

Reflective Questions

The US Payer Landscape by Keith Kelly

1. How precisely have you mapped the payer ecosystem relevant to your therapy or brand? Have you tailored strategies separately for MCOs, PBMs, Medicare, Medicare Advantage, and IDNs?
2. Given payer consolidation, are you positioned to engage effectively with these mega-payers? How would non-coverage by one major payer impact your overall patient access strategy?
3. How strong is your organization's economic and clinical evidence to support favorable formulary placement? Have you proactively aligned your evidence packages with likely P&T decision criteria?
4. How are you planning for patient affordability within your access model? What strategies (e.g. discount cards, copay support, tier placement negotiation) are in play to reduce barriers to access?
5. What opportunities or challenges does vertical integration present in your market access strategy? Are you ready to engage across the payer-PBM-provider continuum rather than just insurer-manufacturer dynamics?
6. How could you position your therapy within a broader value narrative - such as reducing hospital readmissions, improving outcomes, or lowering total medical spend - to resonate with payer incentive structures?