

HEMOPHILIA MANAGEMENT PROGRAM HELPS SELF-INSURED EMPLOYERS BATTLE HIGH COSTS

Written by Dea Belazi, president and CEO, AscellaHealth

Bleeding disorders, like hemophilia, are among the most expensive conditions to manage, and many self-insured employers face up to \$1 million a year on patient care. Cancer treatments make up most of the cost for the top 20 high-cost injectables overall. However, for the top 20 high-cost injectables associated with individuals with over \$1 million in claims, medications used to treat blood disorders, like hemophilia, become dominant.

While hemophilia is a rare disease, affecting approximately 13 out of every 100,000 lives, it is still common enough that most employer groups will eventually deal with the challenges of providing care to hemophilia patients in their workforce.

With the development of new technology and tools for addressing these challenges, employers can adopt a comprehensive hemophilia management program designed to provide an unprecedented level of control, transparency and accountability, not only for payers but also physicians, specialty pharmacists and patients alike.

Specialty pharmacy benefit managers (SPBMs™)--innovative, pharmacy benefit managers providing high quality prescription drug management services specifically for those with chronic diseases that require specialty drugs-- offer transparency and launch innovative treatment programs using existing tools to negotiate favorable rebates, advocate for patients and reduce costs.

One SPBM™ program for hemophilia patients generated a cost savings for one hospital that reduced its specialty spend by 30% in the first year. Other annual cost savings include multiple sclerosis (\$26,000) hemophilia (\$99,480), immune deficiency (\$80,000), spinal muscular dystrophy (\$466,232) and hereditary angioedema (\$708,000).

For self-insured employers, this approach enables them to contain prescription costs, ensure appropriate medication utilization and monitor physician and pharmacy performance in real-time.

UNDERSTANDING THE HEMOPHILIAC PATIENT

When classifying patients with hemophilia, there are three key differentiators. First, they can be categorized based on their factor deficiency -- hemophilia A or hemophilia B. Hemophilia A is four times more common than hemophilia B.

Second, patients can be classified by severity from mild (about 25% of patients) to moderate (about 15% of patients) to severe (about 60% of patients). These two factors play an important role in treatment. Patients with severe disease face a higher risk for spontaneous bleeds, utilize prophylaxis factor replacement therapy and generate the highest costs.

A third factor is patients with inhibitors, meaning they develop antibodies that reduce the efficacy of replacement products (20 to 35% of patients), have fewer treatment options and are more complex to treat.

TREATMENT OPTIONS, COSTS AND CHALLENGES

Scanning the current treatment options, there are 48 drugs on the market, compared to only one available 40 years ago. This means that a patient born with hemophilia today can be treated appropriately and potentially live a normal life span. Nevertheless, despite these advances and array of options, treatment costs remain high.

Many self-insured employers spend up to \$1 million a year on patient care. For a patient with hemophilia A, the annual cost of treatment ranges from \$59,101 for those with mild disease to \$301,392 for patients with severe disease receiving prophylaxis. For a patient with hemophilia B, the cost of treatment ranges from \$85,852 to \$263,253. Factor replacement products represent up to 94 percent of total costs for patients with severe disease.

On top of high treatment costs, payers also face key management challenges, including:

- Fragmentation of care and lack of uniformity due to no standardized guidelines or care models for treating hemophilia
- Need for reinsurance programs for high-cost members
- High pharmacy and medical benefit utilization
- Potential stockpiling and product waste
- Limited payer insight into clinical data beyond factor product cost
- Limited provider insight into product utilization, dispensed amounts and total healthcare resource utilization
- Lack of individualized treatment
- Robust and complex product selection

Current management strategies include:

- Utilization management that encourages more frequent patient interaction and emphasis on best practices

- Individualized prophylaxis dosing protocol to ensure that treatments are reassessed and readjusted based on patient needs
- Evaluation of management and standardized dispensing criteria
- Collaboration with local hemophilia treatment centers
- 340B pricing
- Product referencing
- Patient engagement and care management

Going forward, data collection and analysis will be essential to determine benchmarks and measure relevant outcomes. Equally important, collaborating with local centers of excellence under pre-agreed upon standards of care and data sharing arrangements can help to prevent the need for prior authorization. Also, holistic care and coordination of care designed to consider the whole patient – and not simply the disease – will be of utmost importance.

FINDING THE RIGHT HEMOPHILIA MANAGEMENT PROGRAM

An effective all-encompassing hemophilia management program should be designed to provide an unprecedented level of control, transparency and accountability for all stakeholders, including payer, physician, specialty pharmacy and patient. It should effectively manage the complications of bleeding disorders by mitigating unnecessary

costs, providing intended clinical outcomes and supporting the member/client experience to:

- Decrease number of bleeds
- Reduce number of infusions, continuing bleeds and target joint development
- Prevent avoidable ER visits
- Provide dosing accuracy within + 2% or less
- Enhance the client's journey

It should also provide performance accountability by monitoring therapy adherence, documenting interventions, reporting outcomes and tracking cost savings.

FINDING THE RIGHT SPBM™

An effective all-encompassing SPBM™ should be designed to provide optimal levels of control, transparency and accountability for all stakeholders, including payer, physician, specialty pharmacy and patient.

