



Introduction

In the framework of Value-Based Healthcare VBHC, Value is defined by the outcomes that matter most to patients relative to the costs of achieving them. While clinical efficacy (PROMs) and financial sustainability are often prioritized, Patient-Reported Experience Measures (PREMs) and Net Promoter Scores (NPS) serve as essential indicators of the quality of care delivery, trust, and system engagement. In high-cost specialty care, such as dermatological immunobiologics for psoriasis and atopic dermatitis, the complexity of treatment requires more than just pharmaceutical intervention; it demands a structured care model that supports shared decision-making, accessibility, and emotional well-being. Capturing the patient's journey through Real-World Evidence allows healthcare providers to identify drivers of loyalty and satisfaction that clinical metrics alone might overlook.

Objective

To evaluate PREMs and NPS in a structured model for the provision of immunobiologic therapies in dermatology, and to assess their role as performance indicators within a value-based healthcare framework using real-world data.

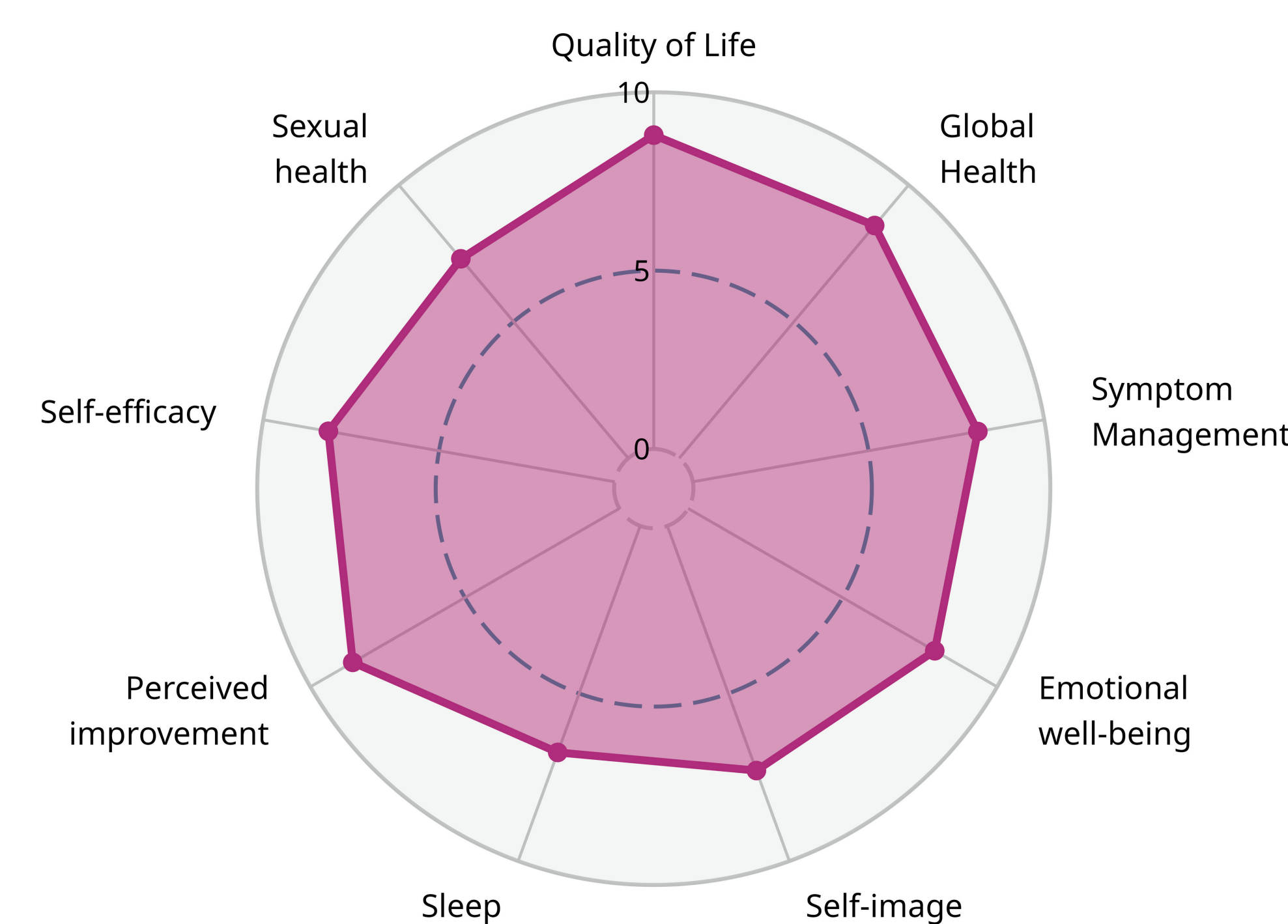
Methods

A real-world observational study included 27 patients with psoriasis or atopic dermatitis receiving immunobiologic therapies and followed between January 2024 and April 2025. Patient experience was assessed using standardized PREMs covering trust in the care team, satisfaction with guidance received, accessibility, shared decision-making, and overall satisfaction. Additional patient-reported domains included quality of life, activities of daily living, symptom control, emotional health, self-image, and sleep. NPS was calculated on a 0–10 scale.

