Alcimed

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USER GUIDE eMAP



Introduction

eMAP is a new web-based solution which replaces two older solutions, eVAL and MAP, used by the Market Access and Policy Country and Regional MER and CER colleagues, as well as by the Global Teams.

As its preceding solutions, eMAP stores public information about most of the National Immunization Programs from Europe, with the purpose of providing a quick, one-stop shop access to user-defined filtered information, used for guiding strategic business analysis and decisions for Vaccines franchise.

The information is being provided by designated country Points of Contact from Market Access or Policy teams.

eMAP is accessible to all MSD employees through web navigators* for viewing the information. A username and a password, allocated by the eMAP administrator, are required to edit the information, with different levels of access privileges: Admin (Edit all), Super-users (Country Points of Contact can edit only own country data)

Features

A) Landing page

The landing page consist of an interactive **map view** with filtering options.



Landing page content and features:

 Hovering over a country provides access to generic information about it, such as population and healthcare expenditures. Clicking on a country opens a new page called "Country Card". This mode is accessible also by clicking on "Country Cards" button on the right-side panel (see Chapter A, point 4)



2. Clicking on "Filters" button on the upper left corner of the screen, provides access to a Filtering Panel, containing five main categories of filters (Program information, cohort details, recommendation details, public funding and delivery framework). Each category can be expanded to display filtering options. Applied filters are cumulative and will highlight the corresponding countries on the Map View and provide vaccination programs details in the Table View.



- a) Program information: Country Name, **Disease**, Country Population
- b) Cohort details: Age Range (sliding bar), Gender (drop-down list), Cohort Type (drop-down list), Risk Factors (search by key words)
- c) Recommendation details: Vaccines names (drop-down list), Number of doses (drop-down list), Ongoing recommendation (drop-down list), HTA decision (drop-down list), Recommendation body (drop-down list), Type of recommendation (drop-down list)
- d) Public Funding: **Public funded** (drop-down list), Public Funding source (drop-down list), Funding Level (sliding bar)

e) Delivery framework: Point of Vaccination (multiple-choice drop-down list), Procurement Type (drop-down list)

Filters can be cleared by clicking on "Clear Filters" button on the top of the Filtering Panel.

3. A toggle button, on the upper right corner, allows switching from the Map View to a Table View, containing all vaccination programs** data (see details in chapter B), and back.

| | Program | Information | | Coh | ort Details | | | | References | | |
|----------------------|---------|----------------------------------|--|-----|----------------------------------|--------------------------------------|-------------------------------|--------------------------|----------------------------------|------------------------|------------------------------|
| ID Country Disease S | | Age Start _O | Age Age Gender Ty Start _① End _② Gender Co | | Type of Cohort ₍₁₎ | Vaccines Recommended _O | Public Funded _O | Public Funding Source | Procurement Type _© | Last update | |
| 101 | Belgium | Diphtheria tetanus, pert More | 0 | 2 | All | Primary | Hexyon | Yes | Regional Payer | Regional tender | Last updated by fanu More |
| 102 | Belgium | Diphtheria tetanus, pert More | 0 | 2 | All | Primary | Vaxelis | No | | Out-of-Pocket | Last updated by fanu More |
| 103 | Belgium | Diphtheria tetanus, pert More | 0 | 2 | All | Primary | Vaxelis | Yes | Regional Payer | Regional tender | Last updated by fanu More |
| 104 | Belgium | Diphtheria tetanus, pert More | 0 | 2 | All | Primary | Hexyon | No | | Out-of-Pocket | Last updated by fanu |
| 105 | Belgium | Diphtheria tetanus, pert More | 5 | 6 | All | Booster | dTaP-IPV | Yes | Regional Payer | Regional tender | Last updated by fanu |
| 106 | Belgium | Diphtheria tetanus, pert More | 15 | 16 | All | Booster | dTaP | Yes | Regional Payer | Regional tender | Last updated by fanu More |
| 07 | Belgium | Diphtheria tetanus, pert More | 13 | nan | All | Booster | dTaP | Yes | National Payer | National reimbursement | Last updated by fanu |
| 08 | Belgium | Diphtheria tetanus, pert More | 13 | nan | All | Booster | dTaP | Yes | Regional Payer | Regional tender | Last updated by fanu |
| 19 | Belgium | Diphtheria tetanus, pert More | 13 | nan | All | Booster | dTaP | No | | Out-of-Pocket | Last updated by fanu |
| 110 | Belgium | Diphtheria tetanus, pert | 0 | nan | Females | At-risk | dTaP | Yes | Regional Payer | Regional tender | Last updated by fanu |

