

Market Access Negotiation Skills

Access Accelerated is a term that refers to a global initiative that aims to improve access to non-communicable disease care and treatments in low- and middle-income countries, related terms include partnerships and collaboration, the goal of Access Accelerated is to bring together stakeholders from the pharmaceutical industry, governments, and civil society to improve access to healthcare and reduce the burden of non-communicable diseases, for example, the initiative has partnered with the World Health Organization to develop a framework for improving access to essential medicines.

Account Management is a concept that refers to the process of managing and maintaining relationships with key stakeholders, including customers, payers, and healthcare providers, related terms include key account management and stakeholder engagement, effective account management involves understanding the needs and priorities of stakeholders and developing strategies to meet those needs, for example, a pharmaceutical company may use account management to build relationships with payers and healthcare providers to improve access to their products.

Advisory Committee is a term that refers to a group of experts that provide advice and guidance on a particular issue or topic, related terms include expert panel and scientific advisory board, in the context of market access, advisory committees may be established to provide guidance on issues such as pricing, reimbursement, and access to medicines, for example, a pharmaceutical company may establish an advisory committee to provide guidance on the development of a new product.

Affordability is a concept that refers to the ability of patients to pay for healthcare services and treatments, related terms include cost and pricing, affordability is a critical issue in market access, as high prices can limit access to essential medicines and treatments, for example, a pharmaceutical company may use pricing strategies such as tiered pricing or discounts to improve affordability.

Aggregate Data is a term that refers to data that is collected and analyzed at a population level, related terms include epidemiology and public health, aggregate data is used to understand the burden of disease, the effectiveness of treatments, and the impact of policies and interventions, for example, aggregate data may be used to estimate the prevalence of a disease and the number of patients who may benefit from a new treatment.

Analytics is a concept that refers to the process of analyzing data to extract insights and inform decision-making, related terms include data and insights, analytics is a critical component of market access, as it is used to understand the market, identify opportunities and challenges, and develop strategies to improve access to medicines, for example, a pharmaceutical company may use analytics to analyze data on prescribing patterns and patient outcomes to identify opportunities to improve access to their products.

Annual Recurring Revenue is a term that refers to the revenue that a company expects to generate from a product or service on an annual basis, related terms include revenue and forecasting, annual recurring

revenue is a key metric used to evaluate the financial performance of a company and to inform investment decisions, for example, a pharmaceutical company may use annual recurring revenue to forecast the potential revenue from a new product.

Asset Optimization is a concept that refers to the process of maximizing the value of a company's assets, including its products, services, and intellectual property, related terms include portfolio management and lifecycle management, asset optimization involves identifying opportunities to improve the performance of assets and to extend their lifespan, for example, a pharmaceutical company may use asset optimization to identify opportunities to improve the formulation or delivery of a product.

Barriers to Access is a term that refers to the obstacles that prevent patients from accessing healthcare services and treatments, related terms include access and equity, barriers to access can include issues such as high prices, lack of availability, and inadequate healthcare infrastructure, for example, a pharmaceutical company may identify barriers to access as a key challenge in launching a new product.

Bundled Payment is a concept that refers to a payment model in which a single payment is made for a bundle of healthcare services, related terms include payment and reimbursement, bundled payment models are designed to incentivize healthcare providers to deliver high-quality, cost-effective care, for example, a pharmaceutical company may partner with a healthcare provider to offer a bundled payment model for a new treatment.

Capitation is a term that refers to a payment model in which a fixed payment is made per patient, regardless of the services provided, related terms include payment and reimbursement, capitation models are designed to incentivize healthcare providers to deliver preventive and cost-effective care, for example, a pharmaceutical company may partner with a healthcare provider to offer a capitation model for a chronic disease management program.

Certificate of Need is a concept that refers to a regulatory requirement that must be met before a new healthcare facility or service can be established, related terms include regulation and licensing, certificates of need are designed to ensure that new healthcare facilities and services meet certain standards and do not duplicate existing services, for example, a pharmaceutical company may need to obtain a certificate of need to establish a new manufacturing facility.

