

Operationalizing Oncology Affordability Programs: Development of an Implementation and Prioritization Framework

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1. BACKGROUND & OBJECTIVE

Oncology affordability programs can improve access to innovative therapies, but their impact is often constrained by **fragmented treatment pathways, variable stakeholder engagement, limited infrastructure, and heterogeneous healthcare systems** across emerging markets.

A structured approach is needed to move beyond identifying affordability barriers toward **systematically selecting, prioritizing, implementing, and measuring** interventions that can deliver sustainable patient access.

OBJECTIVE

To develop an implementation and prioritization framework to systematically identify, prioritize, operationalize, and evaluate oncology affordability interventions across diverse emerging-market healthcare systems.

2. METHODS

A structured, cross-market framework development approach was used to **identify, assess, and prioritize oncology affordability barriers and translate findings into an implementation-oriented framework**. The approach incorporated peer-reviewed literature across the **14 markets, secondary research from industry reports and policy frameworks, stakeholder discussions and interviews, and benchmarking of competitor strategies and access models** to synthesize market-level affordability and access considerations.

MARKET SCOPE

14 markets across 3 regions

ASIA-PACIFIC

India, Indonesia, Malaysia, Philippines, Thailand & Vietnam

LATIN AMERICA

Argentina, Brazil, Chile, Colombia, Mexico

MIDDLE EAST

Saudi Arabia, Türkiye, United Arab Emirates

AFFORDABILITY & ACCESS ASSESSMENT

Patient level

Financial capacity, OOP burden, affordability, treatment costs, and patient-level access barriers

System level

Coverage, reimbursement eligibility, payer budgets, funding constraints, procurement and access pathways

Affordability and access were assessed across patient-level and system/payer-level dimensions, incorporating provider and healthcare-system considerations. Assessment findings were used to inform intervention prioritization based on patient impact, operational feasibility, regulatory considerations, and financial sustainability.

6. CONCLUSIONS & IMPLICATIONS

01 Operational feasibility

Operational feasibility is a critical determinant of oncology affordability program success. Interventions must consider **implementation requirements, regulatory considerations, operational readiness, and financial sustainability** to support effective delivery across diverse healthcare systems.

3. RESULTS — IMPLEMENTATION & PRIORITIZATION FRAMEWORK

The cross-market assessment informed a structured implementation framework for translating affordability and access challenges into actionable solutions. The framework integrates market diagnosis, challenge prioritization, target-segment definition, solution selection, implementation planning, and ongoing adaptation.

IMPLEMENTATION & PRIORITIZATION FRAMEWORK

01

ASSESS MARKET CONTEXT

Classify market archetype, understand the access environment, and define the affordability imperative.

02

DIAGNOSE & PRIORITIZE CHALLENGES

Assess affordability barriers, prioritize access challenges, and identify priority products and patient needs.

03

DEFINE TARGET SEGMENTS & OBJECTIVES

Identify priority patient segments, define access objectives, and establish relevant measures of success.

04

DESIGN & IMPLEMENT SOLUTIONS

Select appropriate solutions, assess feasibility and risks, and develop structured implementation plans.

05

ADAPT & SUSTAIN

Assess program performance, adapt solutions to market needs, and sustain or expand successful approaches.

INTERVENTION PRIORITIZATION

Potential affordability interventions were prioritized based on patient impact and operational feasibility. Patient impact reflects the potential to reach priority patients, address key affordability barriers, and improve access, while operational feasibility considers the regulatory, operational, financial & implementation requirements for delivery.

PATIENT IMPACT × OPERATIONAL FEASIBILITY

PATIENT IMPACT ↑

SCALE

Prioritize for implementation and scale

PILOT

Test through a focused pilot

TACTICAL

Use selectively for specific access needs

DEPRIORITIZE

Drop or deprioritize

OPERATIONAL FEASIBILITY →

AFFORDABILITY INTERVENTION TAXONOMY

SYSTEM-LEVEL SOLUTIONS	
Financial Access Levers	Structural Pricing Approaches
Access & Delivery Support Programs	Outcomes-Based Access Models
PATIENT-LEVEL SOLUTIONS	
Direct Financial Support (Price Reduction)	Conditional / Adherence-Linked Support
Payment Flexibility	Access-Enabling Support (Non-Drug Costs)

KEY IMPLEMENTATION BARRIERS IDENTIFIED

Fragmented treatment pathways

Inconsistent provider engagement

Limited diagnostic infrastructure

Payer variability

Insufficient real-world data capabilities

4. IMPLEMENTATION & EVALUATION

Prioritized interventions were translated into structured implementation pathways, with defined actions, responsibilities, and monitoring measures. Implementation followed a continuous cycle of planning, execution, performance tracking, and adaptation to support measurable and sustainable oncology access.

IMPLEMENTATION & EVALUATION CYCLE

PRIORITIZE

Select interventions based on impact, feasibility, implementation requirements.

PLAN

Define activities, timelines, responsibilities, partners, required implementation capabilities.

IMPLEMENT

Execute interventions through governance, partnerships, and delivery mechanisms.

TRACK

Monitor treatment initiation, persistence, conversion, and financial impact.

ADAPT

Use performance findings to optimize and sustain interventions.

5. DISCUSSION

Operational feasibility is critical to translating affordability interventions into sustainable access programs. Contextual tailoring is needed to address heterogeneous patient & system-level barriers across markets. Structured prioritization supports more consistent decisions on intervention selection, implementation, and adaptation.

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