4. Clicking on "**Country Cards**" button opens a new page called "**Country Card**". This mode is accessible also by clicking on any green country in the map.

Country cards content:

a) An overview of the country's healthcare systems and vaccination policies

| Back to the map | France | |
|---------------------------------------|---|--|
| Overview | | |
| Vaccine Calendars Access Archetype | The healthcare system in France is decentralized and based on a universal health insurance system, funded through contributions from employees. and the government. | |
| Best Practices | The government is responsible for overall regulation and supervises the French health insurance funds, while regional authorities manage and fund healthcare facilities and services. | Healthcare Expenditure Per Capita: 3807.0 € |
| France * | Healthcare services are highly accessible and are largely provided by private medical practitioners and hospitals. Patients are free to choose their primary care physician. | Total Healthcare Expenditure: 281,065 billions € Healthcare Expenditure (% GDP): 0.122 % |
| | France's vaccination system is one of the most comprehensive in the world, offering vaccines free of charge to all residents. Certain vaccines, such as those for children under 2 years old, are mandatory, while other vaccines are recommended across the life course for a variety of vaccine-preventable diseases. | Preventive Healthcare Expenditure: 5119 millions € Immunization Budget: Immunization funding per capita: 9,72€; Proportion of healtcare budget dedicated to immunization budget or expenditure: 0,32% |
| | Vaccines are administered by healthcare professionals, including doctors, nurses, and pharmacists, in various settings such as hospitals, clinics, community health centers, schools, and pharmacies. | |

b) Vaccine calendars, allowing for comparison of different diseases and countries, with a high level indication of funding (for details related to funding, access the Filtering panel on the landing page):

Proprietary

| Back to the map | 🚺 Fra | nce | | | | | | | | | | | | | | | | | | | |
|------------------------------------|----------------|-----------------------|------|---------|------|------|--------|---------|---------|--------|---------|--------|---------|---------|---------|---------|---------|--------|--------|--------|---------|
| Overview Vaccine Calendars | Select the nee | eded vaccine | s on | the le | əft. | | | | | | | | | | | | | | | | |
| Access Archetype Best Practices | | HPV I (years) 0 | 15 | ц 10 | 15 2 | 0 25 | 30 | 1 35 | 1 40 | 45 | I 50 | 55 | 1 60 | 1 65 | 1 70 | l 75 | I 80 | 85 | 90 | 95 | 100 |
| France × Select countries | | | | | | | | | | | | | | | | | | | | | |
| RPV × Select vaccines | | | | | | | | | | | | | | | | | | | | | |
| Legend : | | | | | | | | | | | | | | | | | | | | | |

c) Access archetype, describing countries' access pathways for vaccines:

| Overview Vaccine Calendars Access Archetype Best Practices Select countries Access archetype in France. ************************************ | Back to the map | France |
|---|------------------------------------|---|
| Vaccine Calendars Access Archetype Best Practices Select countries | Overview | |
| Access Archetype Best Practices France > Select countries Select countries | Vaccine Calendars | Access archetype in France. |
| France 1 At Paddom recommendation At Paddom recommendation | Access Archetype Best Practices | Optimized Instrumentation on including into two on including into |
| Select countries | France × | A Field decision Phase 2 3/0/c s setting A Field decision |
| | Select countries | Mar & andre demonstration of the scalar defaultion of the scalar default of the scalar d |
| | | |
| | | |

