

Pricing and Reimbursement in Neurology - Payer views

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Abstracts

When first line treatments for neurological diseases such as Parkinson's Disease (PD) and Multiple Sclerosis (MS) have been around for years, it's understandable that when something new is approved, people want to try it. So, just how serious a stumbling block is the price gap between old and new proving to be for payers in the US and EU? Are pharma's pricing justifications believed and accepted? And what are payer's saying about the perceived change of tack from Roche regarding the pricing strategy for new arrival, Ocrevus?

The latest views and thinking from payers at the forefront of the pricing debate are shared in Pricing and Reimbursement in Neurology. Move beyond the general comments about cost and find out exactly what payers on both sides of the Atlantic think about the options available for PD, MS, epilepsy and amyotrophic lateral sclerosis (ALS) and other neurological diseases.

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Key themes covered in the report

What you will learn from the report

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Research objectives and methodologies employed in producing the report

Reasons to buy this report

Neurology is one area where the pricing debate rages on. The usual points on the real cost of development, the degree of improvement promised, and the volume of evidence available are all apparent. But there are key differences too.

The lack of biomarkers and the wide spectrum of symptoms mean prescribing decisions for neurology drugs can be particularly complex. Yet calls from payers for real-world data, more safety trials and head-to-head comparative data are getting louder and more urgent. And at the same time, questions continue to be asked about price parity in different countries, the risk of rising rather than falling costs and the problems associated with co-morbidity.

If some of the answers lie in proving efficacy and value to payers, exactly how can a body of evidence be built up when the cost of new drugs is unaffordable for many?

This report will enable you to:

Tap into the latest payer views on drug pricing and reimbursement for neurology drugs.

Look in detail at payer perceptions for four core neurological diseases: Parkinson's, multiple sclerosis, epilepsy and amyotrophic lateral sclerosis.

Compare the views of expert payers in the US and the EU and understand the issues that impact them most.

Discover what evidence payers want to support their neurology drug reimbursement decisions.

Read payer comments on specific drug brands: Ocrevus, Xadago, Nuplazid and Radicava.

Update your position by hearing current views from payers with a special interest in neurology.

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Nuplazid (pimavanserin)

Research Methodology and Objectives

This report explores payer attitudes to neurology drugs with a specific focus on Parkinson's Disease, multiple sclerosis, epilepsy and amyotrophic lateral sclerosis.

Analysis is based primarily on the insights and opinions of eight expert payers, including one from each of the major European markets (France, Germany, Italy, Spain and the UK) and three from the US. The interviews were conducted in December 2017. In order to share candid views, all interviewees chose to remain anonymous.

French Payer: An academic general practitioner, this expert also worked in the Transparency Committee and was the leader for HTA evaluation for neurology in France.

German Payer: General Manager in Purchasing Services at a 2,000-bed hospital who has served in various pharmacy and purchasing roles for more than 30 years.

Italian Payer: A drug budget manager for a university hospital, and pricing and reimbursement expert for a regional committee.

Spanish Payer: A hospital pharmacy director with 22 years of experience at local and regional levels, president of the local pharmacy commission and regional member.

UK Payer: A neurology specialist pharmacist who manages neurological patients, as well as managing the formulary for neurology and working with commissioners in primary care.

US Payer 1: Worked in the pharmacy benefit management industry for 18 years and is currently involved in a pricing and therapeutics committee.

US Payer 2: A drug budget manager at a PBM who worked at a pharmacy company for the past 17 years and has experience of neurological disorders, oncology, and other specialities.

US Payer 3: Pharmacy Director for a healthcare delivery system in the US and a licensed pharmacist with over 20 years of experience.

Key questions explored in this report include:

How has the pricing of recently approved drugs for amyotrophic lateral sclerosis, epilepsy, multiple sclerosis and Parkinson's Disease been received by payers?

Are prices for new drugs always too high or do they represent value money?

What factors should pharmaceutical companies consider when making pricing decisions for neurological disease drugs?

How do payers decide how much they are willing to pay for drugs that treat neurological diseases? Which factors influence their decision?

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