

Do we really need to choose between access and affordability?

Options for high-value prescription drug coverage

Sarah K. Emond, MPP
September 24, 2021

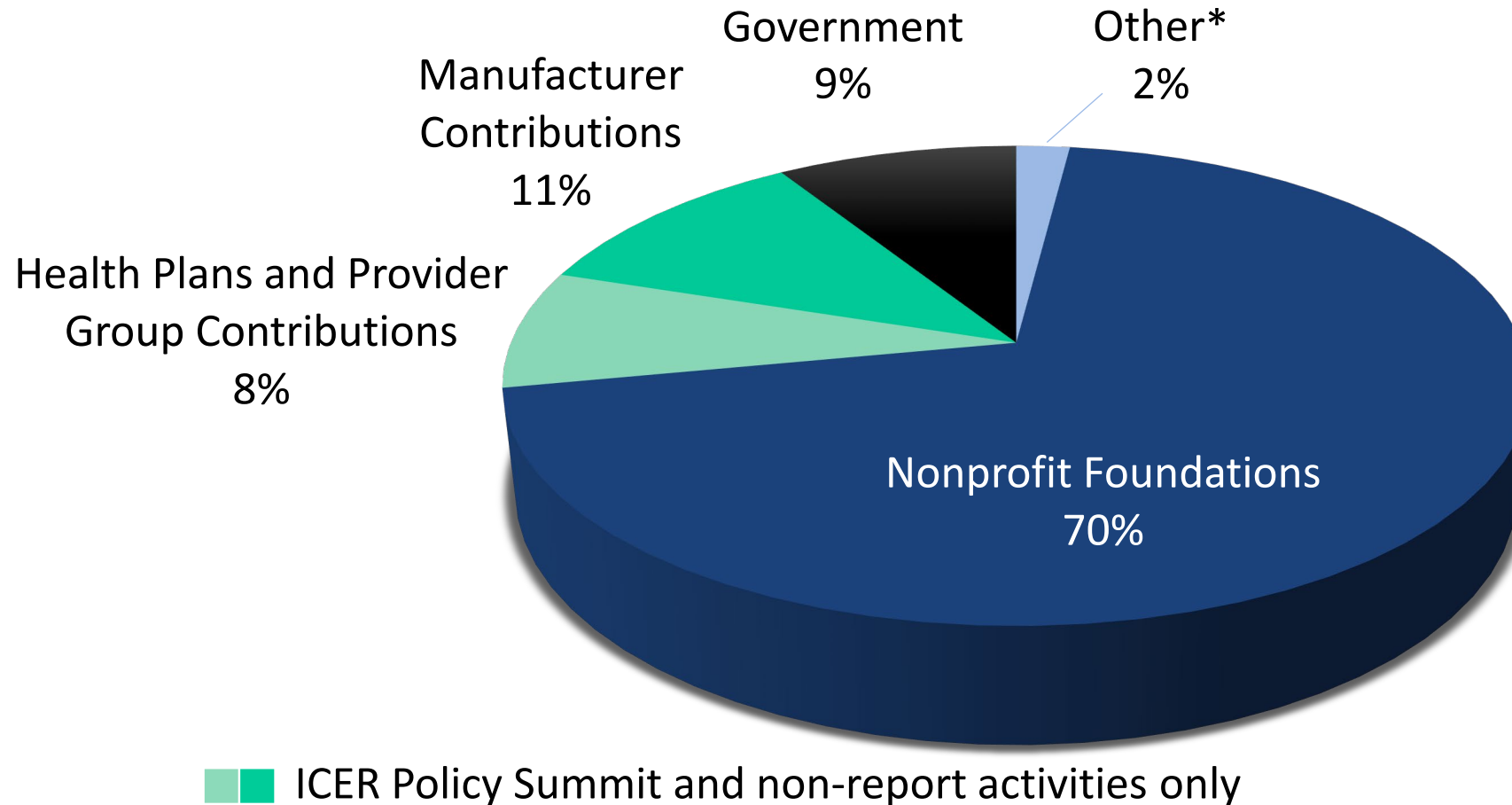


No.