- d) Best practices, describing initiatives, access or policy measures which are considered examples of interventions driving public health outcomes through immunization. Users can submit use cases using "Submit Best Practice" button, which will be reviewed and approved by the system administrator.
- 5. By clicking on "Contact us" button, a contact form is available to send inquiries to the tool admin
- 6. "User guide" button will provide access to the current User Guide document

B) Table view

In table view, users will find the raw data on which the tool is based. This is also where updates can be made to specific data or entire programs.

1. A toggle allows user to switch between a **Minimal view** of the main information and a complete view, with full database details.

| ID | Country | Region | Disease | Age Start | Age End | Gender | Type of Cohort | Geographical Distribution | Risk Factors | Size of Cohort | Point of Vaccination | Immunization Recommendation Body | Reci | ¢ |
|-----|---------|--------|----------------------|--------------|------------|--------|-------------------|------------------------------|---------------------------------|-------------------|-------------------------|--|------|----------|
| 379 | France | EU 5 | HPV | 11 | 14 | All | Primary cohort | National | | 1 | GP, Pharmacy | MoH | | |
| 380 | France | EU S | HPV | 15 | 18 | All | Catch-up | National | | 1 | GP, Pharmacy | MoH | | Map View |
| 381 | France | EU S | HPV | 19 | 26 | Males | At-risk | National | MSM | 1 | GP, Pharmacy | MoH | | table |
| 382 | France | EU 5 | HPV | 9 | 10 | All | At-risk | National | Children candidates for More | 1 | GP, Pharmacy | MoH | | |
| 383 | France | EU 5 | Pneumococcal Disease | 0 | 1 | All | Primary cohort | National | | 1 | GP, Pharmacy | MoH | | |
| 384 | France | EU 5 | Pneumococcal Disease | 0 | 0 | All | Catch-up | National | | 1 | GP, Pharmacy | MoH | | |
| 385 | France | EU 5 | Pneumococcal Disease | 1 | 0 | All | Catch-up | National | | 1 | GP, Pharmacy | MoH | | |
| 386 | France | EU 5 | Pneumococcal Disease | 0 | 0 | All | At-risk | National | Prematured children | 1 | | MoH | | • |
| < | | | 1 | | | | | | | | | | • | |
| | | | | | | | | | м | inimal Vie | | Export to Ex | cel | 🔁 MSD |

2. For all users, **right-clicking on any data** will allow them to flag a mistake and send an inquiry to the tool Admin with an enclosed comment.

| | Genera | | | Cohr | ort Details | | | |
|-----|---------|---------|-------------|---------------|-------------|----------------------|--|---------|
| | Country | Disease | Age Star | Age rt End | Gender | Type of Cohort | Immunization Recommendation Body | Vi R |
| 721 | Norway | HPV | 12 | 13 | Ali | Primary cohort | Public Health Institution | G9 |
| 800 | Poland | HPV | 11 | Flag | a mistake | 1 | | G4 |
| 801 | Poland | HPV | 13 | Describe | the mista | ke Ip | | G4 |
| 813 | Poland | HPV | 15 | Subm | it Mistak | a 19 | | G4 |
| 814 | Poland | HPV | 18 | 70 | ~ | Cattoridp | | G4 |

