RWD91

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entire healthcare ecosystem. (n.d.). DXC Technology. https://dxc.com/us/en/insights/perspectives/paper/ how-real-world-evidence-transforms-the-entire-healthcareecosystem

external & Internal stakeholders, internal functions and regional stakeholders across the product life cycle



Evidence Generation Process lack global integrations

Time spent on entering data rather than qualitative evidence evaluation

Evidence Generation Activities lack Standard measure of **Evidence Impact**



Key Challenges in Demonstrating Tangible Patient Centric Outcomes



Best Practices in Strategy Development for patient centric evidence generation life cycle management

Collaborative development of a comprehensive framework demonstrating tangible role & utility of all the evidence generated across the life cycle and linkage with patient centric outcomes.

The framework needs to be adopted for all the evidence generated for each product across the product life cycle.

Scientific Strategy	••••• ••••• •••••• Evidence	Compliant Execution
	Return On Investment	

The investment for evidence generation management activities across life needs to be linked with patient centric objectives

The framework involves a tangible scoring for each evidence by evaluating the value and impact of evidence Additionally, weightages with respect to scientific strength of the evidence, to be applied as per NCCN³ evidence scoring guidelines (Oncology) and for RWE studies include ISPOR⁴, STROBE⁵, PCORI⁶, ENCePP⁷, GRACE⁸ and others.

Best Practices for Adoption of Digital Transformation for Global **Evidence Generation**



Tangible Outcomes Framework – Return on Investment of Evidences Across Product Life Cycle

• Development and implementation of a 360° Value Score Framework for all the evidences (Research and Discovery, Randomized Control Trial, RWE, Health Economics and Outcomes Research, Systematic Literature Review & Market Access – Value Based Contracting) generated across product life cycle • Eliminate Informal & inefficient mechanisms of grading evidences by linking scientific & commercial utility of evidence, role and contribution with context specific decision instances across the product life cycle.

• Efficient management of the evidence utility, governance and impact of evidences generated through out the product lifecycle. • Mitigate the challenge of variation of evidence impact measurement metrics across regions.



Evidence Methodology Category	Illustrative KPI	Tangible Decision-Making Impact for respective stakeholders						
		Revenue (\$)	Internal	Regulatory Agency	Reimbursement	Patient	Cost	No of references
 Pre-Clinical % contribution of PK/PD/ADME/Toxicology Outcomes to Phase 1 % of publication referencing specific evidence Cost of evidence generation 	NA	X	NA	NA	NA	NA	NA	
	 % of publication referencing specific evidence Cost of evidence generation 	XX XX	NA NA	NA NA	NA NA	NA NA	NA \$	X NA
 Clinical & Safety % clinical trial failure rates Number of clinical trial approvals % of submissions (including label expansions) where evidence is considered "substantial" evidence for positive regulatory opinion/topic closure %. of ODA/PIP* acceptance % of post marketing regulatory commitments approvals % of publication referencing specific evidence Cost of evidence generation 		XX XXY	XX XXY	XX XXY	NA XX	XX XXY	NA NA	NA NA
	 % clinical trial failure rates Number of clinical trial approvals 	XXY	ХХҮ	ХХҮ	XX	ХХҮ	NA	NA
	 % of submissions (including label expansions) where evidence is considered "substantial" evidence for positive regulatory opinion/topic closure 							
	 %. of ODA/PIP* acceptance % of past marketing regulatory commitments approvals 	XX XX	XX XX	XX XX	XX XX	XX	NA NA	NA
	 % of publication referencing specific evidence 	XX	NA	NA	NA	NA	NA	YY
	xx	NA	NA	NA	NA	\$	NA	
HTA (RWE &, HEOR)• % of HTA submissions with positive outcome • % of HTA submissions where RWE is considered substantial part for positive HTA decision • % of HTA submissions where clinical evidence is considered substantial part for positive HTA decision • Time to access decision - faster • % instances to support positive outcome of substantial part of price negotiations • % of improved pricing/premium pricing decisions with positive outcome • % of formulary inclusions with positive outcome • % of publication referencing specific evidence • Cost of evidence generation	XX	X	NA	XX	XX	NA	NA	
	 % of HTA submissions with positive outcome % of HTA submissions where RWE is considered substantial part for positive HTA decision 	XX	X	NA	XX	XX	NA	NA
	 % of HTA submissions where clinical evidence is considered substantial part for positive HTA decision 	XX	XX	NA	XX	XX	NA	NA
	 Time to access decision - faster % instances to support positive outcome of substantial part of price possitions 	XX XX	XX XX	XX XX	XX XX	XX XX	NA NA	NA NA
	 % managed entry agreements/value-based contracts with positive outcomes 	хх	хх	хх	хх	хх	NA	NA
	 % of improved pricing/premium pricing decisions with positive outcome % of formulary inclusions with positive outcome 	хх	ХХ	хх	хх	хх	NA	NA
	 % of publication referencing specific evidence Cost of evidence generation 	XX NA	XX NA	XX NA	XX NA	XX NA	NA NA	NA X
		XX	NA	NA	NA	NA	\$	NA
• % clinical trial failure rates • \$ clinical trial approvals • • • • • • • • • • • • • • • • • • •	% clinical trial failure rates	XX XXY	XX XXY	XX XXY	NA	XX XXY	NA NA	NA
	 \$ clinical trial approvals % of submissions (including label expansions) where evidence is considered "substantial" 	ХХҮ	ХХҮ	ХХҮ	NA	ХХҮ	NA	NA
along Meta Analysis	evidence for positive regulatory opinion/topic closure							
or Network Meta Analysis (as a supportive evidence)• %. of ODA/PIP acceptance • % of post marketing regulatory commitments approvals • % of publication referencing specific evidence • Cost of evidence generation	XX	XX	XX	NA	XX	NA	NA	
	NA	NA	NA	NA NA	NA	NA	X	
	Cost of evidence generation	ХХ	NA	NA	NA	NA	\$	X NA



