

2018/SOM3/HLM-HE/019

Innovative Financing Models for Rare Diseases

Purpose: Information Submitted by: Shire



Eighth High Level Meeting on Health and the Economy Port Moresby, Papua New Guinea 16-17 August 2018



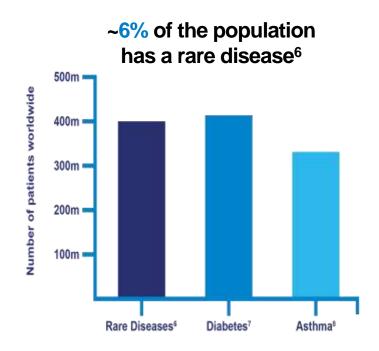


Rare is not so rare

Rare disease are one of the largest overlooked patient populations in the world

~ 7,000 rare diseases¹ yet each only affects a small number of people

Rare Disease	Number of patients
Gaucher disease	1 in 40,000 (~10,000 worldwide) ²
Fabry Disease	1 in 80,000 ²
Hereditory Angioedema	1 in 40,000 (~10,000 worldwide) ⁴
Hemophilia	1 in 5,000 (~400,000 worldwide) ⁵





^{2.} Sireesha K, et al. IJPRR 2014;3(2):79-84



Vrueh R de, et al. Background Paper 6.19 Rare Diseases 2013

8. Global Asthma Report 2014



^{3. &}lt;a href="http://www.orpha.net/consor/cgibin/OC_Exp.php?Expert=324">http://www.orpha.net/consor/cgibin/OC_Exp.php?Expert=324

^{4.} http://www.haea.org/what-is-hae/hae-the-disease

^{7.} https://www.diabetes.co.uk/diabetes-prevalence.html

Rare disease is a public health issue

Rare diseases are often life-threatening, life-debilitating conditions, affecting many children



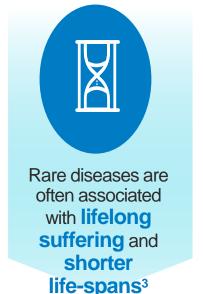
Over half of all rare diseases begin in childhood¹



One in three of these children will die before their fifth birthday¹



80% of rare diseases have a genetic component that cannot be managed through lifestyle changes²



The impact on those who suffer from rare disease and their families can be profound:³

- Low levels of quality of life
- High levels of disability
- Socially isolated
- Economically disadvantaged
- Reduced professional opportunities
- **Stigmatized**



- 1. Global Genes Factsheet on Rare Diseases. 2016: https://globalgenes.org/wp-content/uploads/2015/12/2016-WRDD-Fact-Sheet.pdf. Accessed February
- 2. Rhode J. 2005. Rare Diseases: Understanding the Public Health Priority. Eurordis.
- 3. Field M, Boat T, Editors. 2010. Rare Diseases and Orphan Products: Accelerating Research and Development. National Academy of Sciences.

Innovative financing models in rare diseases:

A Patient-Centric Approach that full of Public Private Partnership Opportunities



5-30 years delayed diagnosis:

- PPP: CDSS; AI; cloud;
- Family doctor
- Neonatal screening

Often require highly coordinated, long-term care

- Shared Nurse' APP
- PPP with cold-chain delivery service providers



Per-patient treatment cost tends to be higher:

- Government coordination:
- Payer innovation: mobilize medical savings account
- NGO & industry; PAP
 (deductible and self pay)
- -\ Sin tax
- Internet payment / credit

Lack of data to demonstrate the value

- Registry + patient app
- PPP: government endorsed utilization and outcome tracking





Patients are waiting

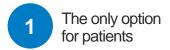




Our ambition

To work together with authorities and the rare disease community to ensure patient access to rare disease treatments upon regulatory approval

A proposed approach in rare diseases where the treatment meets one of 3 criteria



Patients experiencing high unmet need

Innovative therapeutic advance

Conditional reimbursement for up to a 3-year period post-regulatory approval