Institute for Clinical and Economic Review (ICER)

- **Independent, non-partisan** health technology assessment group whose reviews are funded by non-profit foundations
- Develop **publicly-available value assessment reports** on medical tests, treatments, and delivery system innovations for nearly 15 years
- Convene regional independent **appraisal committees** for public hearings on each report
- For some analyses, use cost-effectiveness analysis to determine **health benefit price benchmarks**
- Produce annual list of Unsupported Price Increases using **comparative clinical effectiveness** expertise
- Coming soon: annual “**Fair Access**” report examining whether insurers are providing fair access to fairly-priced drugs

Funding 2021



*Individual / matching contributions and speech stipends

Foundations of our Mission

- Transparent, public, multi-stakeholder approach to all our work
 - Life sciences manufacturers, patient and consumer advocacy organizations, health plans, state and federal policymakers, clinicians, health systems
- Distinctive combination of academic rigor and practical application
- Guidance to improve the health system so it better serves patients

Fair Pricing.

Fair Access.

Future Innovation.

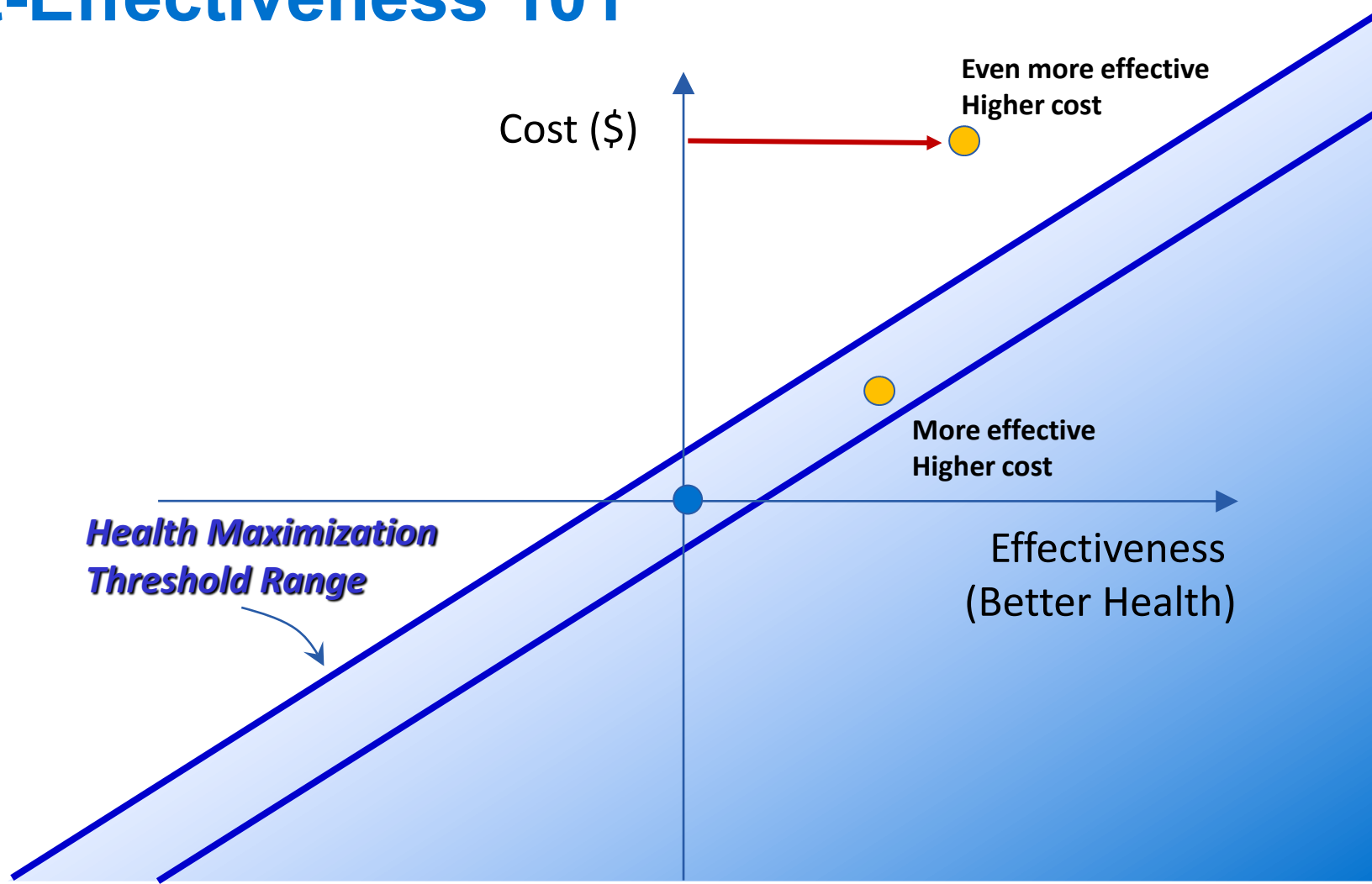
Why Does the US Need Independent Research?

