

Beyond HTA: A Cross-Category Analogue Framework for Pricing and Access Assessment in Out-of-Pocket Prescription Markets

SA3

S SUTHEN, WQ WONG, L HOGG · APAC Market Access & HEOR, Ipsos Singapore

BACKGROUND

Health economics and outcomes research (HEOR) frameworks are primarily designed for reimbursed healthcare systems in which payers adjudicate value through health technology assessment (HTA) processes.

However, a growing number of prescription products operate in out-of-pocket (OOP) markets where patients directly determine willingness-to-pay and access is shaped by channel structure, and provider economics.

Conventional payer-centric HEOR tools have limited applicability in this setting — where no payer, HTA gate, or cost-effectiveness threshold governs price. Market access methodologies for OOP prescription markets remain underdeveloped relative to the reimbursed setting.

OBJECTIVE

To develop and apply a cross-category analogue framework to support pricing and channel assessment for a novel, non-reimbursed prescription product across six Asia-Pacific (APAC) markets.

The framework aims to bound plausible self-pay price corridors, surface channel and leakage risks not observable through single-analogue benchmarking, and generate hypotheses to guide subsequent primary willingness-to-pay research.

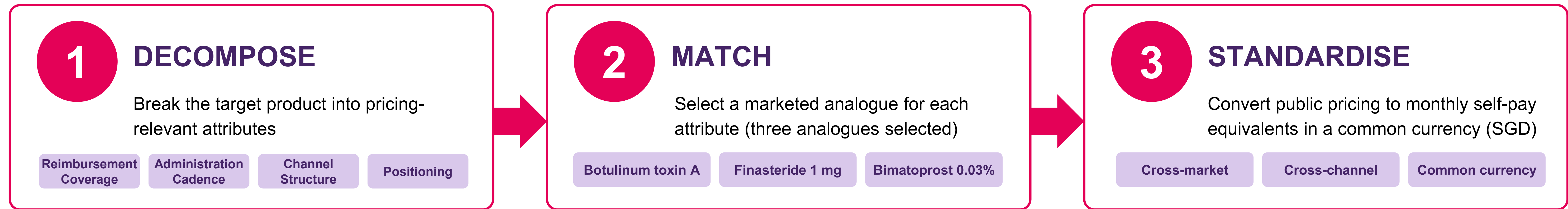
METHODS

The framework identified analogue products by decomposing the target product into pricing-relevant attributes: reimbursement status, administration cadence, channel structure, and medical vs aesthetic positioning. Three analogues were selected accordingly (see Framework Schematic).

Data across Singapore, Malaysia, Thailand, Taiwan, Philippines, and South Korea were extracted from publicly available clinic pricing, online pharmacy listings, hospital billing benchmarks, reimbursement sources, and secondary market reports between March 2026 – May 2026.

Prices were standardised to monthly self-pay equivalents in a common currency (SGD) to enable cross-market and cross-channel comparison. Generic (non-branded) names are used throughout for the target product and all analogues.

RESULTS



KEY FINDING

Procedure-based analogues showed **greater exposure to bundling and promotional erosion**; recurring-use analogues revealed **monthly affordability pressures and online leakage risk**.

THE INVERSION

Clinical credibility and healthcare-provider economics — not consumer appeal — emerged as the key determinants of channel adoption.

Six APAC markets:

