CourierHealth

The State of Patient-Centricity in Biopharma

2026

INTRODUCTION

Welcome to the 2026 edition of The State of Patient-Centricity in Biopharma.

This is our largest and most ambitious report to date, featuring insights from more than 170 innovators across 80+ companies.

First, I want to say thank you to everyone that contributes to the report and engages with the findings. What started as an effort to spotlight leading-edge patient innovation has evolved into the industry standard for benchmarking performance and understanding how teams are approaching patient access, support, investments, and AI. It is a privilege for Courier Health to represent the collective wisdom.

As we dove into this year's data, it was evident that the pace of change has never been faster, and it shows no signs of slowing down. Two things in particular stood out:

1. **Infrastructure is still blocking innovation.** Respondents – across functions, company segments, and product types – describe their data as fragmented. The majority struggle to act on the data they do have, and only 9% of respondents have reached data maturity levels sufficient to power AI use cases. This isn't a technology problem; it's an infrastructure one. We can't build a patient-first future on a broken foundation.

2. **The relationship between the Business and IT has never been more important.** As the shift toward specialty medicines and programs proliferates, and AI becomes more entrenched in the way we live and work, traditional roles and responsibilities are evolving. The lines between people, process, and technology are blurring, and innovators are embracing the change. Leaders are engaging their counterparts early and often and taking an overall "outcomes-based" approach to organization and program design that enables speed and agility.

This brings us back to the most fundamental question:

How do we remove friction from the process to deliver the best patient experience possible?

The good news is that the rate of change that often feels like it's working against us is the same force that can work *for* us. Biopharma companies embracing the change, investing in their people, and prioritizing the right foundation today won't just keep pace, they'll define what the next generation of patient-centricity looks like.

That's what makes this report worth writing every year – and worth reading.

This is only possible because of the leaders willing to share their perspectives honestly. Thank you for being part of it.

Sincerely,

Danny Sigurdson

Danny Sigurdson
Founder and CEO

CourierHealth

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The State of Patient-Centricity:

Survey Insights

Teams keep moving internal.

Biopharma's shift toward internal ownership of patient services continues to accelerate, reinforcing last year's momentum and signaling a durable operating model change. Field Access & Reimbursement remains the clearest indicator of this trend with **83% of respondents reporting a majority internal FRM team**.

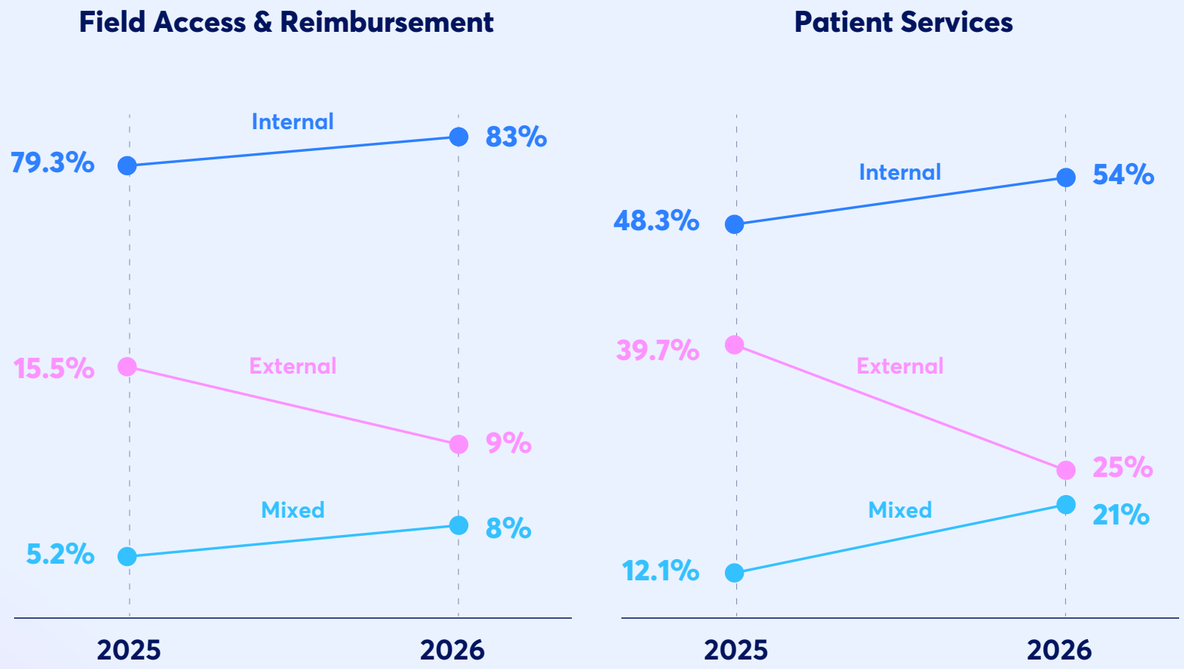
This trend is even more pronounced amongst small and emerging biotechs (where 91% and 90% of Access & Reimbursement teams, respectively, are internal) and remains consistently high across ultra-rare (89%), rare (88%), and oncology (87%) populations.

In addition, the share of internal or mixed (i.e. hybrid) Patient Services jumped to 75%– up from 60% in 2025.

While resource constraints remain – 40% of business* respondents and 53% of specialty** respondents cite insufficient resources to bring teams internal – the broader trajectory is clear.

As access pathways grow more complex, organizations are prioritizing internal teams to gain greater visibility, tighter operational control, and stronger alignment between access support and commercial pull-through.

Team Model By Function Year-over-Year



*Defined as respondents who selected Market Access, including Field Reimbursement, Patient Services, and Marketing/Brand as their job function.
**Defined as respondents whose primary product is 200k-1M patients.

