The United States Specialty Pharmacy Payor Landscape

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Background

• The TPG-National Payor Roundtable (TPG-NPRT) focuses on market access programs within the United States and is a subsidiary of The Pharmacy Group.
• The TPG-NPRT group provides market access research and support to the healthcare industry.
• TPG-NPRT members are mostly chief medical directors, chief pharmacy directors and other key decision makers from health plans in the United States.
• Specialty pharmacy products are any pharmaceuticals designed for treat specific, chronic complex diseases and have four or more of the following attributes shown in Table 1.

Table 1. Attributes of Specialty Pharmacy Products

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Example</th>
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<tbody>
<tr>
<td>Initiated only by a specialist</td>
<td>Requires a professional for distribution</td>
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<tr>
<td>Takes few prescriptions or courses</td>
<td>Requires special patient training to administer</td>
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<tr>
<td>High expense</td>
<td>Needs patient support to purchase medicine</td>
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<tr>
<td>Requires reimbursement</td>
<td>Has a unique process for reimbursement</td>
</tr>
<tr>
<td>Requires processing of an approval essential</td>
<td>In part of current inventory</td>
</tr>
<tr>
<td>and complex trait</td>
<td>Requires special handling</td>
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Pharmacy & Therapeutic (P&T) Committees and technology assessment wellness walks with making coverage decisions with limited information available.

• Based on current program with U.S. Payors, Medical Directors, and Specialty pharmacy organizations. The survey was conducted in 2015 and is a series of changes.

Objective and Purpose

• The survey focuses on the disease states most concerning to these plan directors from budgetary point of view.

Methods

• A 2015 survey of medical and pharmacy directors of U.S. payors representing health plans, employer medical and pharmacy benefits managers (EBM), and pharmacy & therapeutics (P&T) committee process.

Results

• A total of 224 medical and pharmacy directors currently employed by US health plans and is a series of changes.

Figure 1. Survey Respondent Degrees (multiple answers allowed)

Figure 2. Respondent’s Title within their Organization

Figure 3. Type of Plans Represented by Respondents (Respondents can cover multiple types)

Figure 4. Restrictions on the use of Specialty Pharmacy

Figure 5. Benefits Used for Citizen Administrated Agents and Oral Biologics

Figure 6. Co-Pays for Specialty Pharmacy Products, Oral Biologics and Oral Multiple Agents

Conclusions

• Specialty Pharmacy products were restricted by 53.7% of the plans. Common restrictions of providers are shown in Figure 4.

Response to open-ended questions placed Specialty Pharmacy products at the top causes for concern currently, and for the coming years. The disease states most concerning to three plan directors from a medical point of view:

• Type: Medical
  - Most concerning: Cancer/oncology (15); Diabetes (10); and Hepatitis C (7); Other items mentioned included: Orphan diseases, Rheumatoid Arthritis, Biologics and HIV

• Type: In-Sys
  - Most concerning: Cancer/oncology (16); Hepatitis C (9) and Diabetes (6); Second most concerning: Cancer/oncology (8); Diabetes (3); and Hepatitis C (3); Other items mentioned included: Orphan diseases, Rheumatoid Arthritis, Biologics and HIV

• Type: In-Region
  - Most concerning: Cancer/oncology (16); Diabetes (6); and Hepatitis C (3); Second most concerning: Cancer/oncology (8); Diabetes (3); and Hepatitis C (3); Other items included: Biostats, Immunomodulators, and Orphan diseases.

Expenditures for Specialty Pharmacy products and how specialty pharmacy will continue to grow.

The environment for P&T Committee decision making in managed care is undergoing a series of changes.

Payor medical directors and pharmacy directors, who commonly serve as P&T Committee members, have a distinct understanding and opinions as to how to adjust the process to adapt to these influences.

References


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Disclosures: None

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