3. Hovering over the table header will display definitions of the respective field:

| | Program | Information | | Coh | ort Details | | | Prog | ram Details | | References |
|----|---------|----------------------------------|--------------|------------|-------------|-------------------|--|---|---------------------------------------|------------------------|-------------------------------|
| ID | Country | Disease | Age Start | Age End | Gender | Type of Cohort | Vaccines Recommended | Public Public Funding Funded Source | | Procurement Type | Last update |
| 0 | Albania | Pneumococcal Disease | 0 | 1 | All | Primary | Catch-up: Vaccination of indiv vaccination; Booster: Vaccination of indiv | : Vaccination of individuals who missed primary ion; Vaccination of individuals targeted to receive | | | By s_valente on the 3 More |
| 1 | Albania | Pneumococcal Disease | 64 | 100 | All | Age-based | additional doses of a vaccine primary vaccination; At-risk: Groups of individua exposure or dealogment of a | schedule, after | receiving the sed likelihood of | Out-of-Pocket | By fanut_morosan on More |
| 30 | Austria | Pneumococcal Disease | 0 | 1 | All | Primary | chronic disease; High-risk: Groups of individua are at a particularly high risk | ils, a subset of at | -risk groups, whonyer es and often | National tender | By fanut_morosan on More |
| 31 | Austria | Pneumococcal Disease | 0 | 2 | All | Catch-up | require more urgent or specia Typically including immunoco Age-based: Vaccination o age; | By fanut_morosan on More | | | |
| 45 | Austria | Human papillomavirus (HP More | 9 | n | All | Primary | G9 Yes National Payer National tend | | | | By fanut_morosan on More |
| 46 | Austria | Human papillomavirus (HP More | 12 | 17 | All | Catch-up | G9 | Yes | National Payer | National tender | By fanut_morosan on More |
| 47 | Austria | Human papillomavirus (HP More | 18 | 21 | All | Catch-up | G9 | Yes | National Payer | National reimbursement | By fanut_morosan on More |
| 48 | Austria | Human papillomavirus (HP More | 22 | 27 | All | Catch-up | G9 | No | | Out-of-Pocket | By fanut_morosan on More |
| 49 | Austria | Human papillomavirus (HP More | 27 | 45 | All | Catch-up | G9 | No | | Out-of-Pocket | By fanut_morosan on More |
| 50 | Austria | Human papillomavirus (HP | 18 | 45 | Females | At-risk | G9 | Yes | National Payer | National reimbursement | By fanut_morosan on |

- 4. "Edit Table" button enable access to Super-User mode
- 5. **"Exported to Excel"** button: an Excel file will be generated with the data displayed corresponding to the current filtering options

C) Super-User mode

The interface for data editing is accessible to Super-Users only, by clinking the "Superuser interface" button.

Access credentials (username - under the form of the MSD email address - and password) are requested.

The initial password will be communicated by the Admin. The Super User will be prompted to change the initial password at first login.

Super-users can **edit**, **add**, **or delete** a program by toggling to the **Table view** and then by clicking on the **"Edit Table" button**.

They are responsible for the quality and accuracy of the input data. Each modification is tracked and requires approval from the tool Admin before being updated into the main table.

| Manage P | rogram | IS | | | | | | | × |
|-------------|----------|---------|--------|-----------------------|-----------|---------|--------|-------------------|----------|
| Edit Table | Add a pr | ogram | | | | | | | |
| Action | ID | Country | Region | Disease | Age Start | Age End | Gender | Type of Cohort | Geograph |
| Edit Delete | 0 | Albania | SEE | BCG | 0 | 0 | | | |
| Edit Delete | 1 | Albania | SEE | DTaP-IPV- Hib-HepB | 0 | 0 | | | |
| Edit Delete | 2 | Albania | SEE | DTaP-IPV- Hib-HepB | 0 | 3 | Male | | Nationa |
| Edit Delete | 3 | Albania | SEE | DTaP-IPV- Hib-HepB | 0 | 0 | | | |
| Edit Delete | 4 | Albania | SEE | DTwP | 2 | 3 | | | |
| | 4 | Albania | SEE | DTwP | 2 | 3 | | | • |

| age Programs | × | 4 | Group | | Remove Group | |
|---------------------|------------|---|-------------|---|--------------|--|
| Table Add a program | ~ <u>r</u> | | 62 | 2 | Remove | |
| General Information | | | Add Vaccine | | | |
| Country: Albania | | | AND | | | |
| Disease: | | | Group | | Remove Group | |
| aP | | | G9 | | | |
| Cohort Details | | | | - | Remove | |
| 0 | | | OR | | | |
| Arta Endi | | | G4 | 2 | Remove | |
| Add a Program | | L | | | Save Changes | |

When a modification is approved or rejected by the tool Admin, the super-user receives a notification visible in the bell icon on the homepage.