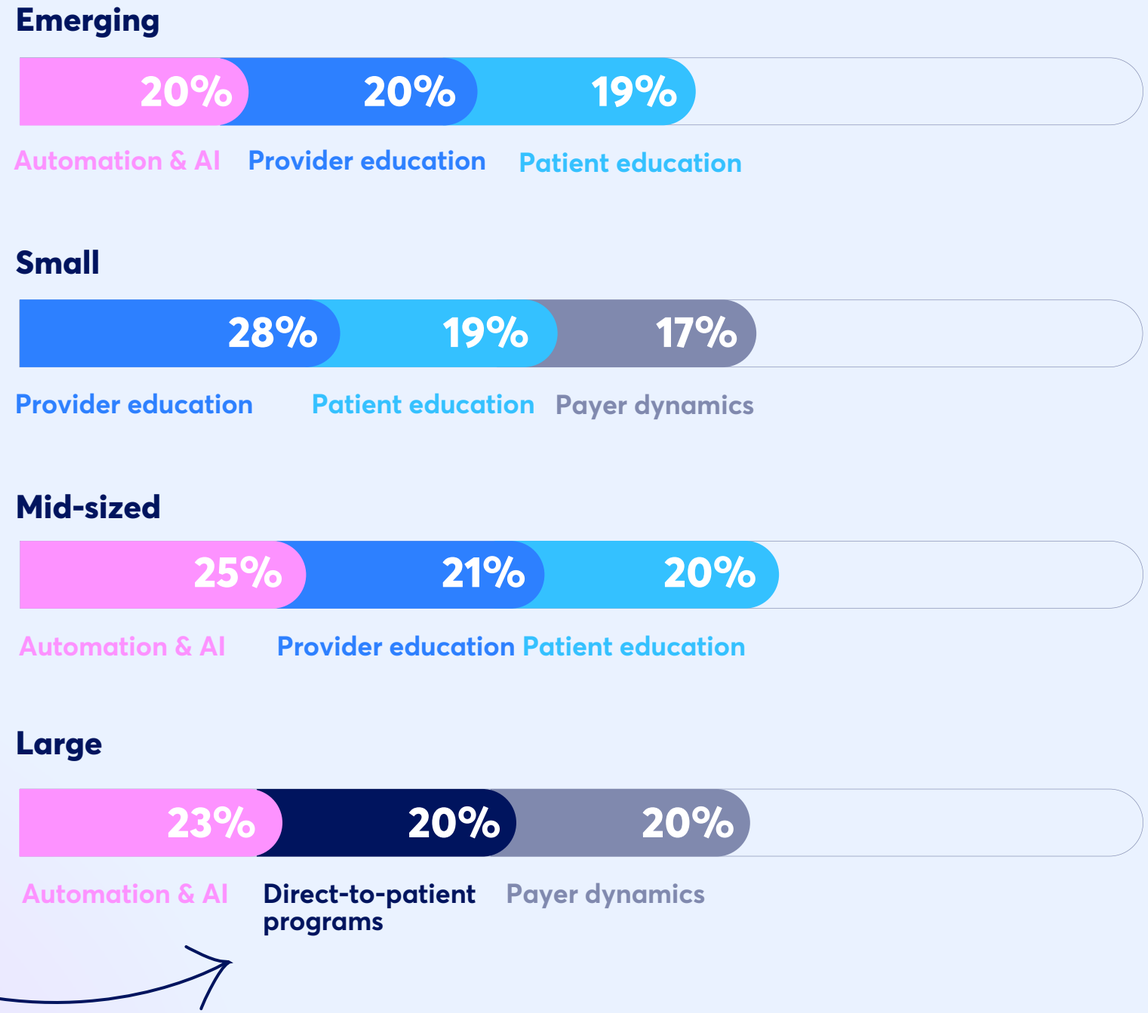
Core investments are crowding out innovation.

Nearly one-quarter of respondents identified Provider education as a top investment priority, followed closely by automation and AI. However, investment priorities across the patient journey shift notably depending on company size.

Whereas only 11% of small biotechs list automation & AI in their top investments, 25% of mid-sized biopharmas and 23% of large pharma manufacturers selected automation & AI. This suggests an innovation "sweet spot" where bigger companies have the resources and governance to experiment with leading-edge capabilities. This is less true for small and emerging biotechs, who remain focused on core Patient and Provider education & management.

What's more, despite the headlines, large pharma manufacturers (classified as over $10 billion in revenue) are the only companies meaningfully investing in direct-to-patient programs (20%).

Top 3 Areas of Investment (By Segment)



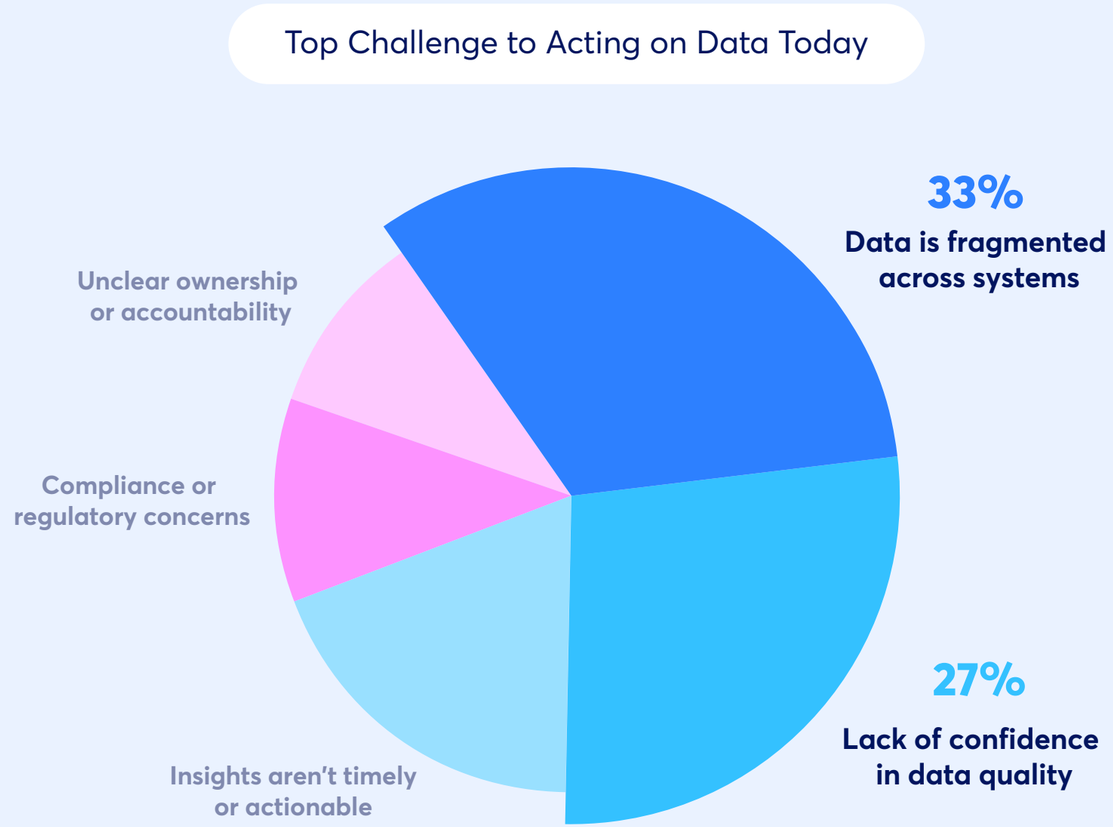
The data is there, but the insights aren't.

Last year's report highlighted the foundational *systems* challenges hindering biopharma companies (even more so than changing regulations, competitive pressures, or reduced resources).

46% of respondents describe their data as fragmented across teams and systems. This is most significant at either end of the spectrum – **nearly 60% of large pharma manufacturers and 51% of emerging companies are wrestling with disjointed data.**

While one-third of respondents use data to inform workflows and decisions, the majority (58%) are unable to access, connect, analyze, and act upon data in their day-to-day operations.

