Enhancing Payer Engagement Through Digital Dossiers: An Interactive Formulary Decision-Making Asset Complementing Traditional PDF Formats

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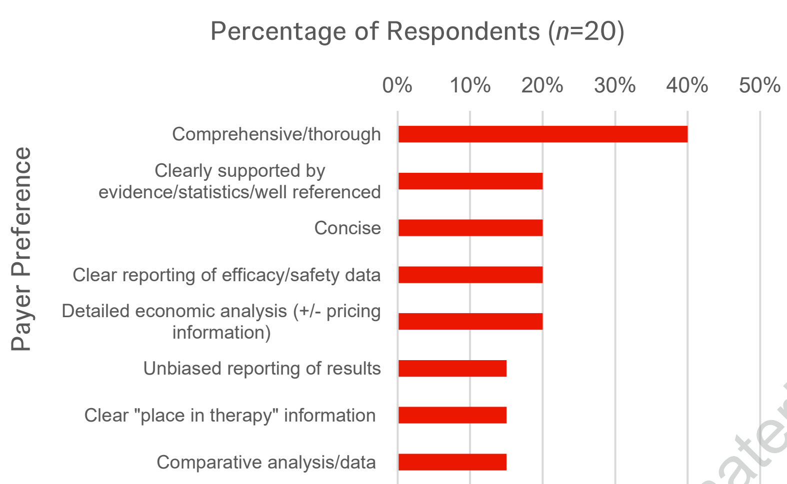
Background

AMCP dossiers are an essential asset used by population health decision makers (PHDMs) to evaluate the clinical, economic, and real-world value of therapies. Recent efforts to standardize the generation and use of real-world evidence (RWE)—including the AMCP Real-World Evidence Initiative and the publication of AMCP RWE standards outlining principles for integrating RWE into US payer decision-making—reinforce the need for transparent, accessible, and well-structured evidence resources.[i,ii] Traditionally delivered as static PDFs, these documents—often exceeding hundreds of pages—can be time-intensive to navigate. There is a growing demand for interactive, user-centric digital content that improves accessibility and speed of information retrieval. The AMCP Format 5.0 highlights the need for concise and streamlined presentation of evidence to support decision-making.[iii] In response to this, the Johnson & Johnson (J&J) Medical Information (MI) team developed digital, interactive, modular dossiers that maintain AMCP Format 5.0 standards while improving content clarity and engagement. The digital dossiers are reactive resources accessible via the J&J Medical Connect Payer Portal to verified US Payers and PHDMs.

TABLE 1: Overview of Static PDF vs Digital Dossier Structure

Feature	Static PDF	Digital Dossier
Navigation	Linear, scroll-dependent	Modular, clickable
Searchability	Manual	Search bar, quick links
Evidence Tables	Static	Interactive, expandable
Update Process	Requires new version	Modular updates
Device Accessibility	PDF viewer only	Multi-device, mobile-friendly

FIGURE 1: What Makes an Excellent AMCP Dossier[iv]



Changing Evidence Consumption Patterns Among PHDMs

Results from a 2023 survey of 949 HCPs showed that **80%** sought medical information online weekly, compared to 72% in 2022, underscoring the growing adoption of digital platforms and evolving content preferences.[v]

Previous Evidence-Access Era *(time-intensive)*

- Information dispersed across large, static documents
- Manual navigation and scrolling to find relevant content
- Sequential, linear review
- High time burden to identify key evidence

Modern Evidence-Access Era *(readily accessible)*

- Information available at the click of a button
- User-friendly interfaces that surface relevant content quickly
- Non-linear, targeted access to specific topics
- Evidence reviewed iteratively and on demand

Objectives

To assess the impact of complementing static PDF AMCP dossiers with digital dossiers by:

1) Comparing engagement metrics
2) Evaluating payer preferences
3) Identifying opportunities to inform future digital dossier creation and updates using insights & analytics from J&J Medical Connect

Methods

A retrospective analysis compared dossier engagement metrics between static PDF and digital dossiers from January–December 2025. Key metrics examined were the number of sessions, user counts, and highest areas of interest for digital dossiers. Findings were analyzed by the MI team to identify optimization opportunities while maintaining adherence to AMCP Format 5.0 standards.

