Task 9.2 Key activities at European level

AIM4ALL: REIMAGINING ACCESS TO LIFESAVING MEDICINES THROUGH TRUST, COLLABORATION, AND COURAGE

A THCS EOSYSTEM CASE STUDY

Version 1.0

WP9

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CASE STUDIES OF TRANSFORMATIVE ECOSYSTEMS

Case Study: AIM4ALL – Reimagining Access to Lifesaving Medicines Through Trust, Collaboration, and Courage

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DISCLAIMER

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EXECUTIVE SUMMARY

AIM4ALL is reshaping one of the most entrenched problems in modern healthcare: how to get breakthrough, often life-saving medicines to the patients who need them, when they need them. Not years later, and not only if their health system can afford to take a risk. In a field long dominated by adversarial negotiations between payers and manufacturers, AIM4ALL introduces something radical: **A SAFE, TRUSTED, CONFIDENTIAL LIVING LAB** where all actors can work together to test new pricing and reimbursement models without fear of unintended consequences.

The need is undeniable. Europe faces a surge of highly specialized therapies: from personalized medicines to CAR-T (Chimeric Antigen Receptor T-cell) treatments that can turn near-certain death into remission for up to half of patients. Yet the systems deciding access still rely on incomplete evidence, inconsistent datasets, financial caution, and outdated negotiation structures.

"Access today isn't based on patient need, it's based on willingness to pay," the interviewee noted.

AIM4ALL exists to change exactly that.

What makes AIM4ALL transformative is not a single tool, dataset, or contract model but the **ECOSYSTEM** it builds. Policymakers, payers, clinicians, researchers, patient groups, and manufacturers collaborate under one umbrella, guided by a convener with no vested interest. It required senior ministerial support, years of relationship building, and the humility to **ACCEPT THAT EXPERIMENTS WILL FAIL.**

In the words of the interviewee: "If something doesn't work, we pause and reset the dials."

This approach-built trust. It allowed stakeholders to co-design a standardized dataset for innovative therapies, using Scotland's existing ICT infrastructure rather than expensive new systems. It created ownership. It made innovation feel safe. And it replaced a transactional mindset with what the interviewee calls a **"MARRIAGE OF EQUALS"**: a partnership model where everyone gains and patients finally sit at the center of the process.

AIM4ALL is still young, a **"TODDLER,"** as described, yet it has already delivered proof that transformation is possible: data standardization, synthetic-data pilots, multi-stakeholder governance, and a clear pathway toward real-world deployment within one to two years. Momentum is building, and the call is now to Europe: more innovators, more systems, more "critical friends" willing to join this journey.

In short: AIM4ALL shows that when trust is built, evidence is shared, and collaboration replaces confrontation, access to innovative medicines can become faster, fairer, and finally anchored in patient need. Transformation stops being theoretical and becomes something you can feel in the real world, one life at a time.

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1 INTRODUCTION

In 21st-century healthcare, the greatest breakthroughs often come with the greatest dilemmas. Across Europe, life-transforming medicines are arriving faster than ever before: highly specialized therapies for rare and aggressive diseases, often with spectacular clinical outcomes, yet carrying price tags that leave health systems uncertain, cautious, and slow to act.

Meanwhile, patients wait. And for many, waiting is simply not an option.

For decades, access to innovative medicines has been shaped by an adversarial negotiation: manufacturers seeking a fair return, payers protecting limited budgets, health systems hampered by data gaps, and clinicians and patients left on the margins.

As the interviewee put it: "Access to medicines today is not based on patient need, it's based on willingness to pay."

AIM4ALL set out to change that.

2 A DIFFERENT KIND OF SOLUTION FOR A DIFFERENT KIND OF PROBLEM

AIM4ALL is a Scottish-led initiative that created something Europe had never seen at this scale: a **trusted, confidential, data-ready Living Lab** where new pricing and reimbursement models for high-cost, high-impact medicines can be safely tested. Without political fallout, without financial fear, and without risking patient care.

It is a place where experiments are allowed to fail, because failure is part of learning. A place where every actor, manufacturers, payers, clinicians, researchers, patients, can finally sit at the same table and build a shared path forward.

The interviewee described this shift clearly:
"We needed a safe environment where everyone could agree how these services should be built, developed, and evolved."

