10 ways to maximise the return on your compliance programme

A practical guide by Sunita Apte and Sarah Hefford

A well devised and implemented programme should expect to increase compliance by 30 per cent. Bottom line, such a programme should cost you nothing to run for the first year and can start actively contributing to profit each year thereafter. It should also increase the perceived and actual value of your brand to patients, doctors and the NHS. Here’s how.
1. COMMUNICATE THE FULL BENEFITS OF A COMPLIANCE PROGRAMME

The most successful compliance programmes are tailored for the product. The returns of any programme can be measured in sales and in the improved perception of your brand and company in the minds of patients, healthcare professionals and providers. The more you can explain the broad benefits to your colleagues, the more likely you are to gain support for your programme.

The diagram on the right represents the main aspects of a compliance programme that influence overall returns to a company.

2. DO THE MATHS

There is a lot to be gained from a well-executed compliance programme, but it is essential to get a firm idea of what results you should expect before you start implementation. Although calculating the cost of a programme might be fairly simple, unfortunately, calculating the ROI is not entirely straightforward. As a guide to the broad principles that need to be applied, a business case outlined below.

BUSINESS CASE

Brand X reduces blood pressure

Treatment costs £20 per month, but 50 per cent of patients started on Brand X stop taking it within the first year. 36,000 patients are started on Brand X every year – averaging 3,000 new patients a month. Of the 3,000 patients who start in January, 1,500 will have stopped by July, so with perfect compliance, an additional £180,000 income could be gained that year.

Let’s assume a telephone and mailing-based programme costs £30 per patient. All of January’s 3,000 new patients are given this programme (as it’s virtually impossible to predict who will not comply). So the cost of this programme is £90,000. To cover the cost and reach the break even point within the same year, half of those patients who would have failed to comply need to.

Attrition curves with many chronic therapies show that drop off is substantially greater in the first six months. Therefore, assume that most of the patients retained by the compliance programme will continue to take their therapy long term, so the ROI at two, three, four and five-years should continue to improve. In short, the longer the programme continues the better the ROI.

In this example, an intervention that increases compliance by 50 per cent will break even in the first year. Cases vary, and ROI will change depending upon cost of the drug (the greater the cost of therapy, the greater the ROI) and, of course, the cost of the programme. Unsurprisingly, in terms of ROI, the more effective a compliance programme is, the better the financial rewards will be.

This example has looked at the first month’s patients only. More detailed modelling would be required to look at annualised ROI. However, the principles are broadly the same. The conclusion is unequivocal – compliance programmes can be exceptionally successful in terms of both clinical and fiscal outcomes.

3. AVOID FAILURE AND LEARN FROM SUCCESS

Enthusiasm and the formulation of a sound action plan are not always guarantees of success. The implementation is as key as your plan itself.

Check your own company’s track record.

What history does it have in implementing such programmes and how successful were they? How was that success measured? Speak to the people involved and learn from their experiences.

Consider asking your sales managers to find out if your target doctors are aware of any successful programmes initiated by other companies – alternatively, consider asking an independent market research company to conduct some simple telephone research to find out who is associated with successful programmes and why the programmes were considered successful.

A significant element of most programmes includes a telephone helpline, so ask yourself some hard questions before others ask you. For example:

- Are you positive that it will be manned competently?
- Are the nurses who answer the calls trained rigorously enough to ensure the right responses are given? (A nurse operating on your behalf cannot be allowed to start giving advice that may compromise a doctor/patient relationship)
- Is the information on increased compliance going to come in a form that enables it to be integrated into a sales story?

If you are using a third party company to implement your plans, make sure they give you verifiable case histories (these will most likely be anonymised for confidentiality reasons). You can also ask to speak to some of their current clients to ensure you are comfortable with the practices of the third party.