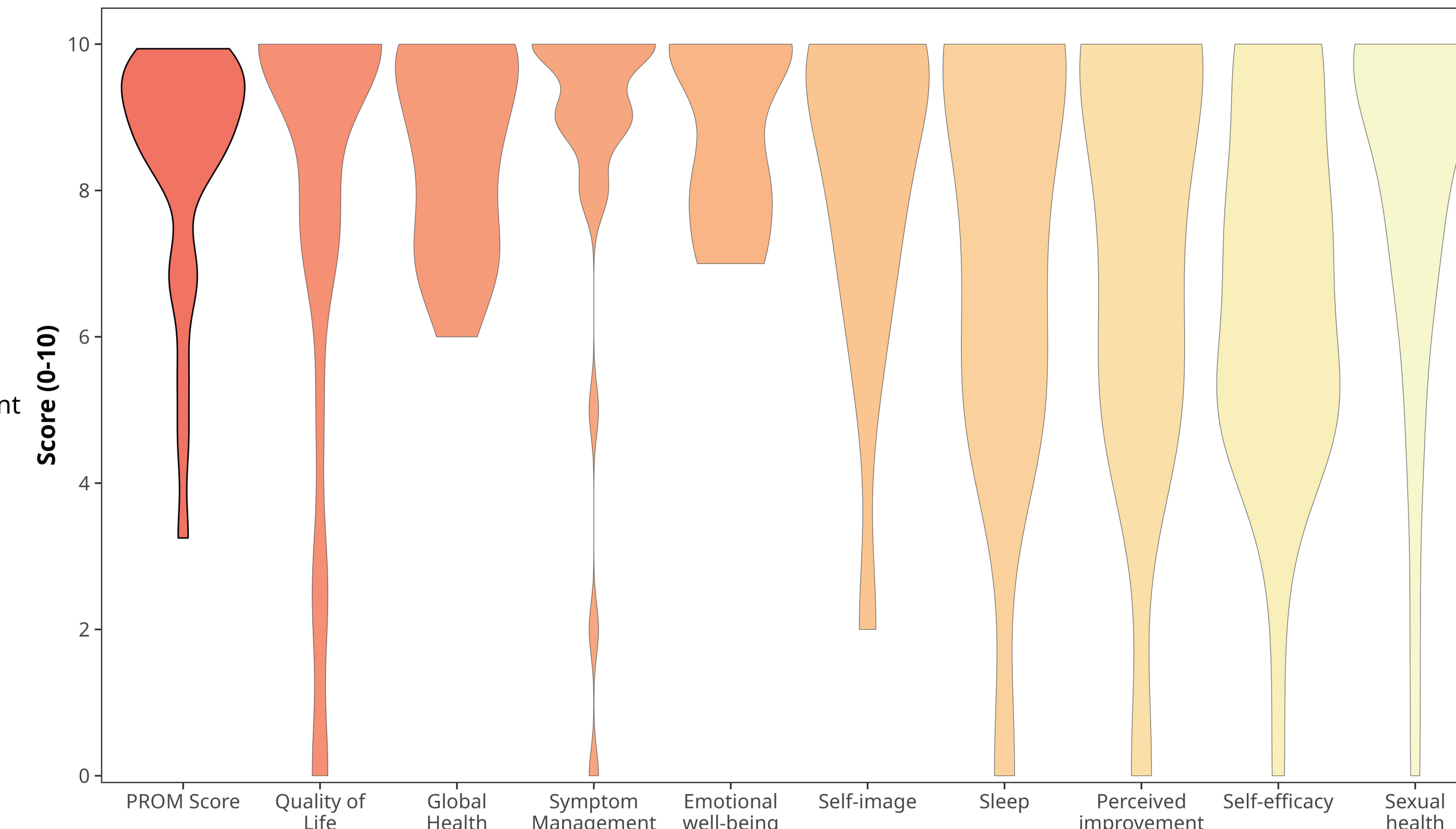
Results

Patient experience indicators showed consistently high performance. The mean NPS was 9.8. Mean scores were 9.8 for trust in the care team, 9.7 for satisfaction with guidance received, 9.7 for shared decision-making, and 9.6 for accessibility. Overall satisfaction reached 8.5. Patient-reported outcome domains were also favorable, including 8.8 for quality of life, 8.3 for activities of daily living, and 8.2 for symptom control. Lower, yet positive, scores were observed for emotional health (7.3), self-image (7.0), and sleep (5.9). Most patients reported minimal or no difficulty in daily activities and high perceived improvement after treatment initiation.