58% **of respondents are unable to access, connect, analyze and act upon their data.**

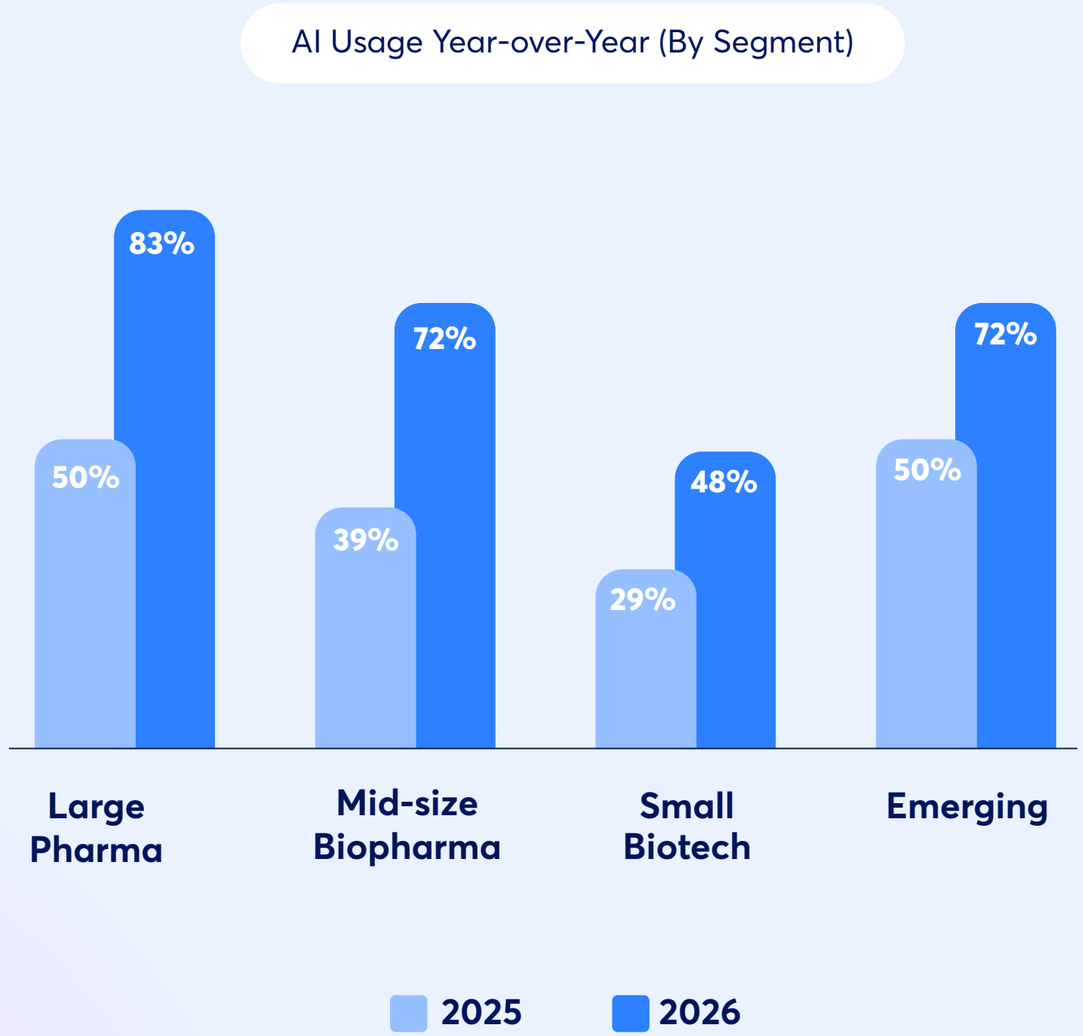


There is a fundamental infrastructure problem that is impeding innovation. Compliance guardrails or regulatory concerns aren't the issue here; data is siloed or lacking in quality, and the insights aren't timely or actionable.

AI usage in biopharma is up nearly 80% year-over-year.

If there's a single section of this year's survey – and our world at large – that has changed most dramatically since last year's report, it is the proliferation of AI. With model improvements measured in days and weeks (not months or years), the question is not whether an organization is using AI, but *how* they're using it.

While roughly 83% are using AI in some capacity today – up from 46.6% last year – **one-fifth (20%) of all respondents say that usage is informal and individual-driven.**

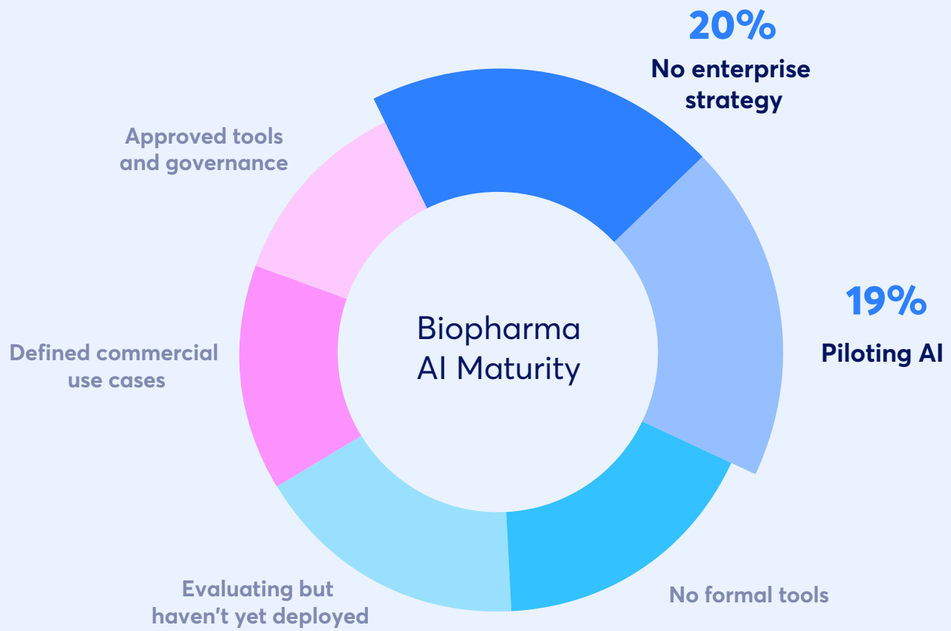


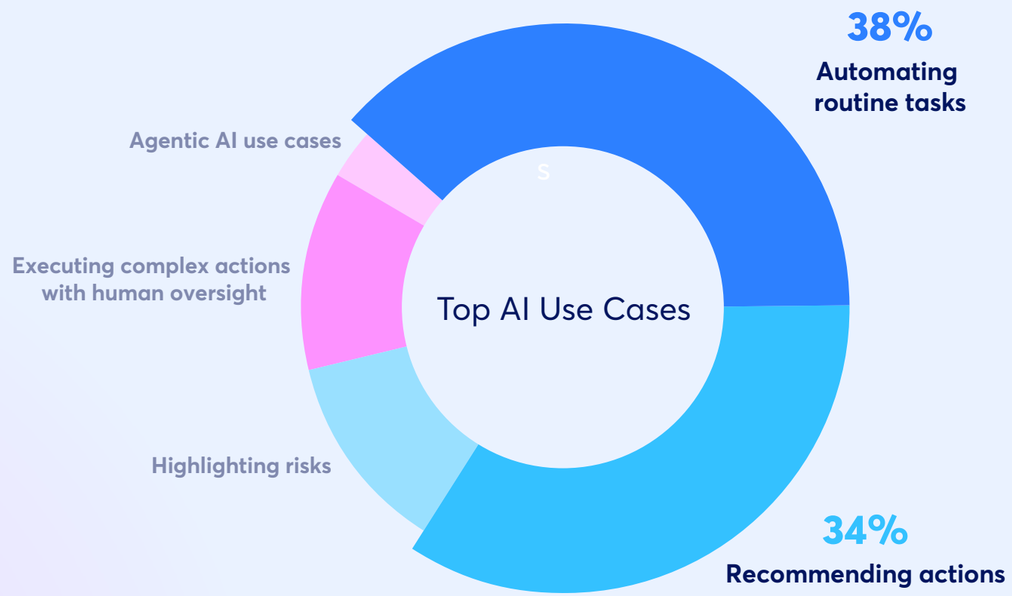
Only 12% of companies have approved AI tools and governance.

