PATIENT PROGRAM BUSINESS CASE

Turn patient support into a brand advantage.

A sponsor case for using a co-branded MyID wearable to differentiate support, strengthen satisfaction, surface actionable signals, and test commercial contribution.

Partner discussion document | Not program- or MLR-approved

THE SPONSOR CASE

Patient value creates the experience. Measurable differentiation earns the investment.

01

DIFFERENTIATE

A useful co-branded object makes support visible beyond enrollment calls, portals, and paperwork.

02

SATISFY

A practical, patient-controlled benefit can strengthen perceived program value, trust, and reputation.

03

LEARN

Approved activation, experience, and safety signals create actionable program insight.

04

PROVE

Connect program KPIs to sponsor data and test commercial contribution before scaling.

THE PROGRAM LAYER
Co-branded passive wearable + Lifetime Essentials + approved activation materials + sponsor-defined measurement plan + optional governed safety intake

Commercial impact is a testable hypothesis, not a guarantee. The patient-controlled profile does not give the sponsor access to participant-entered medical information.

Discuss program fit

View the patient-program landing page

RECENT U.S. EVIDENCE

Support must be visible, useful, and measurable.

Current U.S. evidence supports investing in experience and measurement - not a guaranteed MyID outcome.

61%

of 372 U.S. patient groups rated pharma reputation good or excellent

PatientView report, May 2025

77%

of 71 responding U.S. HSSPs offered services beyond basic prescription fulfillment

ASHP survey, published 2026

63%

reported time-to-treatment metrics to manufacturers

ASHP survey; 52 responses

DIGITAL INTAKE CAN CREATE OPERATIONAL LEVERAGE

14,325

digital refill-assessment responses were captured in a U.S. health-system specialty pharmacy. The workflow was estimated to save 2,185 technician hours annually, and 31.9% of responses required pharmacist escalation.

IQVIA's 2024 U.S./Canada case found experience caliber correlated with satisfaction, time-to-first-fill, adherence or persistence, and corporate reputation. Correlation is not causation.

MEASURE THE PATH TO VALUE

1 REACH

Eligible, offered, enrolled, kit delivered; cost per enrolled participant.

2 ENGAGE

Activation, opt-in feedback, support interactions, program participation.

3 EXPERIENCE

Satisfaction, perceived value, trust, brand recall, recommendation.

4 IMPACT

Sponsor-linked access, appropriate persistence, discontinuation, economics.

EVIDENCE BOUNDARY

PatientView surveyed 372 U.S. patient groups; ASHP used a convenience sample of 71 U.S. health-system specialty pharmacies; and the digital-intake results come from one health system. Use these findings to design a sponsor-specific test - not to claim MyID outcomes.

Sources: PatientView U.S. patient-group survey (2025); Dale et al., AJHP (2025); ASHP U.S. HSSP survey (2026); IQVIA PSP analysis (2024).

PROPOSED SAFETY INTAKE & INSIGHTS MODULE

Capture patient-reported safety signals through a governed pathway.

The core wearable remains passive. A separate, sponsor-approved module can add structured intake, routing, oversight, and aggregate operational insight without giving commercial users patient-level safety data.

01

INVITE

Offer a participant-initiated check-in with urgent-care guidance and approved consent.

02

CAPTURE

Collect the identifiable patient, reporter, suspect product, event, and approved follow-up fields.

03

ROUTE

Send the record to the sponsor or safety vendor through a validated, time-stamped pathway.

04

GOVERN

Support triage, escalation, follow-up, reconciliation, audit trail, and role-based access.

REGULATORY OPERATING BOUNDARY

FDA's final ICH E2D(R1) guidance says manufacturers should review information received in a patient-support program for adverse events or reactions and manage qualifying cases as solicited reports under applicable requirements.

MyID does not assess causality or replace the sponsor's safety system, medical judgment, or regulatory reporting obligations.

ROLE-BASED PROGRAM INTELLIGENCE

PROGRAM OPERATIONS	Enrollment, delivery, activation, completion, support volume, cost per participant.
PATIENT EXPERIENCE	Opt-in satisfaction, perceived value, trust, recommendation, and qualitative feedback.
SAFETY OPERATIONS	Intake volume, routing timeliness, follow-up status, reconciliation, and audit completeness.
COMMERCIAL MODELING	Sponsor-linked access, appropriate persistence, discontinuation, reputation, and economics.

BUILD THE CASE

Define the patient value, commercial hypothesis, comparison, safety scope, data owners, and scale gate before launch.

Schedule a working session

Proposed module: requires product development and sponsor medical, safety, regulatory, privacy, security, legal, MLR, and vendor-validation approval.

References: FDA final ICH E2D(R1), March 2026; FDA Postmarketing Adverse Event Reporting Compliance Program.