Better Late Than Never? Payer Appetite and Vision for a National Value Assessment Body

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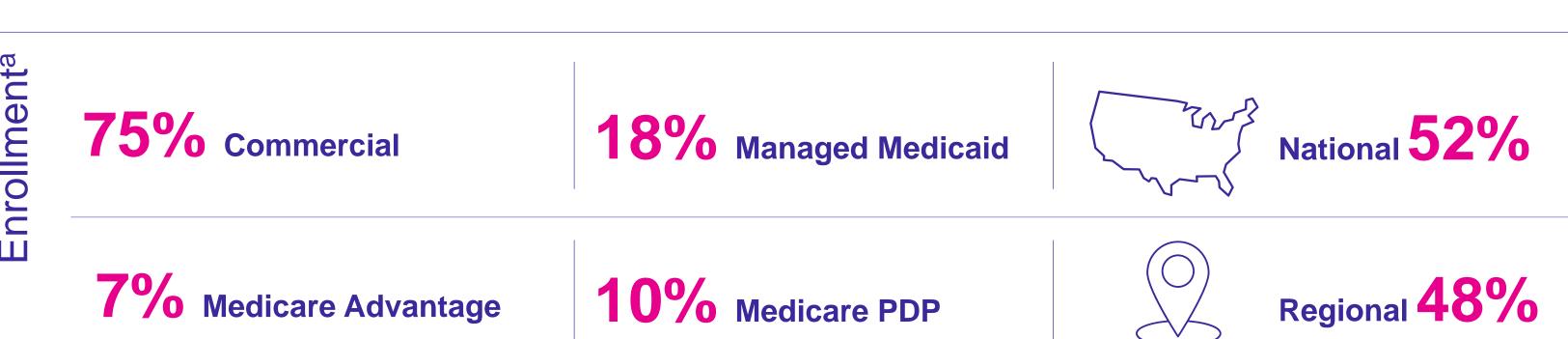
Background & Objective

- The United States (US) has a decentralized healthcare system with a mix of public and private entities assessing the value of healthcare interventions for coverage and reimbursement decisions.
- Some healthcare stakeholders and experts have proposed the creation of a US national value assessment body.
- Our objective was to understand payer perspectives on a national value assessment body and its ideal role in value assessment.

Methods

- Double-blinded, web-based surveys were fielded through Cencora's research panel, the Managed Care Network (MCN), in July 2023.
- MCN is a proprietary research panel of over 160 healthcare executives, medical and pharmacy directors, and other experienced individuals in managed care, representing over 310 million covered lives in the US.
- Participation in these surveys was voluntary, and Cencora paid a modest honorarium to participants who completed the survey.
- Survey questions assessed payer perspectives on creating a national value assessment body, funding sources, and its ideal purpose, whether conducting or evaluating assessments.

Results Advisor demographics (N=48) 56% **25%** 19% **Health plans** Primary role of advisors 35% 6% 58% **Pharmacy director Medical director Contracting manager/clinical** pharmacist/trade relations