Perhaps unsurprisingly, **large pharma companies lead the way with 31% of respondents reporting AI adoption at scale** (i.e., tools, governance, and adoption across 2+ teams), compared to 16% for mid-sized companies, 7% for emerging companies, and just 2% for small biotechs.

Of respondents using AI, the vast majority are using it to automate routine tasks (38%), and **only 3% of respondents are using agentic AI** to execute complex actions independently.

The real value of AI in patient-centricity isn't automation, it's prioritization. AI must sit inside operational workflows, grounded in real patient journeys.



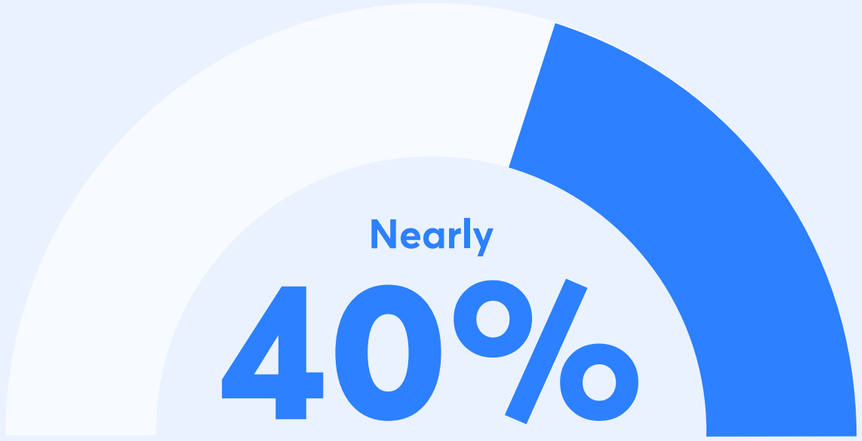


Successful AI adoption requires strategy, infrastructure, and education.

When it comes to the top barrier to adopting AI, 33% cite security and compliance concerns, followed by a lack of a clear use case (21%).

For IT/Ops leaders, the top barrier is a lack of a clear use case (38%), followed by security and compliance concerns (35%). The pairing is telling: these teams aren't just asking whether AI solutions are safe, but whether they're worth it.

AI is pervasive, rapidly improving, and here to stay, but it's not a silver bullet solution. **Successful adoption requires foundational infrastructure, secure data environments, thoughtful governance, and meaningful human oversight.** Executives often underestimate the complexity of standing up AI solutions that work as expected in regulated settings, including change management and upskilling.



of IT/Ops leaders cite **balancing speed of delivery with security and compliance** as their top challenge to supporting the Business.

Stakeholder alignment is more important than ever.

As specialty medicines account for a greater share of portfolios and pipelines, the rate of change accelerates, and AI becomes table stakes, partnership between the Business and IT/Ops is moving from an operational nice-to-have to a strategic advantage. This was the first year we segmented the survey based on job function, highlighting new areas of opportunity for Business and IT/Ops partnership.

The good news? The majority report feeling "mostly" or "very aligned" when it comes to business goals, priorities and context. The degree of alignment, however, depends on where one sits within the organization:

Whereas

81%

of IT/Ops respondents report feeling **mostly to very aligned...**

only

59%

of Business respondents **share that sentiment.**

This makes sense when you think about: each function is operating from their purview, with limited understanding of the other's day-to-day challenges.

Market Access and Patient Services leaders are tasked with delivering a smooth, digital-first experience amidst rising patient expectations, changing regulations, and increasing access & reimbursement barriers. At the same time, IT/Ops leaders are firefighting across the organization, pushing to stay innovative and agile while wrestling with vast amounts of data, legacy tech, and competing requests.

This year's featured experts underscore the importance of embedding IT/Ops within Market Access and Patient Services teams (and vice versa) to drive greater empathy and alignment, and championing change from the top down to meet tomorrow's challenges.

How does biopharma automate without losing the human connection?

We asked respondents to share what the future of patient innovation looks like, and nearly every response spoke to a similar tension.

Answers like the following reflect an industry-wide anxiety about getting it wrong.

> "Strong digital backbone without losing the human touch"

> "Balanced human and digital engagement"

> "Technology that reduces unnecessary human friction while preserving meaningful relationships"

At the same time, the responses don't debate whether AI & automation belong, but how it should be deployed to drive the greatest impact.

The anxiety is understandable, but standing still is its own mistake. Technology has matured, and expectations have shifted. AI is here to stay, and it is evolving at a pace that will compress timelines. Biopharma companies that are investing in innovation today will define the next generation of patient access and support. Those that delay risk falling permanently behind.

The winners in patient innovation will be decided in the next several quarters – not years – as top companies move from pilots to production and from aspiration to execution.

What does the future of patient-centricity look like?

(Highlighted excerpts from survey written responses)

AI THAT ENHANCES THE HUMAN EXPERIENCE

- A mix between AI and Human touch to be more efficient
- Human centered thinking
- Individualized, dynamic support
- AI-driven next best action based on ALL available data
- AI-enabled navigation and access
- Less about "solutions" and more about relationships

PERSONALIZATION

- Authentic personalized support that feels like caring
- Not a cookie cutter approach
- Self-managed patient care at their own time
- Patients as collaborators and designers
- Communicating with patients on their terms

PROACTIVE, PREDICTIVE ENGAGEMENT

- Using data to anticipate and resolve potential barriers before they occur
- Proactive rather than reactive support
- Right message, right patient, right time
- Considering the caregiver perspective
- Identifying coverage challenges earlier to prevent delays

ELIMINATING FRICTION

- More digital tools in the patient's hands
- Pulling together the SP, HUB, and internal data
- Aligned teams and aligned processes with a shared vision of ensuring access for patients
- Real-time data sharing of where a patient is in the journey

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The Future of Patient-Centricity:

Expert Insights

Meet the Experts

Thank you to these patient innovators for lending their time and expertise to this report and the broader community.

Liz Austin
Genentech

Spencer Bailey
SetPoint Medical

Vanessa Daniel
Keenova

Andres Diaz
Dengli

Marianne Gandee
Pfizer

Chris Mancill
AstraZeneca

Paul Hanus
UCB

Andrew Schwartz
KalVista

Diana Villanova
Catalyst

Note: The views and opinions expressed in this whitepaper are those of the contributors and do not necessarily reflect the views or positions of any entities they represent.

Liz Austin

Executive Director, Genentech Patient Foundation

Genentech

The industry has been saying for a long time that consumerism is going to play a bigger role in healthcare. Patients should be at the center of our decision-making, yet across the industry, you still see a very healthcare provider-centric and product-centric mentality. Only recently has that really started to shift with the rise of direct-to-patient platforms, cash pay options, and organizations putting patient-centricity at the C-suite level.

Connecting data, technology, and the humans supporting patient and provider interactions is critical to unlocking insights and creating a seamless experience.

Technology and data can play a huge role in creating transparency into decision-making, delivering a better experience, supporting patients with affordability options, and anticipating where people may get stuck. At the same time, we're still going to need humans in the loop to have real conversations with other humans.

We may strive for digital-first interactions, but maintaining connections to expert individuals is also critical to ensure we meet patient needs and don't exacerbate a digital divide.

The industry is taking leaps and experimenting with new platforms, but we have to remember that while we build out our infrastructure, we must build new capabilities in our teams and break down internal silos in service of our patients. As we design any new service, we need to co-create with and gather input from patients and providers at every step. We must ensure that we meet people where they are, embed health literacy principles throughout and simplify the complexity of this healthcare system.

