Partnering With Patients

A holistic look at how innovative patient services offerings can become a competitive advantage

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Cancer treatment options have never been better. Scientific advances continue to improve the effectiveness of treatment. Oral therapies and home infusion options will allow patients to spend more time at home with family and friends and less time in a doctor’s office or hospital. Overall survival is increasing across many different tumor types—in some cases quite dramatically. More patients living longer and with a higher quality of life is driving a need for a mindset shift, a transition from supporting people with an acute condition to partnering with people who are managing a chronic disease. As organizations begin to recognize and act on this need, they’re redesigning the care experience—sometimes in direct partnership with patients and advocates—to give patients a seat at the table.

While patient services programs clearly are gaining momentum, there’s no one-size-fits-all approach. ZS has partnered with pharmaceutical manufacturers around the world to benchmark services, pinpoint patient needs and develop innovative solutions. Based on our experience and resulting insights, we’ve developed a five-pronged framework, aligned with the patient treatment journey, to help oncology companies prioritize their investment in patient support services programs and offerings.
The framework is divided into four main categories. "Activate" focuses on initial patient engagement and program enrollment. "Get" relates to access and reimbursement services. "Start" refers to services relating to the onboarding and initiation of a patient on treatment. Finally, "stay" includes ongoing support services that help a patient adhere to treatment protocol.

Additionally, we’ve tagged these services according to their availability across the industry, and how valuable they are from a patient perspective. We’ve come up with four types of services:

1. **"Table stakes"**: These services are widely available and highly important to patients, and many competitors do them well. There is limited opportunity to differentiate with them. However, they are considered a critical entry point for building out a program.

2. **"Differentiator"**: These services are very important to patients, but the competition does them poorly. These offerings are an opportunity for companies to excel and stand out from the pack.

3. **"Me too"**: These are services that many other companies are offering. There’s a high availability of "me too" types of services, but they aren’t as important to the patient as other types of services.

4. **"Opportunistic"**: These are services that many other companies are offering but have lower importance to the patient. These services should be invested in if they can be done easily.

Here’s a look at what kinds of patient services are being offered within each category, namely the offerings within the "table stakes" and "opportunistic" categories that have been prioritized in the oncology space. We also share our analysis of the importance of these services to patients and the ability of pharmaceutical companies to differentiate their offerings—and, ultimately, improve patient outcomes.

**ACTIVATE**

Offerings in the "activate" category focus on up-front engagement to offer patients the education and resources they need to become an advocate for their own care. While there are few opportunities to differentiate in this category, all of the services here are at least moderately important to patients.

Patient activation in oncology is distinct from other treatment areas because, oftentimes, the urgency to initiate treatment is far greater and the nature of the disease is very complex. In some disease areas, like acute myeloid leukemia, physicians encourage patients to begin treatment as soon as they receive their diagnosis, and many patients will be admitted to the hospital for induction.
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chemotherapy that same day. This urgency limits the ability of patients and caregivers to self-educate. Moreover, there’s an understandable state of shock that many patients experience when they hear the word “cancer.” Any education or activation that’s attempted at diagnosis often isn’t fully digested or understood. Services and offerings should carefully consider these unique aspects to properly meet oncology patients’ needs.

While disease awareness education is moderately important to patients, there usually are resources already available to them from their healthcare providers and advocacy organizations. It’s often hard for pharmaceutical manufacturers to create differentiated resources that get used.

There are a couple of strategies that teams have used to create resources that truly stand out. First, work alongside healthcare providers to co-create materials that they are comfortable with and approve of. For example, nurses value being able to share materials, particularly unbranded materials, to help educate patients, and they’re often already using simple analogies and pictures to describe complex topics to their patients. They’re a great resource for co-creating differentiated offerings.

Second, it’s important to pay attention to the patient’s native environment and existing habits. For example, oncology patients often report using three-ring binders to keep information organized, so some teams are hole-punching their materials so that patients can add them to the system that they’re already using to organize their health-related information.

An offering that we classify as “opportunistic” is diagnostic testing education. For tumors such as breast cancer and lung cancer, diagnostic education is important as testing dictates therapeutic options. Diagnostic testing often occurs before a patient is treated with a manufacturer product, which can make targeting certain patients a challenge with little incentive for the manufacturer. However, the burden of educating patients may pay off for products used in later lines of treatment. As patients progress, this additional education may prompt them to be more active players in treatment decisions.

Developing partnerships with advocacy groups is an offering that’s a true differentiator. Advocacy organizations are often seen as the provider of highly valued support services such as counseling, emotional support, transportation and lodging. To differentiate, pharma can partner with advocacy groups to fund these important initiatives and potentially co-brand and co-promote resources. A true advocacy partnership requires an ongoing relationship to foster trust between parties and identify areas where goals and incentives are aligned.