Clinical Data is a term that refers to data that is collected during clinical trials and studies, related terms include trials and research, clinical data is used to evaluate the safety and efficacy of new treatments and to inform regulatory decisions, for example, a pharmaceutical company may use clinical data to support the approval of a new product.

Commercial Strategy is a concept that refers to the plan and approach used to launch and market a new product, related terms include launch and marketing, commercial strategy involves identifying target markets, developing pricing and reimbursement strategies, and building relationships with stakeholders, for example, a pharmaceutical company may develop a commercial strategy to launch a new product in a new market.

Comparative Effectiveness Research is a term that refers to the study of the relative effectiveness of different

treatments and interventions, related terms include research and evidence, comparative effectiveness research is used to inform decision-making and to identify the most effective treatments, for example, a pharmaceutical company may conduct comparative effectiveness research to evaluate the relative effectiveness of a new treatment compared to existing treatments.

Conjoint Analysis is a concept that refers to a statistical method used to analyze the trade-offs that patients and healthcare providers make when evaluating different treatments, related terms include preferences and trade-offs, conjoint analysis is used to understand the relative importance of different attributes, such as efficacy, safety, and cost, for example, a pharmaceutical company may use conjoint analysis to understand the preferences of patients and healthcare providers when evaluating a new treatment.

Contracting is a term that refers to the process of negotiating and agreeing on the terms and conditions of a contract, related terms include negotiation and agreement, contracting is a critical component of market access, as it is used to establish relationships with payers, healthcare providers, and other stakeholders, for example, a pharmaceutical company may contract with a payer to establish a reimbursement agreement for a new product.

Cost-Benefit Analysis is a concept that refers to the evaluation of the costs and benefits of a treatment or intervention, related terms include cost and benefit, cost-benefit analysis is used to inform decision-making and to identify the most effective and efficient treatments, for example, a pharmaceutical company may conduct a cost-benefit analysis to evaluate the relative value of a new treatment.

Cost-Effectiveness Analysis is a term that refers to the evaluation of the costs and effectiveness of a treatment or intervention, related terms include cost and effectiveness, cost-effectiveness analysis is used to inform decision-making and to identify the most effective and efficient treatments, for example, a pharmaceutical company may conduct a cost-effectiveness analysis to evaluate the relative value of a new treatment.

Cost-Utility Analysis is a concept that refers to the evaluation of the costs and utility of a treatment or intervention, related terms include cost and utility, cost-utility analysis is used to inform decision-making and to identify the most effective and efficient treatments, for example, a pharmaceutical company may conduct a cost-utility analysis to evaluate the relative value of a new treatment.

Decision Analysis is a term that refers to the process of evaluating and comparing different options and scenarios, related terms include decision and analysis, decision analysis is used to inform decision-making and to identify the most effective and efficient courses of action, for example, a pharmaceutical company may use decision analysis to evaluate the relative merits of different pricing strategies.

Disease Management is a concept that refers to the process of managing and coordinating care for patients with chronic diseases, related terms include disease and management, disease management involves identifying patients at risk, developing treatment plans, and monitoring outcomes, for example, a pharmaceutical company may partner with a healthcare provider to offer a disease management program for patients with diabetes.

Dossier is a term that refers to a collection of documents and information that are submitted to regulators

to support the approval of a new product, related terms include submission and approval, the dossier typically includes data on the safety, efficacy, and quality of the product, for example, a pharmaceutical company may submit a dossier to regulators to support the approval of a new product.

Economic Evaluation is a concept that refers to the process of evaluating the economic value of a treatment or intervention, related terms include economic and evaluation, economic evaluation involves analyzing the costs and benefits of a treatment, as well as its impact on healthcare outcomes and resource utilization, for example, a pharmaceutical company may conduct an economic evaluation to evaluate the relative value of a new treatment.

