

Understanding and communicating costs of the overall patient treatment pathway

Validating pathway structure and providing insight to address information gaps to assist local level market access activities in neuropathic pain

The challenge

There was wide variation in pain services and care pathways across the UK which resulted in varied patient outcomes and costs. Rather than focusing on drug costs and budget impact, our client was looking to demonstrate how the costs and time incurred in managing neuropathic pain (NeP) patients could be reduced through service re-design and adherence to clinical guidelines in the UK.

Our client needed a tool to engage payers in a conversation about the impact of changing service delivery on resource use, costs, time and patient outcomes, in order to identify opportunities to improve efficiency of the local NeP pathway.

The solution

Our solution followed a three step process:

- > Analysis of real world data to define the structure of the treatment pathway.
- > Validation of the pathway structure with key opinion leaders at an advisory board, gaining insights to address any information gaps.
- > Development of an adaptable payer tool in Excel containing real world data to enable the user to compare scenarios including 'real world', their local setting, and guidelines.

Key results

The interactive payer tool modelled the time and costs of NeP management, allowing the user to gain an understanding of the potential resource impact associated with the current, local NeP pathway, change key elements of the service delivery across the NeP pathway, and compare the potential resource impact and patient outcomes between two scenarios.

The user was able to manipulate the inputs to compare a range of scenarios, for example local services, the real world data and adherence to guidelines.

Value to the client

We provided the client with an easy-to-use economic tool for use during conversations with payers and which could be adapted as required to present a range of scenarios that supported discussions relating to management of NeP patients in the local area.

The tool highlighted that the drug costs were small in the context of the overall costs associated with managing NeP patients, therefore it enabled our client to encourage service re-design and adherence to guidelines by clearly demonstrating the benefits in terms of cost and time, and linking this to improved efficiency, patient outcomes and quality of care.

Figure 1. Our interactive tool