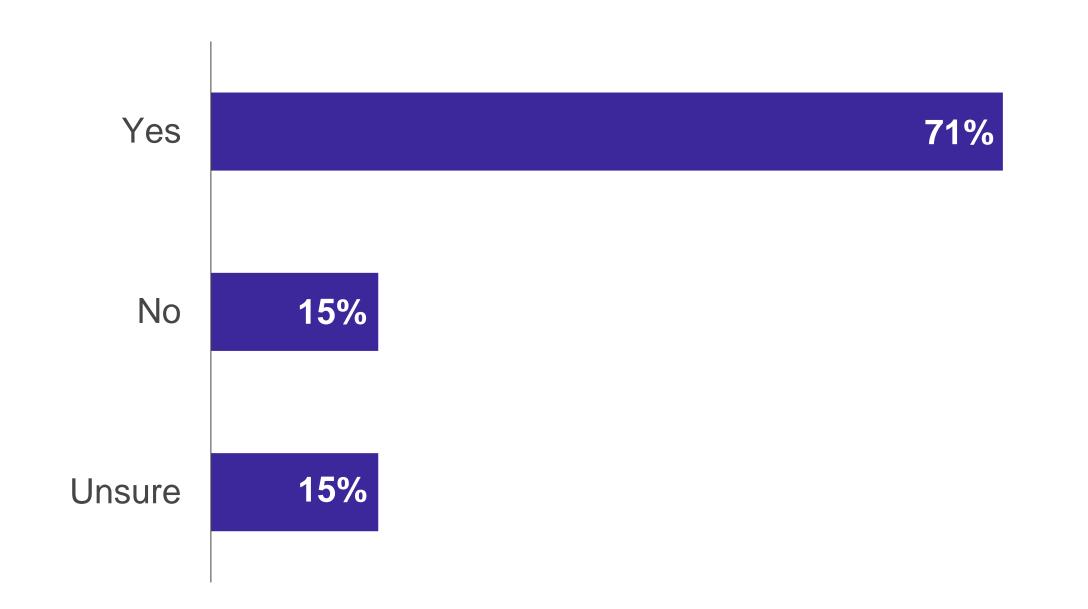


Key: IDN – integrated delivery network; PBM – pharmacy benefit manager; PDP – prescription drug plan. ^a Health plan enrollment estimate excludes duplicate health plans and PBMs

- 71% of payers thought the US should create a national value assessment body, whereas 15% said it should not, and 15% were unsure (Figure 1).
- Most payers preferred a single body (65%) over multiple bodies (10%), with 25% indicating no preference (Figure 2).
- The preferred funding source was government funding only (46%) followed by a mix of private and government funding (42%) and private funding only (6%) (Figure 3).
- In a multiple-response question, payers said the ideal purpose for a national body would be to develop value assessment standards in the US (85%), evaluate the quality of value assessments conducted by third-party organizations (69%), and conduct value assessments (63%) (Figure 4).

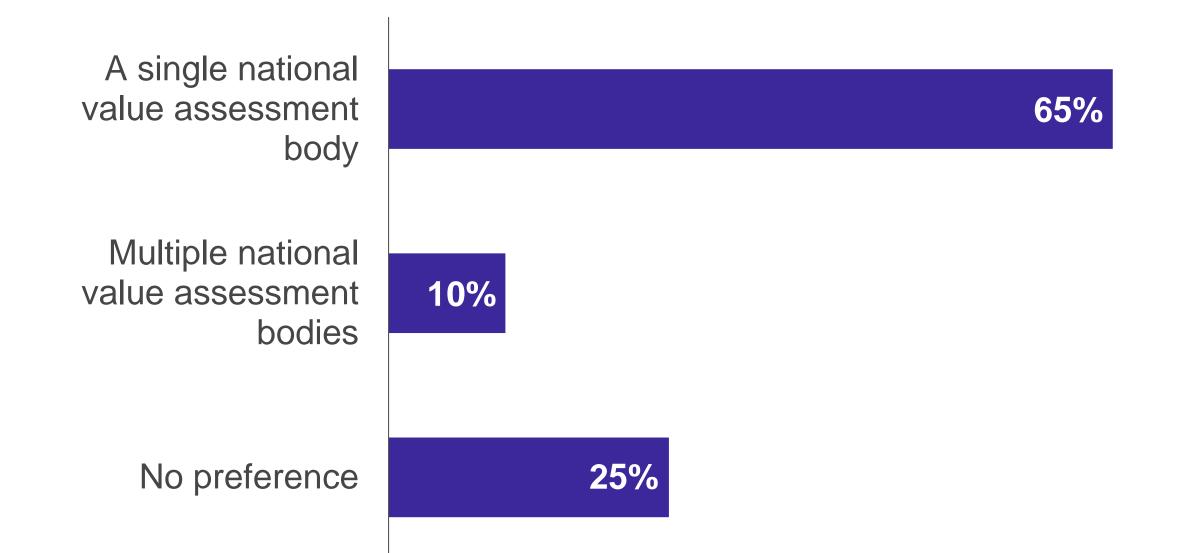
Results (cont.)