This is the heart of AIM4ALL:

- **replace confrontation with collaboration,**
- **replace fear with evidence,**
- **replace scarcity thinking with patient-centered innovation.**

3 WHY AIM4ALL WAS NEEDED NOW

The context is stark:

- A rising wave of personalized therapies, including gene and cell therapies.
- Extraordinary clinical outcomes such as CAR-T (Chimeric Antigen Receptor T-cell) therapies reversing the life course of myeloma patients, turning near-certain premature death into remission in up to 50% of cases.
- They receive regulatory approval following their Phase III clinical trials, and rather than entering another cycle of academic research through Phase IV clinical trials, they move directly into clinical practice. This creates a range of challenges around data quality.
- No agreed datasets, inconsistent decision criteria, and wildly divergent national rules.

European systems were simply not built for medicines that cure rather than treat. They were built for a different era with lower prices and slower innovation. AIM4ALL is the bridge between yesterday's systems and tomorrow's medicines.

4 FROM ADVERSARIAL TO PARTNERSHIP: BUILDING THE ECOSYSTEM

Transformation began with one essential condition: **an independent convener with no vested interest.** Scotland's National Innovation Center for Digital Health and Care stepped into that role. Not as buyer, seller, or regulator, but as a trusted third space.

This enabled something rare:

- Honest conversations.
- Real collaboration.
- Shared responsibility.

The interviewee shared the core philosophy behind AIM4ALL: "Transformation means creating mutual understanding and respect; with the patient at the center."

The work required patience and diplomacy.
Senior policy support was essential: ministerial approval was needed just to begin discussions between payers and manufacturers. But bottom-up support mattered just as much: clinicians, health technology assessment (HTA) experts, ICT teams, and patients all needed to **feel ownership**.

And yet, slowly, alignment emerged.
Why? Because, as one participant put it,

"Everyone recognized the current process wasn't serving anyone well."

5 LEARNING BY DOING: THE AIM4ALL WAY

Nothing about AIM4ALL was built on theory alone.
Every stage was shaped by real-world experiments:

5.1 Standardizing the Data

No country had a shared dataset for CAR-T or similar therapies. Not Scotland. Not anyone.
So AIM4ALL convened pharmaceutical companies, academic researchers, health technology assessment (HTA) bodies, clinicians, and patients to agree on one.

The first workshop produced **147 data points**. That was too many. The second workshop distilled what truly mattered for:

- research,
- day-to-day treatment,
- procurement decisions.

This was system change in action.

5.2 Using What Already Exists

Rather than building new systems, AIM4ALL adapted Scotland's existing ICU infrastructure to automate the clinical pathway and aggregate data from diverse sources into a single trusted environment.

This mattered for two reasons:

1) It kept costs down.
2) It made clinicians feel the system was theirs, not imposed.

The interviewee noted the effect: "People felt heard. They felt ownership. That made all the difference."

5.3 Accepting Uncertainty, Together

AIM4ALL treats innovation as partnership and is willing to take risks:

"We said at the start: we will get this wrong. And when we do, we pause, reset the dials, and move forward together."

6 PIONEERING A NEW MODEL FOR EUROPE

AIM4ALL is reshaping how Europe thinks about access to innovative medicines:

1) A marriage of equals

Manufacturers, payers, researchers, and clinicians learn side-by-side.
Not as adversaries, but as partners.

2) A living lab

This environment is designed to evolve, expand, and absorb new therapies, new data, and new contracting models.

3) A shift toward structured reimbursement

Innovative pricing approaches, such as structured reimbursement, allow:

- better revenue stability for manufacturers,
- more predictable budgets for health systems,
- faster access for patients.

4) Momentum with real achievements

AIM4ALL has already:

- Standardized datasets across Scotland
- Demonstrated secure data sharing using synthetic data
- Built a digital proof-of-concept
- Prepared the groundwork for real-patient data collection in the next phase
- Attracted parliamentary interest and multi-stakeholder engagement

The initiative is only in its **“toddler stage,”** as the interviewee put it,
but it is already walking with purpose.

7 THE HUMAN CORE: WHY IT MATTERS

AIM4ALL is not about policy frameworks or contracting models.
It is about the people who cannot wait years for health systems to adjust.