CASE HISTORY – Merck – NIASPAN

The situation

- Niaskan is a long-acting nicotinic acid (niacin) designed to raise HDL
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opportunities and could enhance the success compliance programme opens up significant will mean to them. Whilst most of your colleagues will understand that compliance is a good thing, it's important for them to understand what the programme

4. GET YOUR COLLEAGUES ON YOUR SIDE

Whilst most of your colleagues will understand that compliance is a good thing, it's important for them to understand what the programme will mean to them. Sales managers should be convinced that a compliance programme opens up significant opportunities and could enhance the success

of the brand by providing tangible ‘added value’ to the brand, further differentiating it from any competitors. Medical information and regulatory departments will need to know that their contribution and support will be vital from day

The returns

• With compliance programme support, 87 per cent of patients are still on treatment after three months
• 100 per cent of those patients say they intend to continue with treatment, creating significant incremental revenue overall
• If all patients joined the compliance programme, incremental revenue could be dramatically increased
• Both patients and HCPs participating in the programme appreciate its intent and have formed increased positive beliefs about Niaspan and Merck.

5. USE THE RULES TO YOUR ADVANTAGE

At first, the rules and regulations surrounding direct-patient communication can appear confusing and intimidating. Remember that they are there to protect the patient from adverse influence, not to stop the pharmaceutical industry from helping doctors to assist patients get the maximum benefit from their medicines. There is no substitute for familiarising yourself with these rules, but it does help to work in partnership with a company with a solid track record of implementing programmes that have been within regulatory requirements. Rules and guidelines you should adopt can include:

• Informing patients in advance about every detail of the programme, its aims and the communications channels that you propose to use
• Obtaining consent from the patient (perhaps via a healthcare professional)
• Storing all personal data in accordance with data protection legislation, with only authorised personnel having access
• Keeping the relevant medical professionals ‘in the loop’
• Only talking to patients about your brand if they are currently taking it
• Making sure you have a strict process for approval of all communications and maintain clear audit trails
• Having a system to deal with adverse event reporting
• Never interfering with or jeopardising the doctor-patient relationship (eg, discussing changes to medication)
• Never trying to sell your medication to patients.
The use of a substantial, qualified and

The use of an experienced third party organisation is the safest way to ensure no breaches of rules or codes

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Patient interventions

Dr sees patient, Rx’s Niaspan, and discusses programme

Patient receives call to check how they are getting on, manage any AE issues and what happens next on programme, offer support when patient needs it

Patient receives call covering registration, CHD, Niaspan, what to expect from treatment and programme

Patient receives audit call

Patient receives audit letter covering all of above

Patient receives closure letter

Patient receives literature on exercise

Patient receives literature on healthy eating

Patient sees patient

Patient sees doctor

Dr or patient registers by post, telephone, email etc.

We have used Niaspan extensively as part of our aggressive management of CVD [cardiovascular disease] risk factors. In the HEART programme [a locally organised HDL Elevation Approach for Reduction of Total cardiovascular risk programme] we have specifically targeted low HDL. Evidence shows that Niaspan is excellent at increasing HDL but can have side effects. We have found that using the Niaspan compliance programme 85 per cent of patients continued to take the treatment on a regular basis with clear evidence of improvement in CVD risk. Patients appreciate the extra support with the trained nurse at the end of a telephone on a helpline.”

Dr Vinod Patel BSc (Hons) MD FRCP
MRCGP DRCOG Consultant Physician, Diabetes and Endocrinology, George Eliot Hospital NHS Trust

(good) cholesterol in patients with CHD (Coronary Heart Disease)

• A common adverse event associated with niacin is flushing and as many as 88 per cent of patients in trial experience this effect.
• Although self-limiting, it is often of sufficient concern that patients who are insufficiently briefed by their HCP discontinue medication.

The plan

If patients are supported to comply with therapy, there would be significant improvements in HDL levels and so, cardiovascular risk would be lowered.

In conjunction with AXA Assistance, a comprehensive plan of education to doctors and patients was developed. The table above shows the main patient interventions conducted.