Figure 1. Payer perceptions on the creation of a national value assessment body



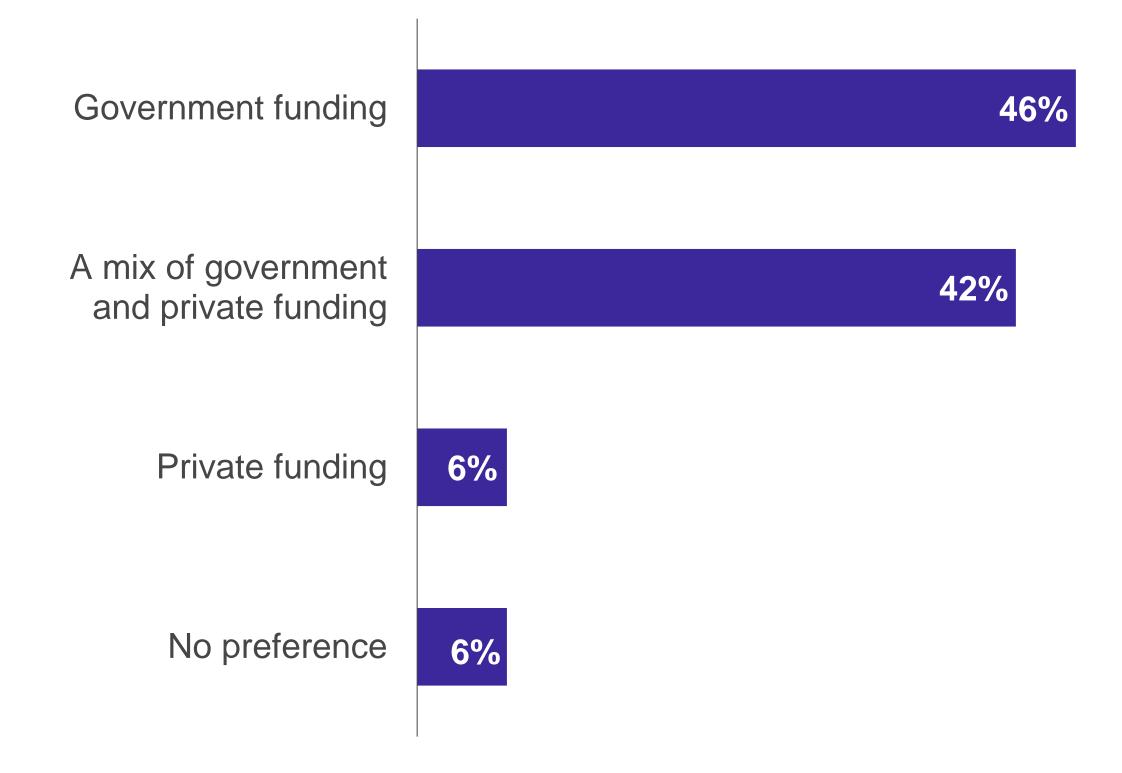
Do you think the US should create a national value assessment body? (N=48) Note: Percentages may not add up to 100% due to rounding.

Figure 2. Payer preferences for a national value assessment body



If the US were to create a national value assessment body, which would you prefer? (N=48)

Figure 3. Payer preferences on funding for a national value assessment body



If the US implemented a national value assessment body, which funding source would you prefer? (N=48)