SG Singapore

MY Malaysia

TH Thailand

TW Taiwan

PH Philippines

KR S. Korea

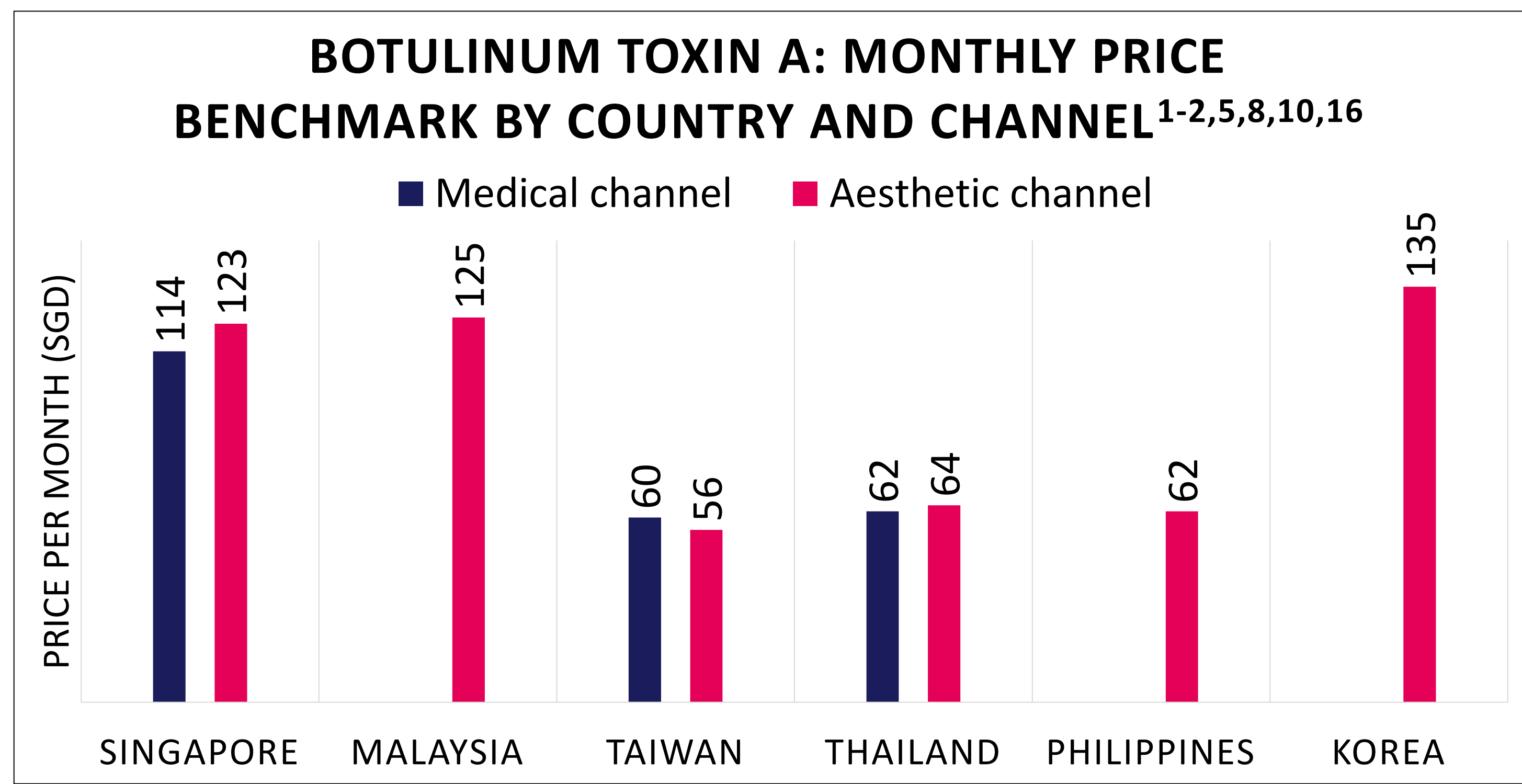


FIGURE 1. Botulinum toxin A — monthly price benchmark by country and channel (SGD)

- Aesthetic channel commands a premium over medical (aesthetic SGD 56–135; medical SGD 60–114). Singapore shows +8% aesthetic premium (SGD 123 vs 114/month); South Korea has the highest aesthetic ceiling at SGD 135. However, Taiwan and Thailand show channel convergence — aesthetic ≈ medical

TAKEAWAY:

Aesthetic settings can support premium value framing, but channel uplift varies by market and benchmark quality.