Effectiveness is a term that refers to the degree to which a treatment or intervention achieves its intended outcome, related terms include outcome and result, effectiveness is a critical component of market access, as it is used to evaluate the performance of treatments and to inform decision-making, for example, a pharmaceutical company may evaluate the effectiveness of a new treatment in a clinical trial.

Efficiency is a concept that refers to the ability to achieve a desired outcome with minimal waste and excess, related terms include cost and resource, efficiency is a critical component of market access, as it is used to evaluate the performance of treatments and to inform decision-making, for example, a pharmaceutical company may evaluate the efficiency of a new treatment in a clinical trial.

Equity is a term that refers to the principle of fairness and justice in the distribution of healthcare resources, related terms include fairness and justice, equity is a critical component of market access, as it is used to evaluate the fairness and justice of healthcare policies and interventions, for example, a pharmaceutical company may evaluate the equity of a new treatment in terms of its accessibility and affordability.

Evidence-Based Medicine is a concept that refers to the use of evidence from clinical trials and studies to inform medical decision-making, related terms include evidence and medicine, evidence-based medicine involves evaluating the quality and relevance of evidence, as well as its applicability to patient care, for example, a pharmaceutical company may use evidence-based medicine to evaluate the effectiveness of a new treatment.

Formulary is a term that refers to a list of medications that are approved for use in a particular healthcare setting, related terms include list and approval, formularies are used to ensure that patients have access to safe and effective treatments, while also controlling costs and improving outcomes, for example, a pharmaceutical company may work with a healthcare provider to develop a formulary for a new product.

Generic Medicines are a concept that refers to medications that are no longer protected by patents and are available from multiple manufacturers, related terms include generic and medicines, generic medicines are often less expensive than brand-name medications, but are equally effective and safe, for example, a pharmaceutical company may develop a generic version of a brand-name medication.

Health Economics is a term that refers to the study of the economic aspects of healthcare, including the costs and benefits of treatments and interventions, related terms include health and economics, health economics involves analyzing the economic value of healthcare services and treatments, as well as their impact on healthcare outcomes and resource utilization, for example, a pharmaceutical company may use

health economics to evaluate the relative value of a new treatment.

Health Technology Assessment is a concept that refers to the evaluation of the safety, efficacy, and cost-effectiveness of a healthcare technology, related terms include health and technology, health technology assessment involves analyzing the clinical and economic evidence for a technology, as well as its potential impact on healthcare outcomes and resource utilization, for example, a pharmaceutical company may conduct a health technology assessment to evaluate the relative value of a new treatment.

Incentives are a term that refers to rewards or penalties that are used to motivate behavior, related terms include reward and penalty, incentives are used in market access to encourage healthcare providers and payers to adopt new treatments and technologies, for example, a pharmaceutical company may offer incentives to healthcare providers to prescribe a new product.

Indication is a concept that refers to the specific use or purpose of a treatment or intervention, related terms include use and purpose, indication is a critical component of market access, as it is used to evaluate the safety and efficacy of a treatment for a specific use, for example, a pharmaceutical company may evaluate the indication of a new treatment in a clinical trial.

Innovative Medicines are a term that refers to new and innovative treatments that offer significant benefits over existing treatments, related terms include innovative and medicines, innovative medicines are often protected by patents and are developed by pharmaceutical companies, for example, a pharmaceutical company may develop an innovative medicine for a new indication.

Insurance is a concept that refers to a financial arrangement in which an individual or organization pays a premium to protect against potential losses or risks, related terms include premium and coverage, insurance is used in market access to provide financial protection to patients and healthcare providers, for example, a pharmaceutical company may offer insurance to patients to protect against the cost of a new treatment.

Labeling is a term that refers to the information and instructions that are provided with a treatment or intervention, related terms include information and instructions, labeling is a critical component of market access, as it is used to inform patients and healthcare providers about the safe and effective use of a treatment, for example, a pharmaceutical company may develop labeling for a new product.