GET

“GET” includes any services related to access and reimbursement, which help patients to acquire and pay for their medication. Overall, this is the category where most oncology manufacturers have robust programs, and all services in this category are considered table stakes.
Access and reimbursement services in oncology are distinct from other treatment areas because the cost of therapy is often overwhelming and continues to increase. Studies have shown that cancer patients are at a higher risk of financial hardship than patients in other disease areas. Additional research in the Journal of Clinical Oncology indicates that cancer patients with financial distress have a higher risk of mortality, and patients with higher co-pays have lower adherence. Furthermore, the reimbursement environment is getting more confusing for patients due to the differences in coverage between medical and pharmacy benefits, which often impact patients on IV vs. oral therapies differently. Thus, services related to helping patients understand and plan for their costs are critical.

“Table stakes” offerings include co-pay cards and patient assistance programs, and they’re the most important services for patients due to the help that they provide to minimize out-of-pocket costs.

Companies with higher ratings for their financial assistance programs are often rated highly not only due to the generosity of their programs but also on how clear the eligibility criteria are and how easy it is to complete the application.

On top of the stress of a cancer diagnosis, patients frequently are overwhelmed by the prospect of understanding their insurance coverage. Oftentimes, the burden of benefits verification doesn’t fall on the patient and is a task that the practice or hospital must manage above and beyond patient care. Benefits verification services designed to help providers manage this process are a “table stakes” offering that go a long way to improve both patient and provider experience.

START

Once a treatment decision has been made, there are several supportive services and resources that teams use to onboard and educate them. The complex nature of oncology treatments and multiple successive lines of different therapies and dosing combinations can make it difficult to educate patients in a manner that they can understand. Further, any product education that occurs at diagnosis is usually difficult for the patient to fully digest due to shock. However, understanding both the benefits of the treatment and the associated side effects is critical to ensuring adherence to therapy.

One “table stakes” offering includes product administration support, which is key to ensuring patient adherence and compliance. High-touch nursing support that allows for patients to connect with a nurse resource to ask product-specific questions is both moderately important and widely offered by manufacturers today.

Another is product education. Although patients are becoming more actively involved in researching their disease and treatment options, doctors and nurses by and large continue to be the main source of information for patients.

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Shared decision-making tools—a “me too” offering—are provided by almost all manufacturers today and can encourage patients to prepare for their visits and facilitate a two-way conversation. The National Comprehensive Cancer Network and other stakeholders, like advocacy groups, also are focusing on this need and have a greater degree of flexibility than manufacturers to integrate what patients truly value. Thus, manufacturers should consider the trade-offs in independently developing their own branded resources, which tend to be cumbersome due to inclusion of fair balance, rather than partnering with external organizations to develop unbranded tools that address issues that patients value.

Finally, video education materials are an “opportunistic” offering. Oftentimes, video education is viewed as less important today, perhaps due to the low availability and assumed high production costs. However, video is particularly useful for helping patients understand complex information, and in oncology, the information definitely meets that bar. For example, imagine the power of using video to explain therapies with complex administration requirements to help caregivers understand what their loved ones will face during treatment.

**STAY**

There are many services that are commonly used to drive adherence to therapy. This is the area where we see the greatest opportunity for differentiation today. Companies are very good at getting patients on the product and getting the product reimbursed, but after that point, they often have a limited suite of support resources and services available to help patients manage side effects, remember to take their medication when they aren’t feeling well, and manage a life with cancer.

A “table stakes” offering in this category is a nurse support hotline. Patients often have questions that pop up outside of business hours. Nurse support hotlines give patients the comfort of knowing that someone is available for questions around the clock. Companies are differentiating themselves by going out of their way to create digital profiles of the nurses at the other end of the phone so that patients have a true understanding of the other human being they are interacting with. In addition, we see scripting vs. non-scripting as a big differentiator in the space. If the nurse is limited to responding to product-label-specific questions and can’t talk in a conversational manner, this service becomes far less valuable.

Many pharmaceutical companies are making significant investments in digital and connected health to explore opportunities to gather real-time adherence information from patients and encourage their tracking behavior. Passive monitoring through biosensors and wearable devices also has been piloted across the clinical trials space within oncology. While these services aren’t widely requested from patients, they are viewed as extremely important from the provider’s perspective. Investing in these resources is considered opportunistic based on its importance to the patient, but they’re an interesting option to consider to improve HCP perceptions and experience with a brand.
There also are side-effect-monitoring and disease-tracking tools that can help patients feel in control of their disease, which we consider to be “differentiator” because they aren’t widely available today. In liver disease, for example, we see that patients enjoy tracking their “levels,” and this activity helps to keep them feeling in control of their disease. Generating these tools for patients to take an active role in their care through setting goals and actively tracking progress can play a significant role in promoting adherence and fostering a strong relationship with healthcare resources over time.