When selecting partners or vendors, it is key to have partners who understand patient access, who understand how complicated the patient journey is, AND how simple we want to make it. We also need to pay attention to innovation that's happening outside our industry.

Consumers aren't going to tolerate fragmented experiences; they're expecting an easy and seamless experience every time they pick up the phone or seek to access medication. While it will never be as simple as buying a pair of socks online, that is an expectation that we have to make progress against. To get there will take a combination of partners with deep expertise in the complexity of access in the healthcare space combined with innovators who think outside our traditional boxes and are not afraid to challenge the status quo. There are opportunities to learn from both.

Genentech has an incredible legacy of innovation, and that legacy has led us through a very successful 50 years. We helped define the Biotechnology industry, and each subsequent breakthrough has helped redefine what's possible. Innovation is deeply embedded in our culture. If you look at our employee promise, the first sentence says, "We are the original changemakers." There is huge passion in this organization for being innovative and looking forward. In any organization, when people come to the table with that mindset, it becomes easier to align people and processes around that shared vision.

Spencer Bailey

Vice President, Market Access

SETPOINT MEDICAL

Healthcare continues to add administrative burdens on care providers – from prior authorization to care coordination. It is incumbent upon us, as innovators, to acknowledge the complexity required to commercialize new therapies and to build the infrastructure to work collaboratively with insurers, physicians, and care teams to ensure a seamless patient experience.

As a medical device company, our Market Access function plays a critical role in bridging the gap between regulatory approval and patient access. We partner closely with providers to navigate coverage pathways, educate on prior authorization requirements, and support appropriate documentation. In parallel, our patient navigation program is designed to guide individuals through their care journey – connecting them with treating physicians and surgical specialists while addressing questions along the way.

Rheumatoid arthritis (RA) is a debilitating autoimmune condition that impacts millions in the US. The SetPoint System represents a novel approach to treatment, delivering targeted neuroimmune modulation through a fully integrated device. Utilizing brief, precisely controlled stimulation parameters, the therapy is designed to down-regulate the inflammatory response at its source, leveraging the bodies' pre-existing immune mechanisms. It is the first non-pharmacologic approach to treating RA with a novel mechanism of action and a form factor built for physicians and patients alike.

Introducing a fundamentally new therapeutic modality requires thoughtful coordination across clinical and operational workflows. As with any novel therapy that redefines how clinicians and patients engage with neuromodulation, there are inherent complexities in care delivery that must be addressed. This necessitates a robust, scalable patient management infrastructure that supports both providers and patients throughout the treatment process.

Today, there remains a lack of intuitive, HIPAA-compliant systems purpose built to support this level of coordination. Leveraging a platform such as Courier Health enables a more efficient and integrated approach to patient access and care coordination. Its design aligns with the day-to-day realities of clinical and commercial teams, facilitating cross-functional engagement and improving overall execution.

A core component of our strategy is not only investing in next-generation science, but also in the systems and technologies required to operationalize access at scale. Patients deserve timely access to innovative therapies, and administrative complexity should not be a barrier. Building infrastructure that supports patient volume and streamlines coordination is essential to delivering on that commitment.

Courier Health is the next generation of life science patient navigation technology. Patients deserve access to this treatment, and administrative work cannot be a hurdle to that. We're proud to be able to make these investments and to build a platform designed to function at scale.

As organizations bring forward truly differentiated therapies, the market increasingly demands advanced analytics and integrated systems. Legacy approaches are insufficient to support the level of coordination required. Embracing modern, purpose-built technology enables more effective engagement across stakeholders and positions the organization at the forefront of industry evolution.

There was a time when medical innovation moved more directly from approval to adoption. Today, multiple stakeholders influence access, and new therapies often face an initial coverage barrier. This "penalty box" reflects the evolving reimbursement landscape, where additional investment and coordination are required to establish access.

Market Access plays a central role in overcoming these barriers – aligning evidence, policy, and operational execution to ensure patients can receive appropriate care. As prior authorization requirements and administrative demands continue to increase, many providers lack the infrastructure to navigate these processes efficiently. Supporting them in this effort is essential to enabling patient access.

If you're building a truly differentiated company, advanced analytics are not optional—they are foundational. Relying on spreadsheets is not only insufficient, it actively limits your ability to operate effectively and scale. Legacy tools do not meet the demands of today's market. The industry is moving toward integrated, purpose-built platforms, and organizations that fail to evolve will fall behind.

Vanessa Daniel

Senior Director, Global Patient Access

keenova™

I manage patient support programs for our immunology space. My team oversees the day-to-day operations of our reimbursement hub, our commercial copay program, and our free goods programs. The biggest shift for us is the IRA changes around the annual maximum out-of-pocket. We've put a lot of effort towards patient education and helping patients understand the various options. We're still trying to navigate the best education points for patients around their plan and their policy, and it feels like we learn something new every week. Plans make changes and so we shift and adapt to ensure patients are fully educated and aware of what they need to do to advocate for themselves.

At the end of the day, we want as many patients to start therapy as possible, ideally in the fastest speed as possible. For our product, patients may have to go through multiple levels of appeals before they actually start therapy, and we never want to drive without quality. We always take the time to ensure that HCPs are educated on all of the steps that are needed for that particular plan, and our focus is on increasing quality submissions so that patients can get the urgent care they need.

We typically look at conversion rate and whether our PAP enrollment rate is steady. We hold the team accountable to their KPIs around turnaround times for particular stages in the process.

A lot of it is thinking about what we can control versus what we can't control. For example, we can control how quickly we're getting the benefits done up front and how quickly we are reaching out to a patient to make sure that they're engaged and have their questions answered and expectations managed. We can control how often we continue our follow-ups with the patients on a recurring basis. Once they start therapy, are they continuing to stay on therapy? If not, let's figure out why. For those that are staying on therapy, are there things that we can learn and pull through to help other patients?

We're still working with offices to get them to embrace a digital mindset because they're still faxing, so part of our focus is embracing digital advancements and also looking ahead to intelligent automation. How do we pull through electronic prior authorizations and appeals leveraging AI, so it takes less work for HCPs to manually mine all of their clinical documents?

There's a huge opportunity to speed up the submission process and get updates from plans directly in a digital manner versus waiting 45 minutes to speak to someone on a PA status.

Our biggest challenge is the reimbursement process and all the information that goes back and forth through the PA and appeals processes. When you're providing years and years of information, of course it's going to get missed by an HCP at times for what that particular payer may be looking for that particular patient. That's where AI can help, but at the same time, there needs to be human review until everyone gets more comfortable with it.

It's important to step back and ask how something is going to be experienced by the patient. It's so easy to lose patients as the focus, especially as you're making changes and building systems. Every decision we make, I tell my team to think about it from the patient lens. I don't care if it's harder for us or takes more work, we do what's right for the patient.

Andres Diaz

Head of Product Management & Portfolio (Technology)

DENALI

Technology evolves every day, but what hasn't changed is the fact that the trifecta in business always comes down to people, process and technology.

The change I find very interesting is the process portion. Back in the day, we were anchored in building process flows and detailing out exactly how a business function should look. Now, technology has given us an opportunity to let the process be more dynamic so we can focus on the outcomes we want to drive. In the case of patient services, for example, the focus becomes how are we making sure that our patients are getting what they need? How are we providing timely information to them? How are we allowing them to connect with us in an omnichannel way whenever it is convenient to them?