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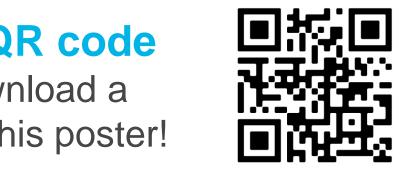
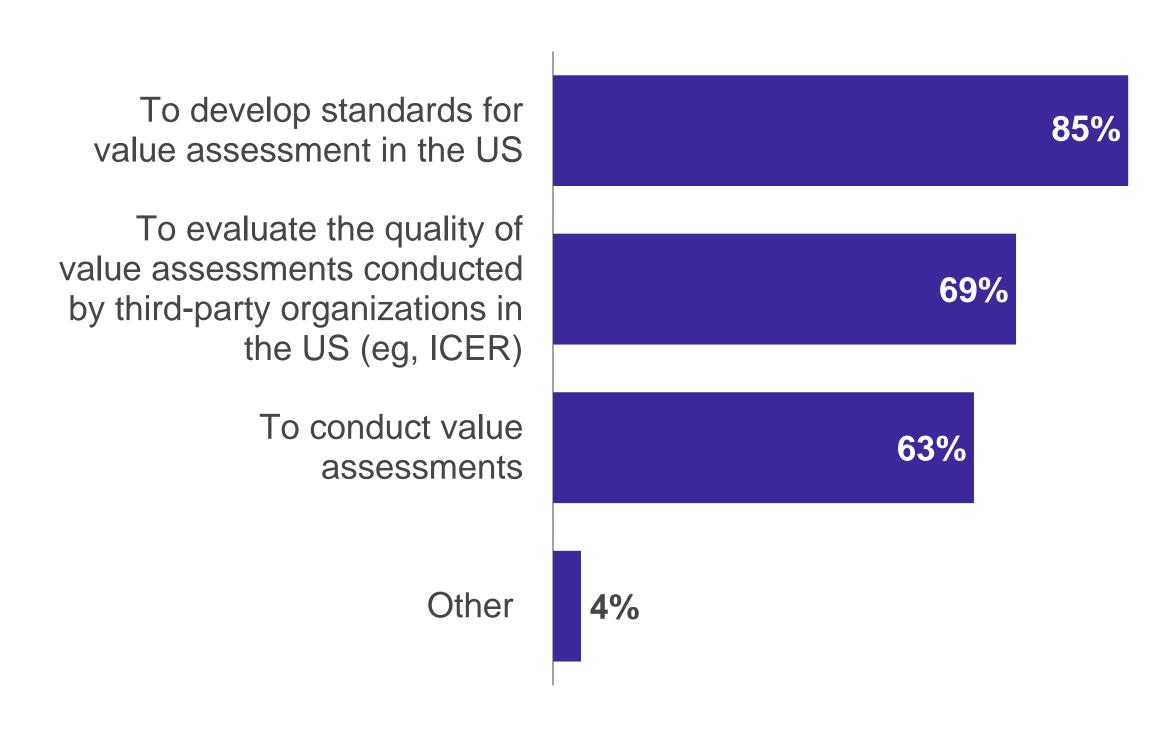


Figure 4. Payer perspectives on the ideal purpose of a US-implemented national value assessment body



Key: ICER – Institute for Clinical & Economic Review. If the US implemented a national value assessment body, what would be its ideal purpose? (N=48) Note: Other includes: "Repository of value assessments," and "This would be a complete disaster if done by the US

Limitations

- This research reflects the perspectives of managed care professionals identified from Cencora's MCN research panel. Other user types (eg, healthcare providers, patients, manufacturers) were not represented in this subset.
- Since respondents voluntarily completed the MCN survey, voluntary response bias may exist, and survey results may over-represent respondents with a stronger interest in value assessment bodies.
- Responses in this survey reflect the perspectives of a select group of payers in the US and were derived from a relatively small sample size; due to the sample size, results may not be generalizable to all payer organizations.
- Lastly, the respondent sample had greater representation from payers in health plans compared to PBMs and IDNs, which could affect generalizability of results across all payer types.

Conclusions

- Nearly three-quarters of payers in this survey agreed that the US should create a national assessment body.
- Payers were split on government-only funding vs a mix of government and private funding.
- Respondents were most interested in a national body focused on developing value assessment standards, although there was support for evaluating the quality of value assessments conducted by others and conducting value assessments.
- Future research could further explore potential funding sources and the ideal roles of a national value assessment body.

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