Life Cycle Management is a concept that refers to the process of managing and optimizing the performance of a product over its entire life cycle, related terms include life and cycle, life cycle management involves identifying opportunities to improve the formulation, delivery, and marketing of a product, for example, a pharmaceutical company may use life cycle management to extend the patent life of a product.

Market Access is a term that refers to the process of ensuring that patients have access to safe and effective treatments, related terms include access and treatments, market access involves navigating the complex regulatory, reimbursement, and distribution landscape to bring new treatments to market, for example, a pharmaceutical company may develop a market access strategy to launch a new product.

Market Research is a concept that refers to the process of gathering and analyzing data to understand the needs and preferences of patients and healthcare providers, related terms include research and market,

market research involves analyzing data on patient outcomes, healthcare utilization, and treatment patterns, for example, a pharmaceutical company may conduct market research to understand the needs and preferences of patients with a particular disease.

Marketing Authorization is a term that refers to the regulatory approval that is required to market a new product, related terms include approval and regulation, marketing authorization involves submitting a dossier of data and information to regulators to demonstrate the safety, efficacy, and quality of a product, for example, a pharmaceutical company may submit a marketing authorization application to regulators to launch a new product.

Medicare is a concept that refers to a government-funded health insurance program for elderly and disabled individuals, related terms include medicare and insurance, medicare is an important payer in market access, as it provides coverage to millions of patients, for example, a pharmaceutical company may develop a reimbursement strategy to secure coverage for a new product under medicare.

Negotiation is a term that refers to the process of discussing and agreeing on the terms and conditions of a contract or agreement, related terms include negotiation and agreement, negotiation is a critical component of market access, as it is used to establish relationships with payers, healthcare providers, and other stakeholders, for example, a pharmaceutical company may negotiate with a payer to establish a reimbursement agreement for a new product.

Non-Disclosure Agreement is a concept that refers to a contract that requires parties to maintain the confidentiality of sensitive information, related terms include confidentiality and agreement, non-disclosure agreements are used in market access to protect sensitive information and to facilitate collaboration and partnership, for example, a pharmaceutical company may enter into a non-disclosure agreement with a partner to collaborate on a new product.

Outcome-Based Reimbursement is a term that refers to a payment model in which reimbursement is tied to patient outcomes, related terms include outcomes and reimbursement, outcome-based reimbursement models are designed to incentivize healthcare providers to deliver high-quality, cost-effective care, for example, a pharmaceutical company may partner with a healthcare provider to offer an outcome-based reimbursement model for a new treatment.

Payer is a concept that refers to an individual or organization that pays for healthcare services, related terms include payer and reimbursement, payers are critical stakeholders in market access, as they provide coverage to patients and influence the adoption of new treatments, for example, a pharmaceutical company may develop a reimbursement strategy to secure coverage for a new product from payers.

Patient Access is a term that refers to the ability of patients to access safe and effective treatments, related terms include access and treatments, patient access is a critical component of market access, as it is used to evaluate the availability and affordability of treatments, for example, a pharmaceutical company may develop a patient access program to improve access to a new treatment.

Patient Engagement is a concept that refers to the process of involving patients in the development and delivery of healthcare services, related terms include engagement and patient, patient engagement involves

informing and empowering patients to take an active role in their care, for example, a pharmaceutical company may develop a patient engagement program to educate patients about a new treatment.

Patient Outcomes are a term that refers to the results and benefits that patients experience from a treatment or intervention, related terms include outcomes and benefits, patient outcomes are a critical component of market access, as they are used to evaluate the effectiveness and value of treatments, for example, a pharmaceutical company may evaluate the patient outcomes of a new treatment in a clinical trial.

Pharmacoeconomics is a concept that refers to the study of the economic aspects of pharmaceuticals, including the costs and benefits of treatments, related terms include pharmaco and economics, pharmacoeconomics involves analyzing the economic value of pharmaceuticals, as well as their impact on healthcare outcomes and resource utilization, for example, a pharmaceutical company may use pharmacoeconomics to evaluate the relative value of a new treatment.