If I have the right technology system, I'm not thinking as much about process and process design. Courier has put that front and center. As a CRM, Courier has prioritized that user experience, which is transforming how we think about creating new business processes.

For me, business and technology come together to drive an outcome – the partnership goes hand in hand. The responsibilities are different, but they're both needed. The technology team cannot be focused on the day-to-day of helping a patient, but neither can the business team be focused on what's coming up with a technology system. The two need to work together to ensure real transformation to the business and the right customer experience to patients.

If your approach is to map out business requirements and then bring technology into the mix, you're missing an opportunity. You need to co-create with technology at the table, focused on the outcomes you want to drive, and you'll be surprised how many times innovative technology can influence what you're trying to achieve or give you another way of doing things.

Successful change management requires the willingness and openness to listen to your partners and understand where they may have fears, frustrations, and concerns. It's about working with them and being transparent about areas where there might not yet be a solution. Technology is now doing things that humans have always done, so having that empathy to understand where they're coming from and helping them through the journey is critical.

Denali is so focused on our priorities of patients, science, and speed to market; we are rallied behind a clear set of outcomes. Larger organizations sometimes have a harder time understanding their priorities and creating common incentives for people to make meaningful progress against them. That might mean that smaller companies are going to win the race around innovation and new ways of doing things.

When you're buying the same things over and over, you're not driving innovation. This industry became great at optimizing an HCP CRM, but at the end of the day, we can't miss the fact that the ultimate customer is the patient, and they will continue to have increased power over their healthcare decisions.

When evaluating new solutions, I look at the quality of the team and the caliber of the talent they're bringing together. The second aspect is the actual technology. You need to see it, test drive it, ask the questions, and get a couple of references. When I look at partners, I'm always asking how they are using AI to deliver solutions and how AI is embedded into a system.

At Denali, we're set up to make changes quickly and learn from that. To me, knowing that we're building stuff that is not just staying in strategy decks brings me to work every day. I still get energized when I see the smile on somebody's face when something just works for them, and knowing that at the end of the day, a patient is going to have a better experience because of it.

Marianne Gandee

Vice President, Patient Solutions and Alliances

Pfizer

Across life sciences, we make huge investments in research and development with the knowledge that many of the things we're researching will never come to fruition. Billions of dollars are spent to get to a point where providers can write a prescription for their patient. It's only after that prescription is written that because of the way a patient's plan is designed or the way a plan functions, a prior authorization can be delayed or denied, denying patient access to that therapy. It's what I call the final mile of access, and it's where there are increasing pressures.

My team's mission is to do a better job of getting information to people when they need it, where they need it, and in a way that they can use it – whether that's in partnership with their healthcare team on their own with their caregivers or within their community.

My team has four key pillars including field reimbursement, advocacy, patient solution strategy, and US and global health equity.

Field reimbursement is how we can proactively educate healthcare providers about changes within their regions, as well as how we can respond to help patients that opt into our field reimbursement services, post treatment decisions made by their care team, and work to help them overcome insurance hurdles.

For patients living with cancer, quality of life becomes so important, and our advocacy team works with both patient advocacy organizations as well as professional groups like the American Society of Clinical Oncology and the Oncology Nursing Society to create partnerships that bring valuable resources to more people.

Patient-centered design is integral to what we do, and our patient solutions strategy team works to get a 360-degree perspective of the patient experience – from regional trends impacting reimbursement to advocacy trends impacting quality of life – so that we have more holistic insights to inform how we support patients, how we deliver information, and how we continue to evolve our patient solutions.

Health equity is a responsibility, and it's one Pfizer is committed to. Anytime innovation is brought forward, there's a lag from when it's adopted by "super users" to when it's diffused into the community setting, which is where most Americans are going to be diagnosed and treated. We're constantly trying to bridge that gap so that our treatments are available for people no matter who they are or where they live.

We're living in a time of disruption between payer consolidation and different policies coming online in the US. These dynamics are changing plans and hitting out-of-pocket costs and potentially raising premiums for people across the US, all of which manufacturers are grappling with as we prioritize patient support. Whether it's in cancer where my team and I focus or another area, patients are not only living with the disease and oftentimes confronting their own mortality, but they're navigating a very complex healthcare system while also navigating their insurance to access care and treatments.

The best time to learn is not when you're in crisis mode; you need to be prepared before a health event might arise. Pfizer remains committed to supporting health and insurance literacy. In 2009, we supported health literacy as the newest vital sign, and in 2020, we launched our health literacy policy. My team has worked with an advocacy partner, Triage Health, to launch a site called www.myhealthcarefinances.com to help demystify some of the terminology around insurance plans to educate patients. This is an area where I think AI is already helping.

You could imagine patients, for example, asking ChatGPT or Claude to explain a fee or say "My plan is with X entity" to try to figure out what's going on with a denial for care. We also remain hypersensitive that people's ability to navigate their insurance will vary based on a multitude of factors outside of their control.

At the end of the day, we're here to deliver breakthroughs to patients. In the American Cancer Society's 2026 report, the five-year survival rate for all cancers in the U.S. reached a record 70% across all cancers. It's astounding to see those gains and how the science across oncology has played an integral role in these statistics.

Staying agile in the face of transformative changes in life sciences is about partnership and collaboration. We need to understand from a patient's perspective what would prevent them from starting a therapy that they're prescribed or prevent them from staying on it. We want to understand their whole health and how they live their life.

Paul Hanus

Head of US Market Access Strategic Planning, Analytics & Insights

Seemingly every day there's a new headline in healthcare that gets people to move in one direction. Our role is to provide signal in the noise, to help identify the dynamics that matter most, and to connect science to the people that need it to bring value to our patients.

We're constantly searching for new tools and ways of working, and we're always looking at new data sets to learn what's working, what's not, and how we can thrive in the future. It's about ensuring performance today and building the capabilities for tomorrow.

Market access isn't just about whether the patient has coverage, it's about everything that happens after the script is written or a patient referral comes in. That's where we're trying to help understand the continuum of pull-through and push-through that ultimately helps patients get access to their prescribed therapy. If you can equip your teams to support patient access and reimbursement for their therapies, that goes a heck of a long way.

In addition, our team fosters relationships across UCB – with IT and digital technology, commercial data operations, global analytics, and across the business units – to ensure we have the tools and capabilities that we need.

To date, there have been few tools specifically designed for the market access function. It's exciting to see tools like Courier Health because of how access and reimbursement have accelerated, which will only continue based on global drug pipelines.

Market dynamics are changing, and the storytelling around what that means for an organization and how to thoughtfully and intentionally drive change is critical. It starts with creating a chain of why and leading with transparency. It's easier to build a business case when you truly understand a function's workflows, jobs to be done, and pain points. It can be challenging when organizations have invested so much in building their digital infrastructure already, and they're concerned about bolting on another tool. It's essential to ensure it plays in the systems that have already been set up.

Once you understand the need and build the business case, you work to figure out the right internal partners to help make things happen.

