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Value-Based Access Programs An alternative funding for MedTech?

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MedTech Europe from diagnosis to cure

Local presence drives results

- Network of 36 local associates across 28 different countries
 - Europe (Western) and Eastern)
 - United States
 - South America
 - Middle East
 - South Africa
- More than 100 projects completed in all regions
- Each ValueConnected associate has previous commercial experience and market access knowledge to quantify and demonstrate value to clinical and economic stakeholders





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Value-Based Access Programs
Methodology



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Create methodology to classify the existing Value-Based Access Programs across Europe



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Scope of Assessment

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Only agreements considering both costs* and outcomes

Available mechanisms for payers to reward the value of innovation

Pocus on initial market access for medical technologies

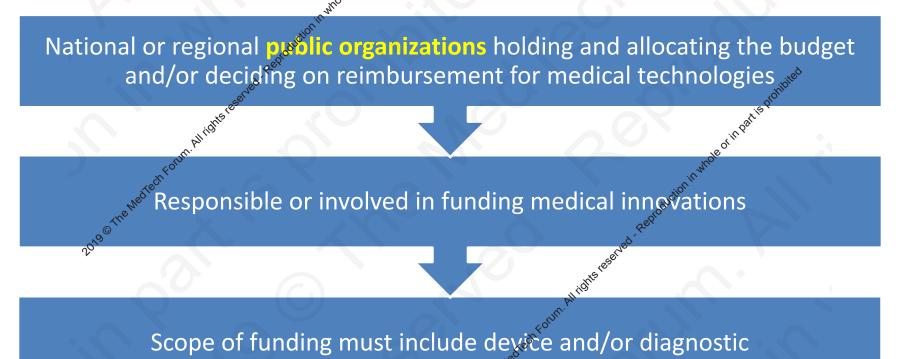
Legal framework established at the national level

*Costs related to treatment/diagnostic process, and not only price of medical technology





Definition of Payers





Methodology



Scope

• 23 countries across Europe

- MedTech E&P **Working Group**
- 29 interviews with payers

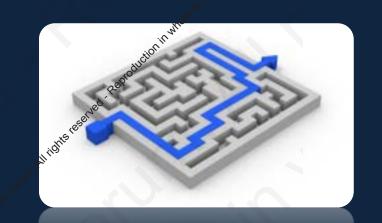
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• 793 anticles assessed





Value-Based Access Programs Results







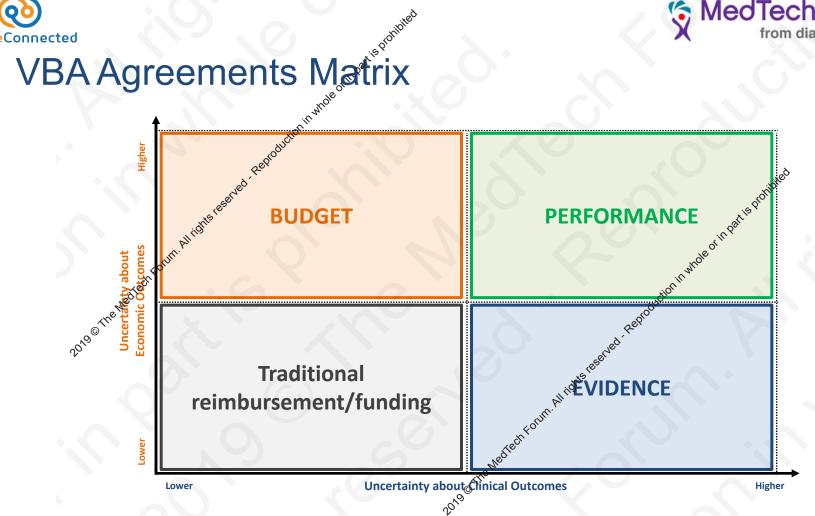
Addressing key uncertainties from Payers



Clinical outcomes Can we obtain the same clinical outcomes in our setting as in the studies? Can we confirm the efficacy of the medical technology?



