



The Medicines Waiting Room

Perceptions of Medicines Access and Use in Australia

As a company that has worked for almost 150 years to pioneer medical discoveries that make life better, Eli Lilly recognises the importance of optimising access to life-changing and life-saving medicines.

Today, more than ever, it is important that medicines and health technology assessment policies are informed by the views of medical specialists – the very people responsible for the care of patients with chronic and complex health issues, and the primary prescribers of innovative medicines.

The Medicines Waiting Room research project explored the perceptions of medicines access, use and supply among a sample of 100 Australian clinicians from varying medical specialities who keep up to date with overseas trends in their area of expertise. The survey was conducted in February-March 2023 by Ipsos Research on behalf of Eli Lilly Australia.

The research shows that medical specialists believe Australia would benefit from faster, more efficient medicine funding processes, easing of eligibility criteria for reimbursed therapies, greater clinician input to reimbursement decision-making, and Government efforts to shore up supply of reimbursed medicines.

Our objective is for these insights to help shape policies that prioritise patient needs, while also recognising and rewarding pharmaceutical innovation.

For further information:

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Key Findings¹

1. Specialists surveyed believe improved (earlier and wider) access to medicines could significantly improve the health outcomes of Australian patients.

- 70% of clinicians believe that patient outcomes would improve significantly if reimbursement criteria for certain medicines already PBS-listed were relaxed to allow for earlier or wider use.
- The majority of clinicians (56%) believe that patient outcomes would improve significantly if medicines routinely used overseas were reimbursed through the PBS.
- Only 37% of clinicians report discussing both PBS-listed and private prescription treatment options with most patients, while the majority of clinicians are more cautious about discussing non-reimbursed options.

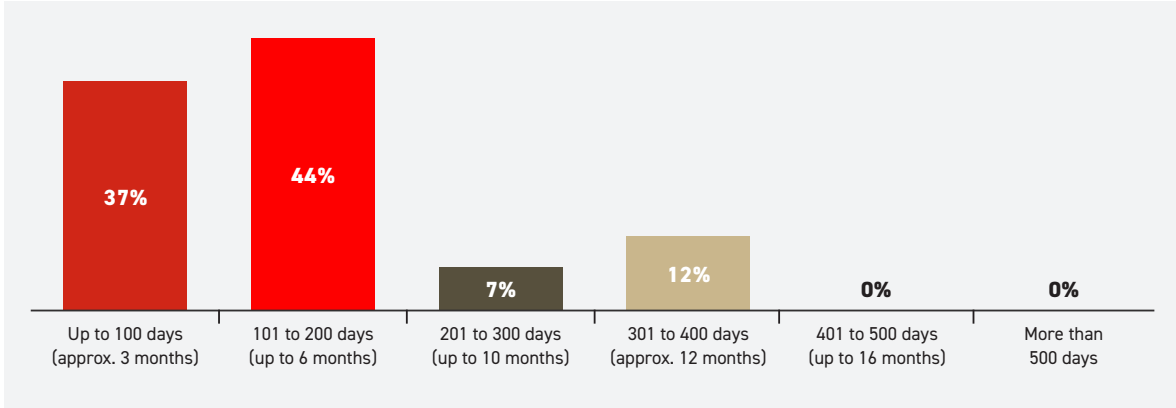
2. Clinicians want greater input to reimbursement decision-making for both new medicines and patient eligibility on the PBS.

- Clinicians would like greater input to decision-making about:
 - Which medicines are listed on the PBS (72%);
 - Which patient populations are eligible for access to PBS listed medicines (71%).
- Most clinicians (81%) are aware of medicines routinely used within their specialty in other developed countries, but which are not funded through the PBS in Australia.

3. Specialists believe faster, more efficient processes are needed between overseas approvals, subsequent TGA registration and PBS reimbursement – including fast-tracking in some cases.

- The vast majority of clinicians believe there should be a fast-track PBS-funding process for medicines that address highly unmet medical needs (87%) and for breakthrough medicines (77%).
- The current average 466-day timeframe between the TGA registration and PBS reimbursement of a medicine² is not considered acceptable. A timeframe of around 3 months (or up to 100 days) or 3-6 months (or 101-200 days) is considered more acceptable. Refer to figure 1.
- Nearly two-thirds (64%) of clinicians believe that the comparatively low dollar value assigned to a life and health outcomes in Australia’s health technology assessment processes could deny or delay patients access to medicines, vaccines and other health technologies.