There's lots of dominoes that need to stack up to create alignment along the way. Innovation requires the right change management mindset. You can't just snap your fingers and make it happen; it takes time and determination. Sometimes in one conversation you might hear a 'no,' but the next conversation you might hear a 'maybe' or you might hear a 'yes,' so it's a journey of determination and belief. At the end of the day, if you're asking people to execute and they haven't been a part of that journey, they're not going to execute to their fullest until they understand the why, the what and the how.

Understanding the needs is number one, but in parallel, too, it's important to always look forward. As a futurist, I'm continually looking across industries and categories to see what's possible. It starts with having a view of the future, whether it's long-term or short-term, and understanding what it is that you want to create.

We want to create a positive experience for our patients and other stakeholders. The patient access and reimbursement landscape is becoming increasingly complex, so companies must move quickly, dare to imagine what's possible, and then figure out what are the 'no regrets' moves that keep the patient front and center.

Chris Mancill

SVP & Head, US Market Access

AstraZeneca

Change is the only constant, and once you learn to accept that fundamental fact, you can think about change as an opportunity and catalyst rather than a problem. When a change deals with something as critically important as healthcare and the patient experience, however, there always needs to be the understanding from the business that a change won't be rolled out by market access teams until it's validated. Where there is opportunity for change, we need to be sure that there is not a level of risk or impact that is inappropriate to the patient, because we are here to support them.

Most often, when a patient talks to a large biopharmaceutical company, it's with a member of the market access team. Maybe a patient has just received a diagnosis, and they've been told that there's a medicine that might be able to help, but that they'll need to navigate a complex system to access that medicine. I don't know about everyone else, but in school, nobody taught me how to do that. People, especially when they are dealing with significant health issues, need support to navigate the insurance and access process. Our market access team makes sure that those patients have the right support, including financial support if that's what they need, and know the questions that need to be asked.

It's very important to ask for feedback on programs early and frequently because the landscape is always moving. Within our function, we work directly with patient advocacy groups to validate that the program that we've designed will actually help patients in the way that's intended.

There's no "here's an off-the-shelf solution" or "I did this for the last launch so I'm going to do this for this launch." That doesn't work. As a specialized function, market access is charged to design and develop the right programs for a particular patient population, a particular need and a particular drug. The access and patient experience strategy needs to cohere with the overall brand strategy, and then we need a dedicated team of people who can execute.

Part of executing effectively is understanding the landscape, keeping an eye on what's changing, and identifying opportunities to test or pilot new things. When I think about the opportunity of AI, and emerging use cases and applications within our industry, to me, it's an opportunity for us to be more human – ironic as that sounds. The goal is to automate the processes that a patient can do from their phone or computer, but retain the personal connections that drive problem solving for patients. There will always be patients who need to talk to a person to resolve their issue, and those person-to-person connections are valuable. When process is automated, our AstraZeneca employees can authentically engage with patients in a more efficient, effective way. We need to actively invest to figure out what that looks like and ensure the right data foundation to enable program efficiencies going forward.

We recently implemented updates in some of our programs and embedded new online tools to allow patients to complete re-enrollments quickly and easily. This change helps our people work with patients to navigate clear routes to the care they need. We've had far broader interest in these online tools than anticipated, which means that technology like AI has only continued to help streamline the process where a patient can get their preliminary determination in minutes versus days or weeks. Simply put, it's saved us time to be able to directly engage and support the patients who are facing complicated issues.

When we started doing this, however, there was some hesitance and even the perception that the added technology would replace the impact of our people and the human interactions they guide. Leadership and the team leading the program were able to communicate that the program updates were intentionally designed to ensure our team members could actually spend more time empathetically engaging the patients who need more personalized assistance. It's retained and even reprioritized those engagements, freeing up time to devote to the more complicated cases, so it was a big win for patients and a big win for our internal teams as well.

Anyone who's operating in this space should take a big step back and look at the underlying systems that capture interactions with patients, what they need and the types of issues they face. Oftentimes these systems are updated less frequently than they need to be. As an industry, if we're going to take a big leap forward to deliver even more for patients, we need to make credible investments in technology right now.

That can mean asking for significant internal funding and resources. As leaders in market and patient access, we must raise our hands to make those asks and speak up on behalf of what patients need if we want to stay at the cutting-edge.

Andrew Schwartz

VP/Global Head of IT

KalVista Pharmaceuticals

In the last few years for IT, it's not enough to know technology and digital solutions, you need to understand the business space that you operate in extremely well. I try to connect with the business on their terms and highlight how an initiative ties back to an organization's mission, such as helping patients have more good days. It's not about the shiny new object but how technology can be used as a strategic lever to improve business outcomes.

Business expertise is paramount for IT professionals — without it, it's hard to translate what you're doing into something that resonates with what the business needs. When building out a team, I look for grit, perseverance, and emotional intelligence.

Biotech moves quickly, and there's going to be ambiguity. Everybody's trying to figure out how AI fits, and if you're not comfortable being uncomfortable and trying new things, you're already playing catch up.

The real question is where to start investing and embedding AI into workflows today. I believe it always comes back to having a good understanding of the business and partnering with them to understand their needs. When IT delivers an overly complex experience for an internal or external-facing solution, it can impact the entire organization. That's why it's paramount for us as IT professionals to understand the end-to-end process and help eliminate friction. The people I work with are constantly on the lookout for innovation — not just for the sake of it, but because they see an opportunity to do something better or improve the patient experience. They know the tools specific to their function, and that makes them a great partner in identifying solutions

Big pharma has an edge on emerging biotechs in some ways simply because they have more resources and dollars to use for innovation such as AI. If something doesn't work out, they have the cushion to go back, tweak, and try it again. Emerging biotechs run leaner, so it becomes more important to think about how to introduce innovation and how to build a structure that's flexible and positioned for success. The industry is starting to see the proliferation of Director of AI titles, and I think we'll start to see a dedicated function that works horizontally across a company to explore what's new and innovative and how AI can be leveraged organization wide.

I believe organizations that view IT as a strategic lever are going to do better than those that don't. Over the past several years I've seen a trend where several larger pharma organizations now have a Head of IT role reporting directly into the CEO because they understand how digital can be used to help the organization stay agile and competitive. Organizations that continue to think of IT solely as a cost center will be surpassed by those that recognize digital and AI as strategic capabilities for driving innovation, efficiency, and competitive advantage.

Emerging biotechs can focus on lower-risk, high-impact use cases for AI, using short 30–60-day pilots to validate value before scaling. This test-and-learn approach allows organizations to move quickly while managing risk and resource constraints. Peer networks are also critical in this process. When evaluating new vendors or solutions, I regularly connect with my network to compare experiences and gather feedback. In most cases, someone has already explored or piloted the tool. Leveraging this network helps me identify what's working, what isn't, and where others have seen meaningful results.

Infrastructure and operations are increasingly table stakes for IT. You must be able to do those well, but the most meaningful work for me personally, is partnering with the business to drive the company forward. The better you understand how the business works and what it's trying to accomplish, the better you can help eliminate friction and move the needle – whether that's through process or technology.

Diana Villanova

Head of Patient Services and Market Access

Catalyst pharmaceuticals

I have worked across different pharma companies in my career, and Catalyst stands out not just for their patient services programs but for being a company that truly walks the walk. Our "no patient left behind" motto is woven into the fiber of every single employee. It's powerful knowing that we are going to stand behind a patient no matter what.