- FDA approval means “safe and effective”
 - Little comparative data; no consideration of cost or value
- Health systems routinely make tradeoff decisions
 - Asymmetric information, limited time, short-term incentives
- Pharma’s influence is strong
- Patients deserve a voice

Assessing “Value”



Cost-Effectiveness 101



ICER's Value-based Price Benchmarks (Examples)

Assessment	Drugs	Discount Needed*
Spinal Muscular Atrophy	Spinraza	83-90%
	Zolgensma	0%
Type 2 Diabetes	Rybelsus	32-36%
Opioid Use Disorder	Probuphine and Vivitrol	53-69%
Rheumatoid Arthritis	Rinvoq	25-26%
Asthma	Xolair, Nucala, Cinqair, Fasenra, Dupixent	62-80%
Alzheimer's Disease	Aduhelm	87-95%

Assessment	Drugs	Discount Needed*
Cardiovascular Disease	Vascepa	0%
	Xarelto	0%
Migraine	Nurtec, Ubrovelvy	0%
CAR-T for Leukemia and Lymphoma	Yescarta and Kymriah	0%
Hemophilia A	Hemlibra	0%
Cystic Fibrosis	Kalydeco, Trikafta, Symdeko, Orkambi	74-79%

** For new drugs, discount from list price or anticipated net price needed to meet common thresholds of cost-effectiveness. For drugs already in use, discount is from **post-rebate price***

Public Meetings

- Public deliberation of report contents and policy implications by independent appraisal committees
- Patients and patient organizations play a central role at public meetings
- Participation by clinical experts, manufacturers, patients and caregivers
- The voting panels are comprised of clinicians, patients, and health policy experts



CTAF

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PUBLIC ADVISORY COUNCIL



NEW ENGLAND

CEPAC

COMPARATIVE EFFECTIVENESS
PUBLIC ADVISORY COUNCIL

Use of ICER assessments

- **For drug makers and payers:** helps negotiation over prices in conjunction with fair access
 - Dupixent, Praluent, Zolgensma
- **For payers and employer groups:** helps guide coverage decisions and pricing negotiations
 - VA
 - Private Payers, 65% using benchmark prices
 - Nearly half of the nation's Medicaid departments
- **For policymakers:** independent evaluation of value and suggested value-based prices figure in multiple state and federal proposals
 - Medicaid Drug Utilization Review Boards (NY, MA)
 - Prescription Drug Affordability Boards
 - Unsupported Price Increase Legislation

Cornerstones of Fair Patient Access to Prescription Drugs: White Paper and Research Report

- Informed by expert input from patient groups, clinician specialty societies, payers, and life science companies
- White paper recommends appropriate policies that determine patient access to fairly-priced prescription drugs
- Multi-stakeholder Working Group guiding assessment of major payer policies:
 - November 2021, 1st annual report on how policies align w/ fair access criteria
- Categories include: cost-sharing, eligibility criteria, step therapy, prescriber restrictions

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