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one, but because of good planning, it shouldn’t involve onerous amounts of their time or any unpredictable situations. Financial officer ‘buy in’ to your programme is a further prerequisite of success. To achieve this, your ROI projections need to be rigorously constructed and realistically deliverable. Your CEO should be reassured that there is an innovative, profitable, patient-focused programme representing the organisation.

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The use of a substantial, qualified and
experienced third party organisation is probably the safest way to ensure that there are no inadvertent breaches of rules, codes or laws.

6. USE THE RIGHT MIX OF COMMUNICATION CHANNELS
There are many communications channels available, and some are more likely than others to incur rigorous scrutiny by regulatory authorities (see table, right).

7. HARNESS THE MEDICAL PROFESSION
With the increasing impetus behind Practice Based Commissioning, concordance and relationships with healthcare professionals will have increasing importance. They can change the way that services are delivered and can become your greatest advocates. Their active support is crucial in maximising return on a compliance programme and they’ll understand the benefits of a well-run programme to their patients. Compliance means that patients will get the full benefit from the prescribed medicine. Keep HCPs updated – they’ll appreciate it and this could form a part of any existing customer relationship management scheme you have or provide a good vehicle for consistent customer contact.

8. COLLECT ALL THE POSITIVE FEEDBACK
A simple task, but sometimes overlooked. When you get thanks from patients, doctors or colleagues, keep them together (ideally in an electronic form). Although these are, by definition, anecdotal, they can help form a very persuasive source of support for adding impetus to the programme as it rolls out.

9. BE RESOURCEFUL
There is no doubt that a compliance programme involves successfully keeping a lot of different sized and shaped balls in the air simultaneously. Running a compliance programme requires the effort levels associated with continual commitment. The other pulls and pushes on your time will probably mean that you need to be very resourceful. When you first calculate your ROI it’s well worth considering incorporating the costs of employing a third-party organisation to focus on the compliance programme on your behalf.

10. ANNOUNCE THE RESULTS
When you get results, it is one of the best times to maximise the returns of your programme. If you’ve properly harnessed healthcare professionals to the cause of compliance, keep them fully abreast of the findings. Discuss the implications, especially if there are points or governmental targets involved. Internally, this should also be a time for congratulations. Your ROI analysis should show a real improvement in compliance and your sales managers and reps should be getting positive feedback.

The results you gain may be significant enough to consider writing a paper for publication. Such a publication may itself justify a mailing or meetings campaign.

There are better ways to improve compliance.

Through us, you can talk to patients.

For further information, please call Sunita Apte on 01737 852519 or email sunita.apte@axa-assistance.co.uk

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Commonly considered communication channel

| Nurse-led call centres: | Effective, instant support by phone calls either to or from patients – no other communication has proven as convincing or reassuring as conversation with a trusted professional. Where compliance can be improved by increasing patient understanding of the need to comply, call centres can be a critical element of a compliance programme. |
| BUT: | Choose the right supplier, otherwise these can be expensive to set up and maintain, and it’s important to find suppliers who understand the rules and regulations as well as the need for a return on investment. |
| Email: | Cheap and can be particularly effective in reminding patients to take their medication as prescribed. |
| BUT: | Forgetfulness alone is unlikely to be the only reason behind non-compliance. Also, not all patients have regular or easy access to email. |
| Direct mail: | Useful, especially in support of call centres where the patient has explicitly agreed to receive mail. |
| BUT: | Some patients may have difficulties in fully understanding the written word and it is unlikely to elicit the kind of response necessary to fully understand the nature of an individual’s lack of compliance. It is probably best used in support of a telephone-based discussion. |
| CD-ROM: | Can deliver information quickly and, once the cost of generation has been amortised, inexpensively too. |
| BUT: | Not all patients have computers. More importantly, this medium provides insufficient support to act as a stand-alone programme. |
| SMS texting: | Similarly to email, it can be very useful in reminding patients to take their medication, asking for repeat prescriptions etc. |
| BUT: | Limited to 160 characters and not suitable for complex messages. |

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