Appointment and prescription reminders also are “differentiator” offerings. Patients often miss a day or two of treatment when their prescription runs out as they forget to request a refill at the proper time. Reminder services via outbound calling or texting, an app or printed materials can help ensure the continuity of treatment. It’s important to consider the needs of each patient population as these tools are designed. For example, a low-cost resource that a patient can print out and put on the refrigerator may be just what a less tech-savvy audience requires.

Lastly, there’s travel funding, transportation and lodging, which are some of the most frequently mentioned services of value for patients undergoing intensive therapy. Services geared toward mitigating these challenges and costs aren’t commonly offered by manufacturers due to the compliance challenges of offering something valuable to patients and their families. Manufacturers should work with compliance to understand how they can provide these much-needed services.

An “opportunistic” offering is lifestyle coaching. Offering exercise and nutrition coaching can show patients and healthcare providers that manufacturers are committed to the whole patient even beyond drug treatment. These services often aren’t prioritized by brand teams.

Differentiators include resources for caregivers. Until recently, caregivers often were overlooked by manufacturers when thinking about the needs of their customers. However, for many cancers, the caregiver may be the main decision-maker or person responsible for dealing with insurance, transportation logistics, etc. Caregiver-specific education materials and support should be considered, especially in disease areas requiring intensive therapy or in pediatric cancers.

Another is peer-to-peer support. The availability of peer-to-peer support today often depends on the type of cancer. For example, for breast cancer there is a large, active and vocal network of supporters for the disease. In smaller disease areas, ones with a higher mortality rate, or those that carry a stigma (such as lung cancer),
the availability of programs to connect patients are scarce. While many manufacturers today have videos and real patient testimonials on their websites, the act of connecting a patient to actual support communities and one-on-one matching with a peer are often stated as an unmet need.

Finally, an important differentiator is emotional and navigational support. New Medicare initiatives that seek to improve patient care, like the oncology care model, contain measures around care coordination and emotional support services. Social workers, including oncology nurse navigators, can help patients communicate with their employers, work out housing arrangements and organize transportation logistics. Manufacturers that do facilitate access to counselling and nurse navigation often do just that: facilitate. It’s a service that’s most often referred out due to inherent trust issues and an inability to handle, securely store and manage private health information, allowing the manufacturer little insight into the operations and outcomes. A cancer diagnosis can cause intense strain on a person and a family, and improvement in health hinges on both physical and mental therapy, so insight into this side of the treatment journey can be a real differentiator for manufacturers.

The Opportunity for Evolution

There are many opportunities for manufacturers to differentiate their offerings for oncology patients, particularly when it comes to helping patients successfully start and adhere to therapy. As the market becomes more crowded with similar products launching within the same disease areas, providing best-in-class services and differentiated offerings that impact the patient experience will become a key driver of treatment selection. Companies should carefully curate and design their services based on the patient need in order to stand out in the market. We’ve distilled the insights across our work in this space, and a number of important themes stand out for how clients might think to apply this information to improve their programs.

1. It’s critical that teams look to advocacy organizations as long-term partners in oncology care. Not only do they have intimate knowledge and experience with patients, but also they often have valuable resources and tools already created that can and should be leveraged to satisfy patient education needs. Identifying common research goals across organizations can go a long way toward facilitating fruitful and genuine partnerships.

2. Given the critical importance of financial resources in this space, it’s crucial for teams to do everything they can to understand the patient experience with access and reimbursement service offerings. Leading teams have mapped the access journey to identify actionable leverage points. They’re also partnering with specialty pharmacy stakeholders to co-create service offerings, integrating their offerings into electronic medical records systems to reduce provider burden, and leveraging call center recordings to create patient-friendly responses that reduce the complexity of medical information for patients.
3. We expect to see a proliferation of service offerings becoming the mainstay as teams explore the patient’s entire experience with the healthcare ecosystem. Some of the home infusion offerings being piloted in the European Union today will eventually make their way to the United States, and teams will consider how to leverage partnerships with hospital systems to deliver support, like ride share service offerings and dedicated spaces where patients can meet to learn from each other.

4. As we look to the future, we realize that digital and connected health solutions will become the norm within oncology care. We will reach a point where apps will no longer be the dominant mechanism for data capture. Instead, data on side effects, symptoms, and health and wellness will be passively captured from patients through biosensors, wearables and digital assistants. This will result in a host of data that can be used to predict patterns for successful outcomes based on engagement with services, and will enable oncologists and nurses to proactively intervene as they notice patients have shifted off course. While this sounds futuristic today, we’re not far off from predictability and prescriptive decision-making, so teams should be preparing themselves for what that reality looks like.

As we’ve acknowledged, there’s no one-size-fits-all approach or magic bullet to success. Organizations must customize their offerings based on unique therapeutic and market factors. While this paper represents a summary of where patient services sit today, oncology is a rapidly evolving space, and a similar evolution of program offerings will be critical if the industry wishes to meet the minimum bar for how patients expect to be supported along their journey today. Is your organization poised to keep up?
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