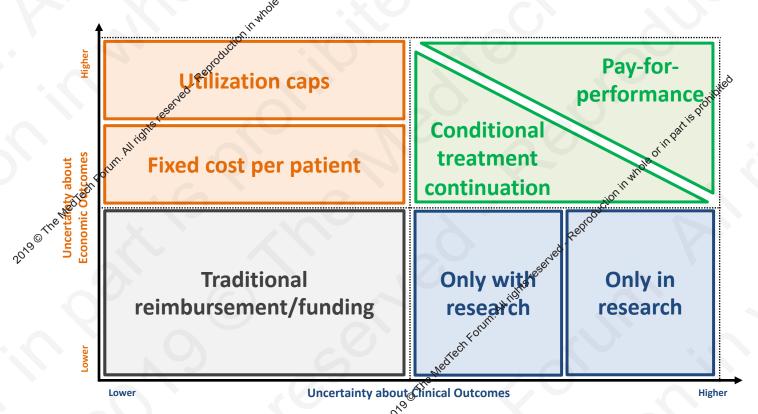








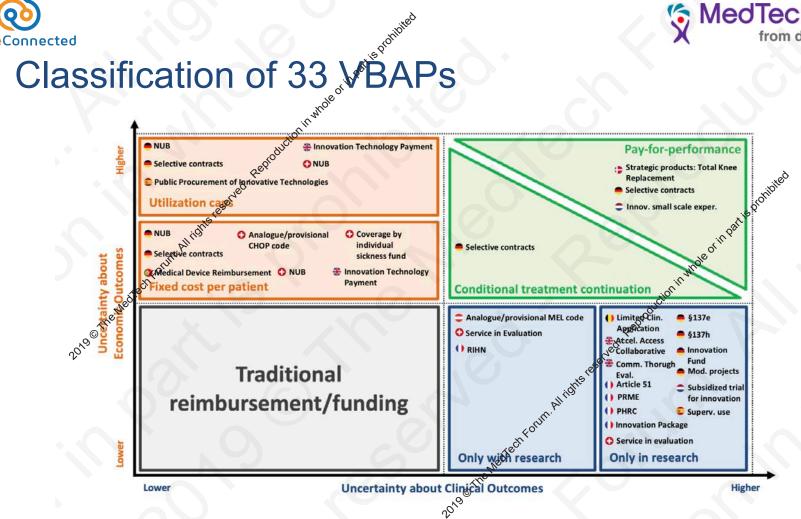
VBA Agreements Matrix









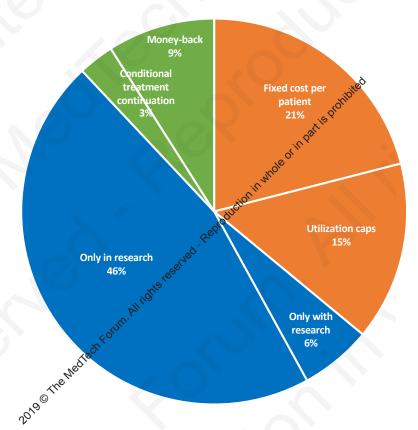






Where are the strongerst uncertainties?

- 52%: Mainly Clinical Outcomes
- 36%; Mainly Economic
- 12%: Both Clinical and **Economic Outcomes**





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Value-Based Access Programs
Case study: Digital Health Services



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The offering







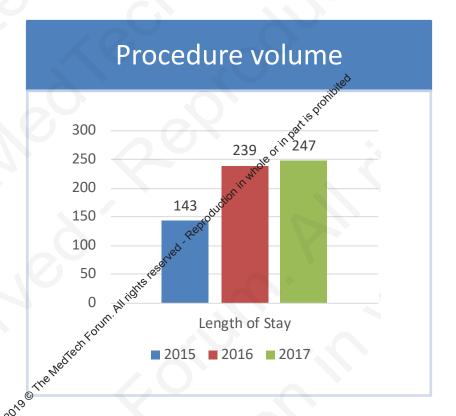


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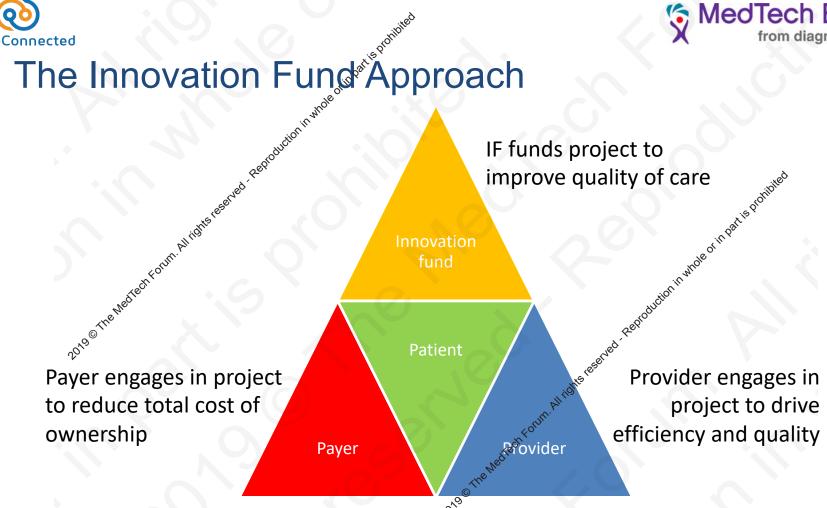
The outcomes







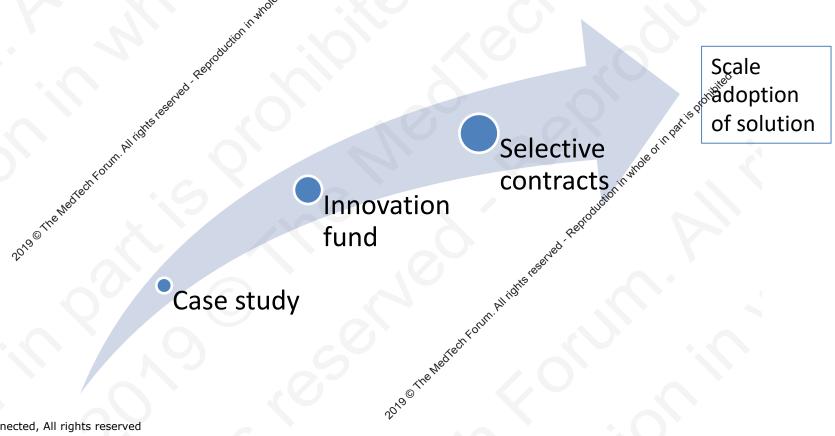






MedTech Europe from diagnosis to cure

Scaling Potential



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Value-Based Access Programs
Conclusion



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Summary



Taxonomy project magped 33 VBA agreements mapped into 6 different categories

Payers are increasingly perceiving the benefits of accelerating introduction of medical technologies that provide value

VBA agreements are primarily driven by the key uncertainties they aim to address for local payers

Lack of clinical evidence is the #1 concern of Payers when they assess innovative medical technologies



Key take-away



The problem is not spending but waste, which is only addressed by demonstrating Value











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