Minimum data fields required when **adding a new program** appear marked in red when attempting to save incomplete information.

It is the responsibility of the super-user to regularly update the country's best practices on the country card page.

D) Admin mode

The Admin has overall responsibility for the dataset on which the tool is based. They have full rights to the data and are responsible for approving or rejecting any changes made by a super-user.

Additionally, the Admin is responsible for regularly saving the data table by exporting it to Excel once

every six months.



On the home page, the tool Admin receives notifications. By clicking on the details, they are directed to a backdoor administration page where it is possible to approve, disapprove, save, or delete any inquiry.



| | Site administrati | on | | | | |
|------------------------|-----------------------|--------------------|--------------------------|-----------------|--|-------------------------|
| | AUTHENTICATION AN | D AUTHORIZATION | | | Decent estima | |
| | Groups | | + Ado | d 🕜 Change | Recent actions | |
| | Users | | + Ado | d 🥜 Change | My actions | |
| | MSD | | | | Addition by pbruss 15 Pending addition | art on 2024-07- |
| | Contact messages | | + Ado | d 🥜 Change | X Addition by guest1 | on 2024-07-21 |
| | Mistake reports | | | 🖋 Change | × Addition by guest1 | on 2024-07-22 |
| | Pending additions | | + Add | d 🥜 Change | Pending addition | |
| | Pending best practice | 25 | + Ado | d 🥜 Change | Addition by guest1 Pending addition | on 2024-07-23 |
| | Pending changes | | + Ado | d 🥜 Change | × Addition by guest1 | on 2024-07-23 |
| | Pending deletions | | + Ado | d 🕜 Change | × Addition by guest1 | on 2024-07-23 |
| | | | | | Pending addition X Addition by guest1 | on 2024-07-23 |
| | | | | | Pending addition | |
| | | | | | X Addition by guest1 Pending addition | on 2024-07-24 |
| | | | | | | |
| UTHENTICATION AND | AUTHORIZATION | | | | | |
| Groups | + Add | Select pending add | lition to change | | | ADD |
| Jsers | + Add | Action: | ✓ Go | 1 of 1 selected | | FILTER |
| | | | CREATED AT | APPROVED | REJECTED | By user |
| MSD | | m hultstrand | Aug 27 2024 9.12 am | 0 | 0 | All |
| Contact messages | + Add | - In_nutstrand | Aug. 27, 2024, 3.12 a.m. | U | 0 | b_sterner e_dalakaki |
| Aistake reports | | 1 pending addition | | | | f_susini_poulet |
| ending additions | + Add | | | | | fanut_morosan |
| Pending best practices | + Add | | | | | guest1 |
| anding show produces | - A | | | | | guest2 i vasiliu |
| rending changes | T Add | | | | | j_willingham |
| Pending deletions | + Add | | | | | l_starc |
| | | | | | | lucija_starc |
| | | | | | | m_hultstrand |

The tool Admin needs to regularly delete all pending modifications to remove them from the superuser notification system. Once a month is suitable, although initially, due to the initial data loading, the frequency may be higher to clear the interface.

Adding super users

The tool Admin can create new superusers on demand (*possibly coming from the "Contact us*" *button from the homepage*).

To do so, just change tool web address from */map/* to */admin/* and get redirected toward main side administration page where user gestion is handled.