Figure 1. Acceptable time between TGA registration and PBS listing in Australia – clinicians’ views

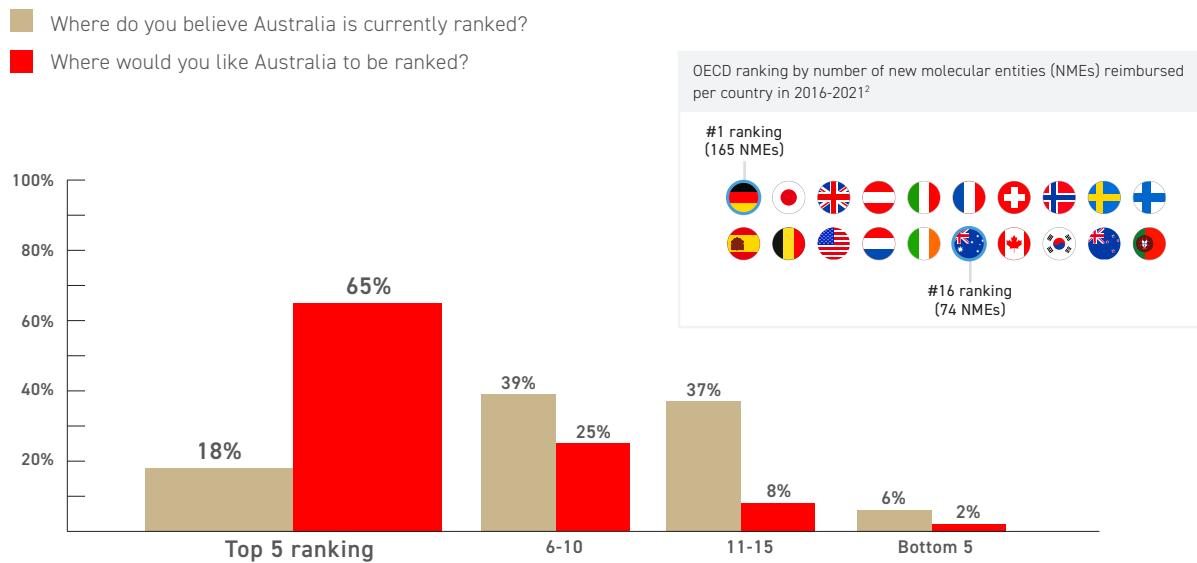


Australian specialists want top 5 OECD ranking for medicines access

- When it comes to reimbursed access to medicines, clinicians believe that Australia fares better than the reality when compared with other OECD countries, with 94% of clinicians believing Australia is ranked higher than its most recently reported position of 16th (based on reimbursed new molecular entities during 2016-2021).²
- Furthermore, 98% of clinicians would like to see Australia ranked higher than the reported 16th position, with 65% keen to see Australia ranked in the top 5 OECD countries for reimbursed access to medicines.

Figure 2. Australia's ranking among 20 OECD countries, in terms of reimbursed access to innovative medicines – clinicians' views

Australia's ranking among 20 OECD countries, in terms of reimbursed access to innovative medicines:



4. Clinicians believe the Australian Government has a responsibility to ensure price negotiations do not impact the availability of PBS-listed medicines.

- More than three quarters (78%) of clinicians believe that it is the responsibility of the Australian Government to ensure that price negotiations do not impact the supply of PBS-listed medicines for Australians who need them.
- 85% of clinicians are concerned that reductions in spending on the PBS may adversely impact patient outcomes.
- 70% of clinicians believe that any Government cost-savings resulting from PBS reform should be re-invested into the PBS.
- The fact that there has been no increase over the past 10 years in the total amount of money received by pharmaceutical companies for inclusion of medicines on the PBS is not considered consistent with key National Medicine Policy pillars by many clinicians:
 - 45% believe this is inconsistent with 'Equitable, timely, safe and reliable access to medicines and medicines-related services, at a cost that individuals and the community can afford'.
 - 38% believe this is inconsistent with 'Collaborative, innovative and sustainable medicines industry and research sectors with the capability, capacity and expertise to respond to current and future health needs'.



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References:

1. The Medicines Waiting Room, Ipsos Australia. March 2023.
2. Medicines Australia. Medicines Matter 2022 – Australia's Access to Medicines 2016-2021.