

Convenience Wins: How DTP Is Reshaping the Pharma Commercial Model

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The Direct-to-Patient (DTP) cash model is not new. Historically, however, cash-pay programs were primarily deployed for branded products lacking preferred payer coverage.

Today, that paradigm is shifting. Several converging market dynamics are positioning DTP not as a niche solution, but as a strategic imperative for any product that falls within a reasonably affordable price range and a relevant therapeutic category. Understanding how and why this shift is occurring is critical to anticipating what it means for manufacturers moving forward.

01: Strategy Must Evolve as Expectations Standardize

The first major dynamic reshaping the market is the rise of convenience as a dominant consumer expectation. Across nearly every sector, convenience has become the baseline standard. Digital-first companies offering app-based experiences, home delivery, and automated services have redefined how consumers engage with products and services.

Platforms such as Amazon, Uber, and DoorDash have trained customers to expect frictionless access, and offerings that lack these capabilities increasingly feel outdated. Healthcare is not immune to this expectation shift.

This raises a critical question: how does the consumer demand for convenience translate into pharmaceutical access?

Historically, healthcare has operated under distinct service expectations, yet patients are consumers first, and convenience is increasingly shaping their healthcare choices. The widespread adoption of telehealth has already redefined patient-provider interactions. Extending that same frictionless experience to medication access is the logical next evolution. As a result, Direct-to-Patient channels are no longer simply alternative access options; they are rapidly becoming competitive requirements and, in many cases, baseline patient expectations.

02: Policy Shifts Redefine Commercial Strategies

A second dynamic accelerating this trend is the evolving policy environment. Current Administration initiatives aimed at lowering prescription drug costs, including Most Favored Nation (MFN) pricing strategies and the rollout of the TrumpRx platform, introduce external pressures that may further incentivize or even require manufacturers to establish DTP offerings for certain products.

While rare disease therapies may be less immediately impacted, branded retail and specialty products are squarely within the zone of influence. This is a development the industry cannot afford to ignore. A growing share of the top 20 pharmaceutical companies have already committed to participating in TrumpRx, with industry leaders such as Pfizer and Johnson & Johnson setting the pace. Patient access has never been simple, but if current trajectories continue, Direct-to-Patient offerings will soon become a baseline requirement for competitive brand launches, mirroring the evolution of copay cards and patient assistance programs from value-add services to standard access infrastructure.

<https://www.pharmexec.com/view/president-trump-announces-nine-more-trumprx-participants>

03: Legacy Access Models are No Longer Sufficient

To reinforce this paradigm shift, a third dynamic is taking shape: how direct-to-patient (DTP) models both resolve and create friction with payors. Market access has long been the central driver — and constraint — of pharmaceutical affordability and access. By bypassing payors and traditional pharmacy channels, DTP models disrupt established distribution and reimbursement structures.

Yet this disruption raises a critical question: how will payors respond? Coverage limitations, reimbursement pressure, or retaliatory benefit design changes may emerge as payors attempt to reassert control over transactions that still rely on conventional adjudication. The outcome of this evolving tension will shape the next phase of pharmaceutical access.

The question is no longer whether DTP belongs in the access strategy toolkit. The question is how quickly it becomes indispensable.

Ty Hess Bio

Ty brings more than a decade of experience across multiple functions within the pharmaceutical and healthcare services sectors. Prior to joining Neovance, he played a key role in developing some of the industry's earliest digital patient access and cash solutions at PHIL, followed by

broader work on innovative channel models at Blue Fin Group. As Vice President of Commercial Strategy at Neovance, Ty's background and experience provide a unique perspective on emerging access models, including Direct-to-Patient (DTP).