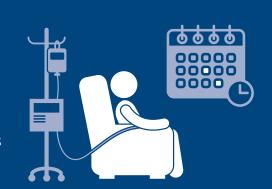
# Accelerating Access to **Innovative Cancer Therapies**

Innovative therapies continue to improve outcomes for patients with cancer.

Whilst regulatory bodies have evolved their methods, Health Technology Assessment (HTA) agencies have largely remained static in their evidence requirements. This is one of the key reasons why patients still face delays in accessing these innovative therapies.1



#### Key areas of misalignment include:1,2

- Acceptability of the clinical evidence for decision-making purposes
- An over-reliance on the availability of mature overall survival data at the time of HTA

#### Collaboration between multiple stakeholders is needed to:

Reduce inter-country variation in access to innovation to tackle disparities in cancer

outcomes between countries



Improve the time to achieving patient access to innovative cancer treatments



Janssen supports the evolution of HTA methods to address current access challenges facing innovative cancer therapies. Changes to the way that innovation is valued and how uncertainty is considered, is essential in overcoming access challenges and reaping the benefits for patients.

## Janssen's Key Recommendations

Applicability of solutions will vary depending on a country's reimbursement mechanisms and respective needs, which can be tailored accordingly.





Clinical experts with relevant experience of treating patients should form part of the HTA decision-making process



carers should be systematically included in the HTA process

Patients and



Evidence generation should be an iterative process when long-term outcomes are pending



Assessment of the clinical value of new treatments should be made independent of price



The HTA decision-making process should be predictable, timely and transparent

## 2 HTA Methodology



criteria should be more flexible for innovative cancer treatments

Value assessment



validation of surrogate endpoints need to be more flexible for innovative cancer treatments

**Estimates of relative** 

The requirements for



should be given to the value of real-world data to inform HTA decision making

**Greater emphasis** 



efficacy should be derived through high quality indirect treatment comparisons in the absence of head-to-head trials

# 3 Health Economic Evaluation



considered in economic evaluations



need improvement to better characterise the costs and benefits of treatment



thresholds are needed to recognise the value of innovation, where uncertainty exists

4 Access & Adoption



and/or biomarker testing, where available



such as outcomes-based payment models



and payers are needed to agree managed entry agreements in a timely manner Working together with all stakeholders will help us progress towards achieving our

common goal: that every patient receives the right treatment at the right time and in a sustainable way. We need to:

### achieve health targets and value-based outcomes

- Shift the focus from restricting expenditure to making long-term investments in earlier
- disease detection, prevention and delivery of effective cancer care Support a productive and profitable life sciences

Find sustainable ways to fund solutions that

industry to encourage innovation.

By ensuring people can access the treatments they need when they need them, we are helping to build a healthy population and more sustainable future, since healthy populations are directly linked to healthy economies.

#### EFPIA. The root cause of unavailability and delay to innovative medicines: Reducing the time before patients have access to innovative medicines. Available at: https://efpia.eu/media/554527/root-causes-unvailability-delay-cra-final-300620.pdf. Last accessed March 2021

- Sola-Morales OT, Volmer T, Mantovani L. Perspectives to mitigate payer uncertainty in health technology assessment of novel oncology drugs. J Mark Access Health Policy. 2019;7:1562861.