We have three assets in the neurology space: two are neuromuscular and one is ultra-rare. My Patient Services team supports both our Lambert-Eton Myasthenic Syndrome (LEMS) and Duchenne Muscular Dystrophy (DMD) assets. In the rare and ultra-rare space, it's all about education. When people are diagnosed with ultra-rare diseases, it is typically life altering and there's no real playbook for what to expect.

We focus on education every step of the way, from access education to cost and affordability education. Paying for a drug is always top of mind, and the experience of working with a Specialty Pharmacy is often new for patients and families. From there, we focus on connecting and fostering a sense of community. Their world has changed, so helping to create a new sense of community with advocacy groups or other patients is key to building a program that goes above and beyond.

The model depends on the disease state that you're in, as well as the class of products and broader competitive landscape. Our patient support program has Patient Access Liaisons (PALs) that wear two hats. They act as clinical coordinators and Field Reimbursement Managers (FRMs), working with both patients and providers, which is something we're seeing more and more across the industry.

One of our assets is the only approved drug in its class, so PALs spend more time working with patients. On the other, PALs are wearing both hats every day because utilization management at the payer layer becomes critical in a crowded space. This requires a deep understanding of what access is going to look like and what prior authorization or step-through criteria is required to help support getting patients onto therapy quicker.

The benefit of either an insourced or a hybrid model is that the manufacturer can control the patient experience. Having a patient-facing role that is the primary point of contact enables greater continuity of care.

With external HUB vendors handling more administrative things, our employees can focus on driving higher-quality patient and provide interactions, whether that's welcoming them to the program or serving as the primary point of contact for reimbursement support or adherence calls.

We want to drive more successful patient outcomes, which requires data and visibility. The more visibility you have into the patient journey, the more you're able to understand where your patients are getting stuck to intervene more strategically and minimize any road bumps.

There is the adage that if you've seen one patient services program, you've seen one patient services program. One size does not fit all, so it's critical to weigh innovation happening in the industry against your specific patient population and whether it will resonate.

I am constantly paying attention to what's new, evaluating new solutions, and thinking about how to optimize my programs with emerging technology. Will it fit here? Are we ready for it today? If we're not ready for it today, what do we need to do to get ready for it tomorrow? You need to understand what's out there and assess it against your unique program and patient population.

3

Appendix:

Methodology and Demographics

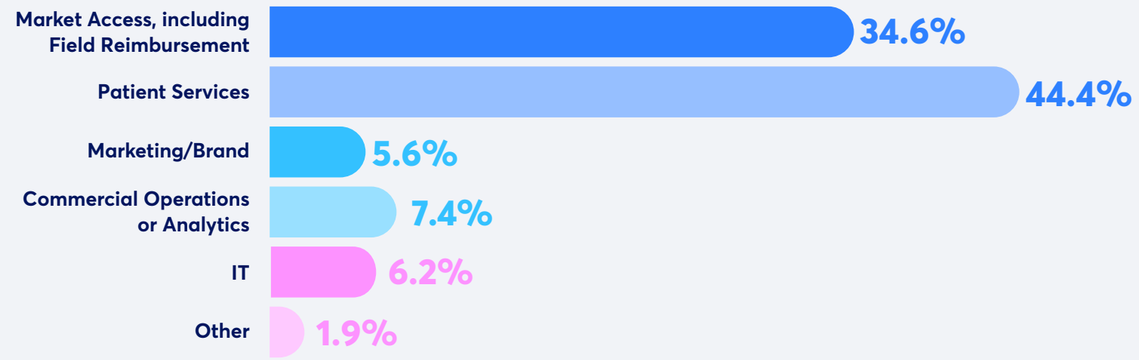
CourierHealth

Methodology and Demographics

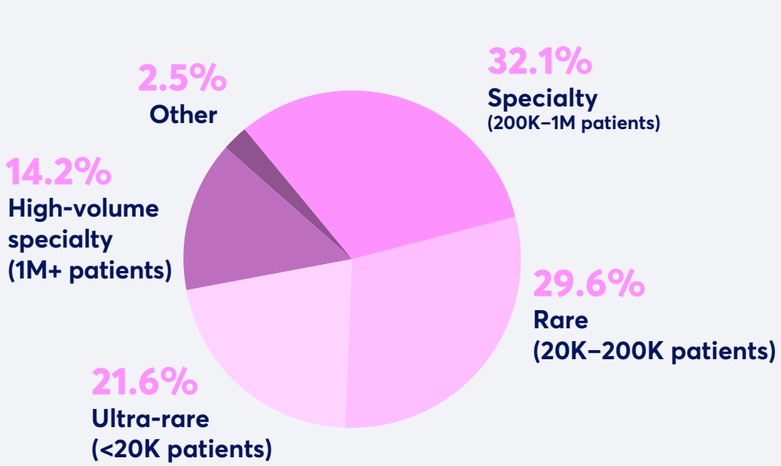
This survey was conducted online from January 13, 2026 to February 3, 2026. It included 25 questions about program performance, operational priorities, innovation investments, and AI adoption.

Our **162 respondents** from **87 unique companies** consisted of professionals currently working at biopharma manufacturing companies, including Courier Health customers and non-customers.

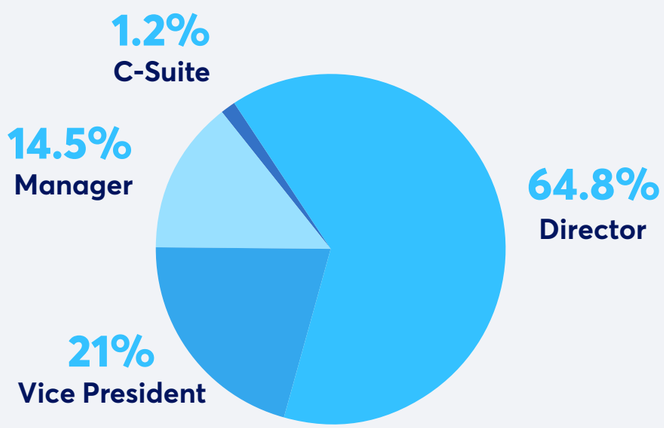
Job Functions



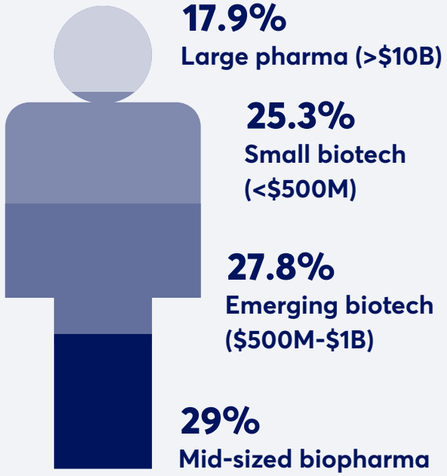
Product Types



Seniority Levels



Company Size



Therapeutic Areas

About CourierHealth

Courier Health is a New York City-based technology company on a mission to improve the patient experience for hundreds of millions of people living with a chronic condition or rare disease. Companies that choose Courier Health are achieving double-digit improvements to patient starts, time-to-start and ongoing adherence to life-altering therapies.

As host of the invite-only Patient Innovators Summit and publisher of *The State of Patient-Centricity in Biopharma* report, Courier Health develops and delivers the fastest-growing patient experience solution for the life science industry. Courier Health is backed by leading investors, including Norwest Venture Partners and Work-Bench.

3rd Annual Patient Innovators Summit

October 6, 2026 • New York City