Pharmacy Benefit Management is a term that refers to the process of managing and coordinating the delivery of pharmacy services, related terms include pharmacy and benefit, pharmacy benefit management involves developing formularies, managing reimbursement, and monitoring patient outcomes, for example, a pharmaceutical company may partner with a pharmacy benefit manager to develop a formulary for a new product.

Pricing is a concept that refers to the process of setting the price of a treatment or intervention, related terms include price and reimbursement, pricing is a critical component of market access, as it is used to evaluate the affordability and value of treatments, for example, a pharmaceutical company may develop a pricing strategy to launch a new product.

Product Lifecycle Management is a term that refers to the process of managing and optimizing the performance of a product over its entire life cycle, related terms include product and lifecycle, product lifecycle management involves identifying opportunities to improve the formulation, delivery, and marketing of a product, for example, a pharmaceutical company may use product lifecycle management to extend the patent life of a product.

Public-Private Partnership is a concept that refers to a collaboration between government and private sector organizations to achieve a common goal, related terms include partnership and collaboration, public-private partnerships are used in market access to develop and deliver new treatments, for example, a pharmaceutical company may partner with a government agency to develop a new vaccine.

Quality of Life is a term that refers to the overall well-being and satisfaction of patients, related terms include quality and life, quality of life is a critical component of market access, as it is used to evaluate the impact of treatments on patient outcomes and well-being, for example, a pharmaceutical company may evaluate the quality of life of patients in a clinical trial.

Reimbursement is a concept that refers to the process of paying for healthcare services, related terms include reimbursement and payment, reimbursement is a critical component of market access, as it is used to evaluate the affordability and accessibility of treatments, for example, a pharmaceutical company may

develop a reimbursement strategy to secure coverage for a new product.

Regulatory Affairs is a term that refers to the process of managing and navigating the regulatory landscape to bring new treatments to market, related terms include regulatory and affairs, regulatory affairs involves developing and implementing regulatory strategies, as well as interacting with regulatory agencies, for example, a pharmaceutical company may develop a regulatory strategy to support the approval of a new product.

Risk Sharing is a concept that refers to the process of sharing the risks and rewards of a treatment or intervention, related terms include risk and sharing, risk sharing is used in market access to incentivize healthcare providers to adopt new treatments and technologies, for example, a pharmaceutical company may partner with a healthcare provider to offer a risk-sharing model for a new treatment.

Stakeholder Engagement is a term that refers to the process of involving and engaging stakeholders in the development and delivery of healthcare services, related terms include stakeholder and engagement, stakeholder engagement involves informing and empowering stakeholders to take an active role in their care, for example, a pharmaceutical company may develop a stakeholder engagement program to educate stakeholders about a new treatment.

Supply Chain Management is a concept that refers to the process of managing and coordinating the delivery of healthcare products and services, related terms include supply and chain, supply chain management involves developing and implementing logistics and distribution strategies, as well as managing inventory and demand, for example, a pharmaceutical company may develop a supply chain management strategy to ensure the timely delivery of a new product.

Technology Assessment is a term that refers to the evaluation of the safety, efficacy, and cost-effectiveness of a healthcare technology, related terms include technology and assessment, technology assessment involves analyzing the clinical and economic evidence for a technology, as well as its potential impact on healthcare outcomes and resource utilization, for example, a pharmaceutical company may conduct a technology assessment to evaluate the relative value of a new treatment.

Value-Based Reimbursement is a concept that refers to a payment model in which reimbursement is tied to patient outcomes and value, related terms include value and reimbursement, value-based reimbursement models are designed to incentivize healthcare providers to deliver high-quality, cost-effective care, for example, a pharmaceutical company may partner with a healthcare provider to offer a value-based reimbursement model for a new treatment.

Value Proposition is a term that refers to the unique benefits and value that a treatment or intervention offers to patients and healthcare providers, related terms include value and proposition, value proposition is a critical component of market access, as it is used to evaluate the relative value and benefits of a treatment, for example, a pharmaceutical company may develop a value proposition to differentiate a new product from existing treatments.