Overview of Study Design

Identified PDF + digital dossiers for comparison → Extracted metrics from J&J Medical Connect analytics → Analyzed engagement trends Jan–Dec 2025 → Aggregated data/insights/trends by therapeutic area → Interpreted highest-interest sections

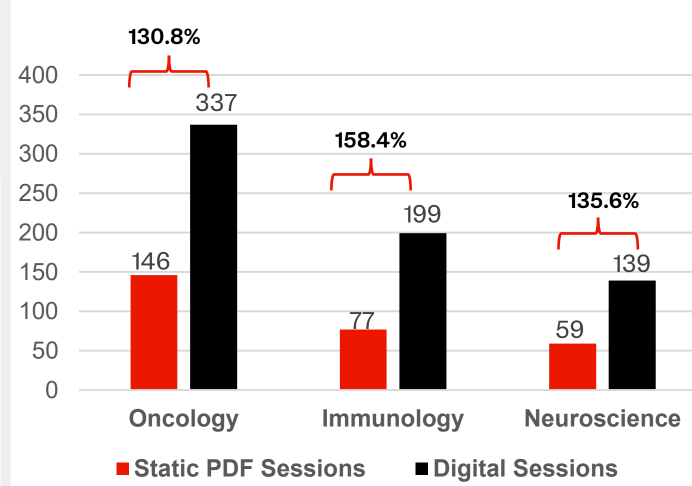
Results

Digital dossiers generated substantially greater engagement than static PDF dossiers across all therapeutic areas (TAs) evaluated. Analysis from January–December 2025 showed consistently higher session activity and a larger number of unique users for digital dossiers (Figure 2). The magnitude of engagement varied by therapeutic area, with digital formats demonstrating more than a twofold average increase in sessions compared with PDFs, as reflected by the percent difference (Table 2). The highest areas of interest within the digital dossier were the interactive evidence tables and epidemiology sections across therapeutic areas. Incorporating these insights during digital dossier creation allows for enhanced comprehension of the product value proposition.

TABLE 2: Static PDF vs Digital Dossier Engagement Across TAs

Therapeutic Area	Static PDF Sessions	Digital Sessions	% Increase Between Static PDF and Digital Sessions
Oncology	146	337	**130.8%**
Immunology	77	199	**158.4%**
Neuroscience	59	139	**135.6%**

FIGURE 2: Session Activity by Therapeutic Area: Static PDF vs Digital Dossiers (January-December 2025)



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Key Takeaway

Interactive digital dossiers showed more than double the level of PHDM engagement compared with traditional static PDFs—demonstrating that modern, user-centric evidence delivery could substantially impact how PHDM's access, explore, and utilize clinical and economic information to make formulary decisions.

Limitations

Factors that may have impacted results include:

- Access to resources required users to create a J&J Medical Connect account, which may have limited participation.
- Session counts may not have directly reflected engagement (e.g., repeat visits, brief or accidental sessions, multiple devices).
- Survey response volume remained low, limiting the ability to determine which sections users found most helpful for future improvements.

Conclusions

- Digital dossiers consistently outperformed static PDFs across all therapeutic areas evaluated, indicating strong user preference for interactive evidence formats.
- Analytics-driven insights provide an opportunity to continuously refine digital dossier frameworks, ensuring they remain aligned with evolving PHDM expectations and AMCP 5.0 guidance.
- Elevated interest in interactive evidence tables and epidemiology sections within the digital dossier underscore the value of prioritizing these components within digital builds.
- Variation in engagement by therapeutic area highlights the importance of tailoring digital dossiers to reflect the needs of each disease state.

Disclosure

Gehna Shah, PharmD is a Pharmaceutical Industry Post-Doctoral Fellow at Johnson & Johnson. Titi Kazeem, PharmD, Barry Steinzaig, PharmD, Rena Rai, PharmD, and Ashley Hu, PharmD are employees of Johnson & Johnson.

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