

Digital health innovation is no longer an option, but a necessity for health systems

September 20, 2021 | Opinion | By Hithaishi C Bhaskar

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The Asia Pacific Medical Technology Association (APACMed), has established a formal Digital Health Committee in order to focus on core advocacy themes such as interoperability, regulatory, cybersecurity, and reimbursement. On the latter point, the committee conducted global literature review combined with field research across the Asia Pacific, consulting public and private stakeholders, healthcare practitioners, and many other medical ecosystem players. APACMed study formulated the current state of Digital Health policies in the Asia Pacific, covering Australia and India as the two archetypes, which are poised uniquely with their own set of challenges and advantages. Roberta Sarno, Digital Health Manager, APACMed, Singapore trains the spotlight on the extensive research conducted by APACMed Digital Health Committee on these policy pathways for Asia Pacific. Edited excerpts;

What are the key scenarios that may act as hurdles against a proactive digital health adoption in the APAC region?

Healthcare systems across the Asia Pacific (APAC) region are highly fragmented, and the level of Digital Health (DH) adoption and maturity varies from country to country. As such, there is a wide variation in how DH solutions are brought to each market. However, some common challenges impeding the scale up of DH in APAC include the lack of regulatory guidelines, harmonised interoperability standards, cybersecurity and reimbursement frameworks. One of the key factors that could accelerate DH adoption and deliver healthcare to people in a more accessible, affordable, and scalable way is having in

place robust reimbursement frameworks specific for DH. To this end, the APACMed Digital Health Committee has developed a position paper identifying these hurdles and proposing customised frameworks that countries in the region could adopt, depending on their level of readiness and regulatory standards.

The committee identified three key barriers to digital health adoption in APAC:

- Lack of value assessment frameworks specific to digital health
- Fragmented and non-fit-for-purpose funding and reimbursement efforts
- Complex evidence generation requirements and health financing schemes that are not appropriate for digital health technologies. Unlike traditional medical devices and drugs, for which hard clinical outcomes are primarily used as a measure of success, DH has the potential to also look at efficiency gains and other factors to measure value such as, reducing physical touch points and visits to the physician, relative value units, health outcomes, enhanced efficiency in cost, time and resources.

Could you elaborate on APACMed's recommendations for policymakers to optimise reimbursement frameworks in the APAC digital health sector?

Through an assessment of the current healthcare systems, regulatory frameworks, and innovation capabilities of multiple nations in APAC, the APACMed Digital Health Committee recommends an approach that first dives into a scenario analysis - to determine a nation's stance and position on the digital health journey. Thereafter, the committee suggests that policymakers consider if they have a value assessment framework specific for DH, instead of repurposing the framework being used for traditional medical devices - which we believe have very different characteristics. Additionally, the frameworks must consider the clinical, economic, and social impacts of DH on healthcare, which would be specific to the nations.

By way of a region-wide study, the APACMed Digital Health Committee has formulated a three-step approach:

Step 1:

- Clearly define digital health
- Determine the potential of DH based on the impact on the disparity of healthcare systems- Map own country to one of the archetypes (provided in the study) and implement the recommendations in the section 'Digital Health Reimbursement To-Be'

Step 2:

- Include DH in the national health planning cycle
- Create a multi-stakeholder task force across public and private sectors
- Identify local champions to support the cause (Government, Healthcare professionals (HCPs), patients)

Step 3:

- Publish a roadmap with milestones to be achieved, explaining how DH reimbursement could have healthcare, economic and social impacts
- Ensure the right level of the workforce, skills, training for DH value assessment and reimbursement
- Implement the value assessment and reimbursement process and monitor

How do you define the scope and strategies of the policy designing project under APACMed Digital Health Committee?

APACMed is the only regional trade association representing the medical technology industry in APAC. The APACMed Digital Health Committee that includes leading medical technology companies like Abbott, B.Braun, J&J, Roche, and Fresenius Medical Care, was established in 2020 to exchange knowledge and advocate optimal policies enabling digital health in the region. The committee covers a wide range of topics, from regulatory approval to cybersecurity, from medical device interoperability to value assessment and reimbursement. As part of our mission, we work to optimise and advance DH policies in the region by engaging medical technology manufacturers, formalising recommendations in position papers and sharing them with governments, regulators, policymakers and decision makers across APAC.

Specifically, on funding and reimbursement methodology that is more tailored to digital health technologies in APAC, the committee hopes to work toward full alignment with broader healthcare and socioeconomic reform efforts. Connecting Digital Health value assessment, funding and reimbursement frameworks will unlock the true benefit for APAC stakeholders.

What is the coverage range of this reimbursement policy and how beneficial it is to these countries?

This is a fit-for-purpose reimbursement framework for Digital Health in the Asia Pacific, which was developed with inputs from public/private stakeholders across the region and involved a landscape study into multiple nations such as Japan, Australia, India, and Singapore that exhibited various scenarios, to formulate an ideal approach. The value assessment and reimbursement frameworks are split across two country archetypes –Australia as a developed universal health coverage market with a predominantly public payer model, and India rising to meet 4.0 ambitions with a tighter balance between public-private financing.

What is APACMed's vision in addressing the Asia Pacific MedTech industry's needs in a post-pandemic era with respect to value assessment, funding, and reimbursement?

Digital Health has accelerated during the COVID-19 pandemic, enabling the health ecosystem, providers and patients to adopt new medical technologies and DH solutions, specifically in remote patient care and telehealth. However, beyond addressing near-term pandemic issues, the full potential of DH in tackling chronic care remains untapped.

To achieve this, we need to strike a balance between immediate priorities and investments for a digital future in a value-based care era. With a growing aging population across the APAC region and increased patient demand for access to care at a time and modality of their choice, digital health innovation is no longer an option, but a necessity for health systems if we aspire to emerge stronger from the pandemic.

The APACMed Digital Health Committee conducted extensive research on Policy Pathways for Value Assessment and Reimbursement which encapsulates an exhaustive global literature review, combined with field research across the APAC.

The research was undertaken with the objective of providing recommendations to policymakers for better value assessment and reimbursement of digital health solutions and India and Australia were the two archetypes studied for the purpose of this research. This involved speaking to payers (public and private), healthcare practitioners, and other ecosystem players and it was deduced that the Digital Health policies of today are typically sitting in a chasm between 'no evidence, no adoption' and 'no adoption, no evidence'. The committee looks forward to having more stakeholders from the health technology industry join hands to discuss ways to enhance the legitimacy of DH as a formal tool for our populations in the APAC. Only by adopting an all-hands-on-deck approach can we truly harness the potential of this necessary and path-breaking tool.

Hithaishi C Bhaskar
hithaishi.cb@mmactiv.com