Then simply Add a new user first with username and password then with regional options.

| | | PROFILE |
|-------------------------------|--|----------------------|
| | | Profile: #1 |
| Add user | | Must change password |
| First, enter a username and p | assword. Then, you'll be able to edit more user options. | Countries: |
| | | Albania - SEE |
| Username: | | Austria - MER6 |
| | | Belgium - MER6 |
| | Required, 150 characters or fewer. Letters, digits and @/,/+/-/_ only. | 🗆 Bulgaria - SEE |
| Desconde | | Croatia - SEE |
| Password: | | Cyprus - MER6 |
| | | Czech Republic - CEE |
| | Your password can't be too similar to your other personal information. | Denmark - Nordics |
| | Your password can't be a commonly used password. | Estonia - Baltics |
| | Your password can't be entirely numeric. | Finland - Nordics |
| | | France - EU 5 |
| Password confirmation: | | Germany - EU 5 |
| | | Greece - MER6 |
| | Enter the same password as before, for verification. | Hungary - CEE |
| | | |

GUIDELINES & DEFINITIONS

* The Brave browser presents some incompatibilities with the tool; please try not to use ** Program: in eMAP programs are the way to describe vaccine policies. A program is a list of data including:

- Program information: country, disease, and population
- Cohort details: age, gender, type of cohort, geographical distribution, and risk factors

• **Recommendation details:** vaccines, number of doses, ongoing status, HTA decision, immunization recommendation body, type of recommendation, starting year of the recommendation, last update of the recommendation

- Public funding: public funded, public funding source, public funding level, ongoing funding
- Delivery framework: Point of vaccination, and procurement type

| COHORT | A group of individuals described by age or risk factors, for which vaccination against a disease is recommended with a schedule of one or more vaccines and doses |
|----------------------------------|---|
| ID | A unique identification number automatically allocated to each cohort / entry in the database |
| AGE START | The lowest age at which individuals are eligible to receive the first dose of a vaccine schedule |
| AGE END | The highest age at which individuals are eligible to receive the last dose of a vaccines schedule |
| PRIMARY | Routine vaccination of individuals targeted to receive a specific vaccine schedule for the first time |
| CATCH-UP | Vaccination of individuals who missed primary vaccination |
| BOOSTER | Vaccination of individuals targeted to receive additional doses of a vaccines schedule, after receiving the primary vaccination |
| AT-RISK | Groups of individuals with an increased likelihood of exposure or development of a disease. Typically including chronic disease |
| HIGH-RISK | Groups of individuals, a subset of at-risk groups, who are at a particularly high risk of severe outcomes and often require more urgent or specialized preventive measures. Typically including immunocompromise |
| AGE-BASED | Vaccination of individuals defined only based on age, other than Primary |
| GEOGRAPHICAL | The administrative-territorial public health authority issuing the recommendation |
| RISK FACTORS | Factors which increase the risk of developing a disease or the severity of the disease |
| POINT OF VACCINATION | Type of institution where the vaccine is administered |
| IMMUNIZATION RECOMMENDATION BODY | The type of institution which issued the vaccination recommendation |
| VACCINES RECOMMENDED | A vaccination schedule comprises one or more doses of vaccine, administered in a particular order and interval. Alternative vaccination schedules are available when two or more different vaccines (or combinations thereof) can be used interchangeably. Brand names are available to select for diseases for which an MSD vaccine exists (e.g. Rotarix, Rotateq), and generic vaccines names are used for the rest (e.g. dTaP-IPV) |

| DOSES RECOMMENDED | The number of doses of each vaccine in the recommended schedule |
|------------------------|---|
| ONGOING RECOMMENDATION | Defines if a vaccination recommendation is current |
| PUBLICLY FUNDED | Reimbursement or funding from public sources (national or subnational) |
| HTA DECISION | Specifies whether a recommendation and/or funding was supported by an HTA typically submitted by the manufacturer of a given product |
| PUBLIC FUNDING SOURCE | The type of institution providing the funding of the recommended vaccination schedule |
| PUBLIC FUNDING LEVEL | The % of the cost of the vaccination scheme which is funded from public sources |
| PROCUREMENT TYPE | The predominant method for procurement of publicly funded vaccine |

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