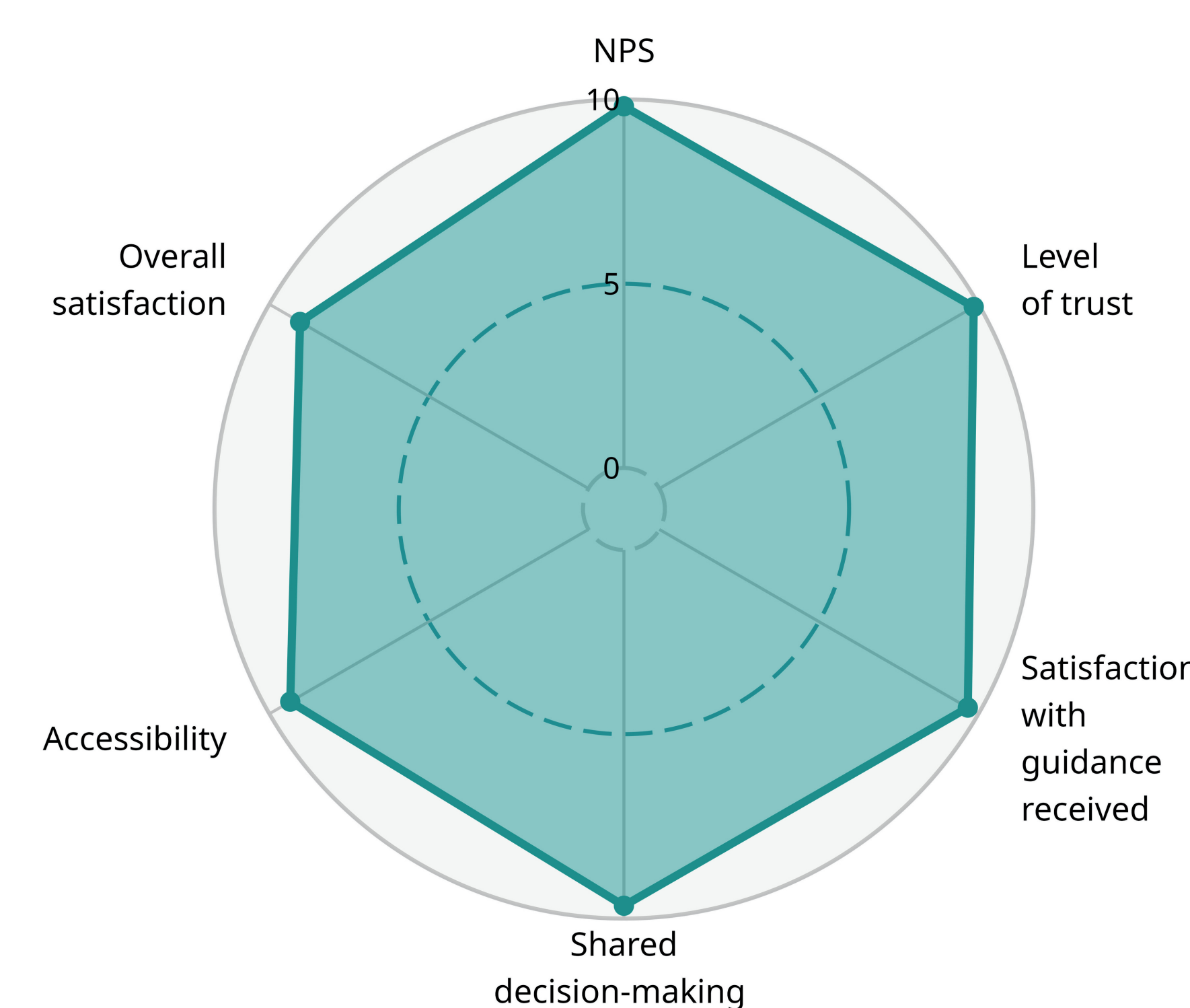
Clinical & Functional Domains



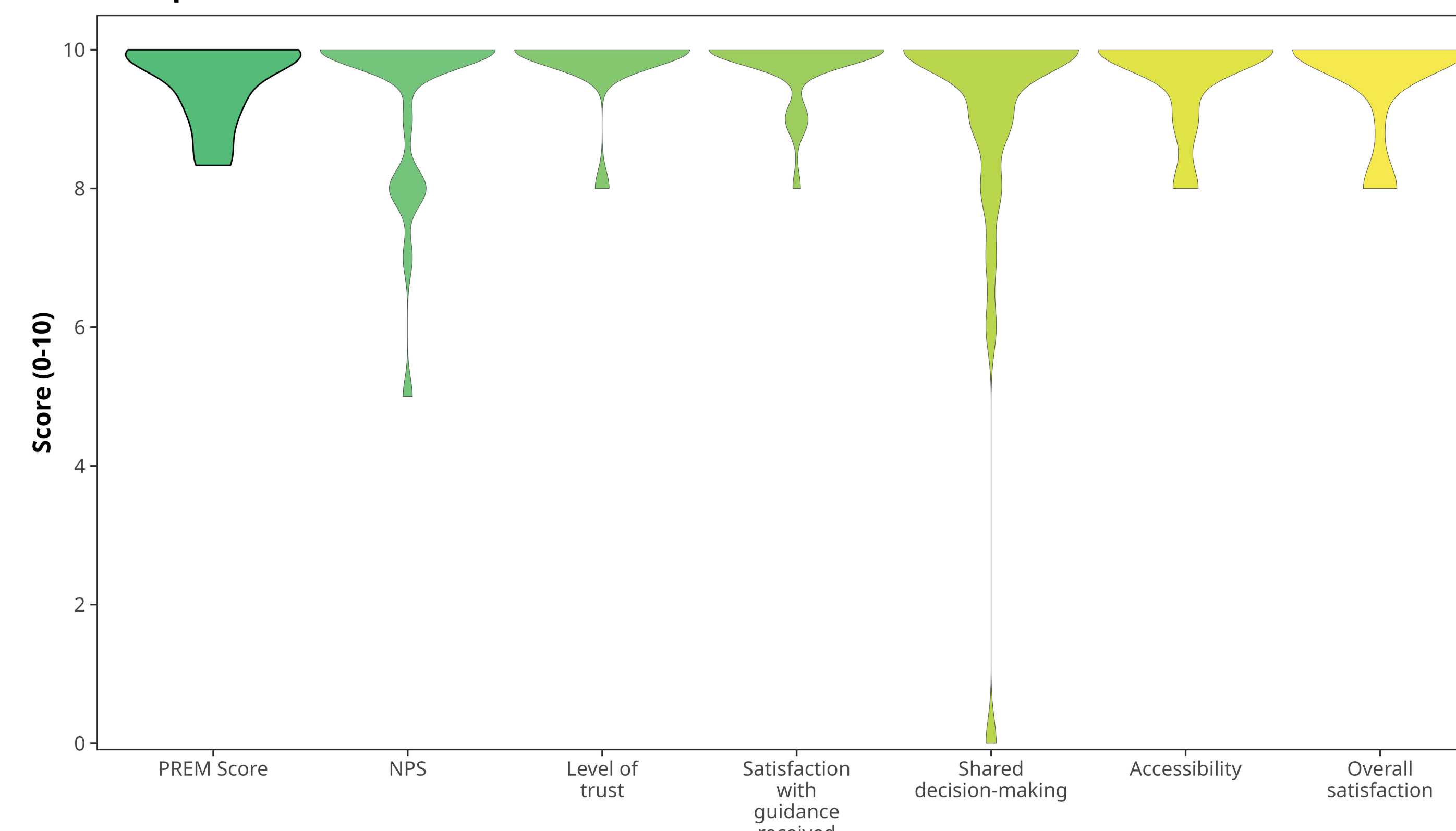
Clinical & Functional Domains Distribution



Interpersonal & Structural Domains



Interpersonal & Structural Domains Distribution



Conclusions

In this real-world setting, a structured model for dermatological immunobiologic therapies was associated with very high patient satisfaction, trust, and loyalty, reflected by an NPS close to 10 and consistently high PREMs scores. These findings indicate that care organization and delivery are key drivers of perceived value, beyond clinical outcomes alone. The routine use of PREMs and NPS may support value-based governance, benchmarking, and continuous quality improvement in high-cost specialty care.

