues for the company to build mutually beneficial relationships with each payer and identified KOLs.
Europe Established and Emerging

Russia:
We uncovered the stakeholder landscape for a top 10 pharmaceutical company launching HIV products within Russia. We focused on the top 10 provinces, uncovering the clinical and nonclinical stakeholders who drive reimbursement within hospitals in each province.

United Kingdom:
For a top 10 pharmaceutical launching a new diabetes product in the UK, we worked to identify stakeholders and KOLs who will potentially impact National Institute for Health and Care Excellence (NICE) guidance when reviewing clinical and economic data from this company. We developed an advisory board of 15 KOLs and economists to discuss the data and potential assessments by NICE. The output refined the value dossier prior to submission to NICE, ensuring NHS reimbursement at the level desired by the company.

Spain:
Working with a top 10 pharmaceutical company launching a new rheumatology product in Spain, we uncovered the landscape of rheumatology stakeholders in each major region of Spain, plus key rheumatology professional societies and patient associations on the national and regional levels. We identified key stakeholders impacting HTA evaluations at key bodies including at Agencia de Evaluación de Tecnologías Sanitarias de Andalucía, Agència d’Avaluació de Tecnologia i Recerca Mèdiques de Catalunya, and the Axencia de Avaliación de Tecnoloxías Sanitarias de Galicia.

Italy:
We worked with a top 10 pharmaceutical company to launch a new hematology/oncology product at a higher cost than the current standard of care. We focused on the top six regions within Italy and uncovered a wide set of clinical and economic stakeholders who impact local reimbursement and hospital funding decisions within each region. We uncovered variances between highly organized reimbursement systems in Veneto to simplistic structures in Campania. For each region, we developed a unique plan of action to collaborate among the clinical and nonclinical stakeholders to communicate the value message for this new product.

Germany:
Working with a top 10 medical device company launching a new cardiovascular device, we mapped the clinical and nonclinical networks at key sick funds, including Barmer, DKV, and AOK. In addition, we uncovered those individuals who have worked with the Institute for Quality and Efficiency in Healthcare (IQWiG) to review cost-effectiveness of cardiovascular devices in the past and what improvements in data could ensure a positive cost-effectiveness assessment by IQWiG.

France:
We worked with a launching hematology/oncology product in France, mapping influencers on the Comité Economique des Produits de Santé and the clinical and patient groups all who are aligned well to support the introduction of this new product within France. The multidisciplinary collaboration ensured a positive economic evaluation by CEPS, positive pricing approval from HAS, and high-tier formulary placement within the AP/HP hospital system.
Asia-Pacific
China:
A top 10 pharmaceutical worked with our experts to uncover likely core committee members for national drug reimbursement listing and provincial reimbursement listing in Shanghai and Sichuan provinces. Through extensive interviews with key contacts in the Chinese public sector, we identified 30 likely members per committee, out of which 10 would be selected. We conducted this work for the cardiovascular, diabetes, and respiratory indications. Once the committee members were selected, their network of collaborators on clinical and economic issues were identified and mapped.

Korea:
We worked with a multinational top 20 pharmaceutical company launching a new product for hematology/oncology. Previous similar products launching in Korea did not receive positive HTA evaluations from Health Insurance Review and Assessment (HIRA), and National Health Insurance Program (NHI) reimbursement was essential for this company to successfully market in Korea. We uncovered clinicians who were connected with key committee members who determine hematology/oncology reimbursement at HIRA. Through engagement with these networks using virtual education channels, a stronger understanding and implementation of the company’s value messages greatly improved HIRA’s assessment of the product.

Australia:
We worked with a top 10 pharmaceutical to identify the national stakeholder networks for reimbursement of a new lung cancer product. Our experts uncovered the networks of individuals who collaborate with Pharmaceutical Benefits Advisory Committee (PBAC) members. The company ran educational efforts within the clinical community that helped educate these KOLs on the product’s potential from a clinical and economic perspective. The company also worked with identified patient advocacy groups who lobbied for increased access for this new mechanism of action in lung cancer treatment.
ABOUT TRUEN HEALTH ANALYTICS

Truven Health Analytics delivers the answers that clients need to improve healthcare quality and access while reducing costs. We provide market-leading performance improvement built on data integrity and empirical truth. For more than 30 years, our insights and solutions have been providing hospitals and clinicians, employers and health plans, state and federal government agencies, life sciences companies, and policymakers the facts they need to make confident decisions that directly affect the health and well-being of people and organizations in the U.S. and around the world.

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