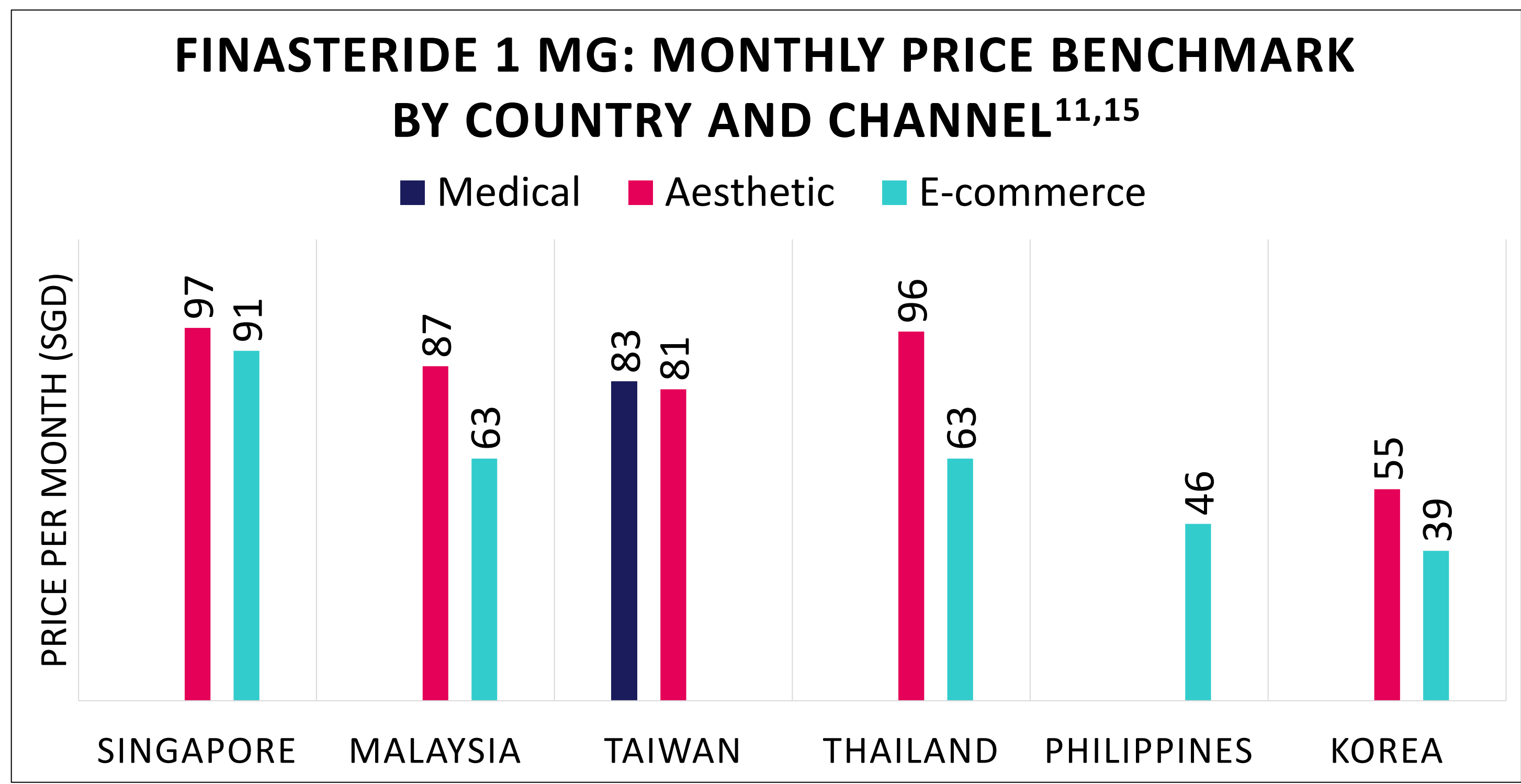


FIGURE 1. Finasteride 1 mg — monthly price benchmark by country and channel (SGD)

- Where both clinic and online prices are visible, online generally sits below clinic pricing, creating a potential price floor: (SG: 97 vs 91; MY: 87 vs 63; TH: 96 vs 63; KR: 55 vs 39), with the gap widest in Thailand and Malaysia.
- Taiwan was the exception: its medical-channel and aesthetic-clinic prices converged (SGD 83 vs. SGD 81), with no online benchmark identified.