Patients with rare diseases.
Parents who will try anything for one more month with their child.
Clinicians who finally have therapies that work. If only their system could afford them.

AIM4ALL gives them something that was missing:
a path forward.

8 A CALL TO EUROPE

The interviewee phrased it clearly: "We're on a journey and we need more people willing to join."

Healthcare is becoming a global sport, and no country can afford to solve the affordability challenge alone. AIM4ALL demonstrates a way forward that is collaborative, pragmatic, and grounded in mutual respect.

It does not ask Europe to copy Scotland's system.

It offers Europe a model for how to learn. Together.

9 A LOOK AHEAD: FROM EARLY STAGES TO SYSTEM-LEVEL CHANGE

As mentioned before, AIM4ALL is still in its "toddler stage," but the path ahead is unmistakably ambitious.

The next two to three years aim to deliver a real-world, end-to-end solution using live patient data, building on the proven ability to standardize datasets, share synthetic data safely, and convene all actors around a common purpose.

The interviewee's greatest hope is to keep the momentum alive and to avoid slipping back into old conversations that lead nowhere and instead continue the "learn by doing" cycle that has defined AIM4ALL from the start.

More jurisdictions, more manufacturers, and more "critical friends" across Europe will be essential. As healthcare becomes a global sport, no country can remain in its own ivory tower. Collaboration, patience, and honest partnership will determine whether AIM4ALL grows from a promising initiative into a new standard for accessing innovative medicines across Europe.

10 WHY AIM4ALL EXEMPLIFIES THE THCS UNDERSTANDING OF A TRANSFORMATIVE ECOSYSTEM

AIM4ALL embodies the THCS definition of a transformative ecosystem because it **shifts an entire system from adversarial negotiation to collaborative problem-solving.**

It brings together policymakers, manufacturers, clinicians, health technology assessment (HTA) bodies, researchers, and patients in a **trusted environment** where innovation can be tested safely, evidence can be shared openly, and decisions can be made **with the patient, not the price tag, at the center.**

It aligns strategic goals across actors who historically pulled in different directions, standardizes data and processes to create coherence, uses existing infrastructure to ensure sustainability, and embraces **"learning by doing"** as a core cultural principle.

Most importantly, AIM4ALL builds **legitimacy through acceptance**: senior policy buy-in, bottom-up ownership, and a willingness among all parties to pause, reset, and continue the journey together.

This is **system transformation in practice**: evolving mindsets, structures, and relationships so that faster, fairer access to innovative medicines becomes not an exception, but a new normal.

11 A FINAL WORD FROM THE INTERVIEWEE

A quote that captures the essence of this ecosystem:

"Transformation is a process, and we'll get parts of it wrong. When that happens, we step back, rethink, and realign. What matters is that we keep moving, keep learning, and keep working together so patients get the medicines they need, when they need them."

AIM4ALL proves clear determination backed by collective courage, shared responsibility, and a pathway that can reshape access to medicines across Europe.

In short: AIM4ALL stands as a place where trust replaces fear, data replaces assumptions, and collaboration replaces confrontation. All to ensure that Europe's most advanced medicines reach the people who need them most, not someday, but soon. And that makes it a real beacon ecosystem.

12 ABOUT AIM4ALL:

Origins: AIM4ALL emerged in recent years in response to Europe's escalating medicines costs and the rise of personalised therapies. The interviewee describes the initiative as being in its "toddler stage," with the foundational structures now firmly in place.

Financing: It operates under a research and development umbrella, allowing sensitive experimentation without triggering procurement constraints, and relies on Scotland's existing digital health infrastructure rather than new expenditures.

Participants: AIM4ALL brings together all major actors — manufacturers, payers, HTA bodies, clinicians, ICT specialists, academic researchers, and patient groups — convened by Scotland's national innovation centre for digital health and care

Evidence criteria: Solutions move toward routine care through a jointly defined, standardised dataset, automated real-world data collection across the entire clinical pathway, synthetic-data pilots, and eventually live patient data to validate clinical value, service impact, and procurement relevance.

Sources:

This case study is based on an in-depth, guided interview with an AIM4ALL representative on December 5th, 2025. Additional sources include the company's website mentioned below.

Recommended Link:

AIM4ALL Website: https://www.dhi-scotland.com/projects/aim4all

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