TAKEAWAY:

This establishes online as the price floor, the channel most likely to erode perceived value and create leakage pressure

Bimatoprost 0.03%^{7,9,12}

- Discontinued or withdrawn in 4 of 6 markets (Singapore, Thailand, South Korea; no evidence in Philippines).
- In Malaysia and Taiwan the product is not actively marketed but remains available through online sourcing — including ophthalmic formulations — demonstrating that official withdrawal does not remove a product from patient view. Grey supply can anchor price expectations below intended levels before launch.

PROMOTIONAL STRATEGY

Procedure-based (Botulinum toxin A)

Mechanic

Aesthetic-clinic bundles, area-based multi-treatment packages

↑ Lowers initiation barriers

↓ Risks recasting clinical product as discretionary add-on

Recurring-use (Finasteride 1 mg)

Mechanic

Disease-education campaigns + adherence support (apps, reminders, photo tracking)

↑ Builds category demand ahead of product

↑ Supports persistence and retention

PRICE LEAKAGE: FOUR RISK ROUTES^{3-4,6-7,11,13-14}

LOW

Cross-border import

MY–SG and TH–MY land borders warrant monitoring despite customs controls

MEDIUM

Regulated e-pharmacy

Bundle and bulk discounts erode net price even when headline prices remain stable

MEDIUM

Grey/informal online supply

Official withdrawal does not remove product from patient view; pre-anchors lower price expectations

HIGHEST

Cross-channel route-shopping

Aesthetic bundles vs medical benchmarks encourage direct comparison and substitution

Active channel governance is required alongside any price-architecture decision

CONCLUSIONS

- Cross-category analogue assessment is a transferable approach for pricing and access expectations in OOP prescription markets, although its reliability depends on the availability, quality and comparability of publicly available pricing data.
- Analogues capture distinct commercial dimensions: procedure-based products highlight promotional exposure; recurring-use products highlight affordability, persistence and online transparency. No single analogue was sufficient on its own.
- Willingness-to-pay (WTP) exists across medical and aesthetic settings, but **protecting price integrity across channels is the harder commercialisation challenge**.
- This framework is intended to generate hypotheses and derisk subsequent primary research. It does not substitute direct WTP studies and its findings should be validated against primary data before being used for pricing decisions.

REFERENCES

1. Ministry of Health Singapore (n.d.). *TOSP SL722E – Bill information*; 2. Health Sciences Authority Singapore (n.d.). *Drug Registration Database – Product details*; 3. Health Sciences Authority Singapore (n.d.). *Therapeutic products*; 4. National Drug Formulary Singapore (n.d.). *Product information*; 5. National Pharmaceutical Regulatory Agency Malaysia (n.d.). *MADRAC Bulletin*; 6. National Pharmaceutical Regulatory Agency Malaysia (2021). *Senarai produk yang diluluskan dalam PBKD 363 – 9 September 2021*; 7. National Pharmaceutical Regulatory Agency Malaysia (n.d.). *Product Search*; 8. Royal Gazette Thailand (n.d.). *Royal Gazette document*; 9. Food and Drug Administration Thailand (n.d.). *Drug Search*; 10. National Health Insurance Administration Taiwan (n.d.). *National Health Insurance reimbursement and coverage information*; 11. Taipei City Government (n.d.). *Drug-related regulatory reference document*; 12. Taiwan Drug Information (n.d.). *Taiwan Drug Information*; 13. Taiwan Food and Drug Administration (n.d.). *Drug registration information*; 14. Ministry of Food and Drug Safety Korea (n.d.). *Drug search*; 15. MIMS Philippines (n.d.). *AIAC International Pharma LLC – company information*; 16. Malaysian Society of Haematology (n.d.). *Medical Procedures and Services Nomenclature (MPSN®) and Relative Values Guidelines for Medical Practitioners in Malaysia*.

For the full reference list, please refer to the Supplementary Appendix.

CONTACT INFORMATION

Sheena Suthen – APAC Market Access & HEOR, Ipsos Singapore
Sheena.Suthen@ipsos.com
www.ipsos.com/en/healthcare