The optimal programs offer 100 percent control of the prescription through a network of reliable and transparent specialty pharmacies, prior authorization control and real-time benefits verification, prescription fill dates, refill alerts, pharmacy fulfillment accuracy and quick turnaround time.



The right program should also offer unprecedented access to physician, specialty pharmacy and patient data and visibility into how prescribers are writing scripts. It should also provide dose optimization, identify prescribers according to the label and provide insight into which prescribers are driving the best outcomes.

For specialty pharmacy, the management program should compare all network pharmacies in real-time on a leaderboard, provide visibility into factor units prescribed vs. units dispensed, drop shipment/over shipment prevention and ensure appropriate shipment of on-demand and bleed doses.

There should also be real-time visibility into medication adherence, infusion adherence reporting, including prophylactic versus bleed/on-demand doses, in-home patient inventory, medication hoarding prevention, outlier infusions (with or without bleeds) based on prescription and visibility into frequency of patient dosing. In addition, it should ensure compliance with label and clinical trial literature.

BEST-IN-CLASS HEMOPHILIC MANAGEMENT PROGRAM

These costs can be attributed to a number of key challenges for payers, including care fragmentation, lack of standardized care guidelines, high pharmacy and medical benefit utilization, potential stockpiling and product waste, as well as limited payer insight into clinical data beyond factor product cost and product utilization, dispensed amounts and total healthcare resource utilization. Payers also lack reinsurance programs for high-cost members and robust and complex product selection. The most effective hemophiliac management programs offer specialty networks that cover most limited distribution drugs (LDD) products.

Look for a hemophilia management program that is flexible and sustainable, with a guaranteed pharmacy performance product and treatment cost containment, customized pharmacy network therapy management in real-time data and outcomes

reporting. It's important to find a program with a patient-centric approach that supports hemophiliac treatment center alignment.

A value-based program allows for greater transparency and accountability for patient and pharmacy activity and is more likely to provide utilization management and clinical interventions based on active patient management that leads to contained costs and predictability on usage and costs.

In this way, an appropriate utilization management and pharmacy network design can contain costs by as much as 10 to 42%. These programs align with specialty pharmacy partners and have developed an innovative program around a customized specialty pharmacy network that is tailored towards calculated cost savings with customized clinical management and innovative technology.

INNOVATIVE STOP LOSS AND ANCILLARY SOLUTIONS



At BenefitMall, we know that employer groups benefit most from treating their health plan as an investment rather than an expense. Our team of self funded consultants can help you succeed by offering:

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- Unbiased Expertise and Review
- Initial Placement, Implementation and Renewal of Coverage
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All of this falls in line with the intention of the latest proposed CMS rule.

For benefits professionals striving to relieve clients concerns about how to finance the high cost of new million-dollar drug therapies, SPBMs™ can make an enormous difference. They combine a trusted and transparent network of specialty pharmacies with the most up-to-date technology to contain prescription costs, ensure appropriate medication utilization and monitor physician and pharmacy performance in real-time.

For patients, it should provide seamless patient care experience across channels, real-time visibility into medication adherence, infusion adherence reporting, including prophylactic vs. bleed/on-demand doses, in-home patient inventory, medication hoarding prevention, outlier infusions (with or without bleeds) based on prescription and visibility into frequency of patient dosing. It should also ensure compliance with label and clinical trial literature.

CALL OUT

Real World Scenario

Consider this real-world case study to better appreciate the advantages of partnering with a hemophilia management program provider.

Challenge

A large, self-insured labor union group needed to find a hemophilia management program that would focus on the group's unique needs in a very personal way. The union demonstrated a need to reduce drug spend, while ensuring that the needs of their members were being met.

After review of the group's claims data, the management program provider they chose noted that a virtual lack of mail order utilization was impacting the union's bottom line. The challenge, as they saw it, was how to incent members to use mail order pharmacy services.

Strategy

The program partner was already partnered with more than one mail order pharmacy, ensuring that the goals of reducing costs were aligned with the clients. They found that one of their mail order pharmacies was a union-staffed facility.

To incent member utilization, the program partner used an effective, but simple marketing campaign about union members serving union members to ensure that this offering would meet the groups' primary goal of reducing drug costs and increasing adherence and health outcomes, while including certain formulary incentives designed to drive the most efficacious and lowest cost solution.

Result

One year into the program the program partner found that its union client's financial goals were being met, and client adherence rates were increasing.

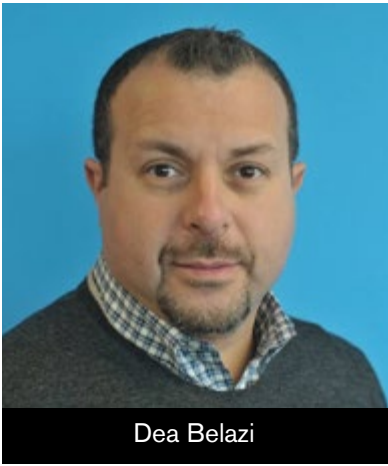
BREAK DOWN OF TIME/COST SAVINGS

The best hemophiliac management program's offer specialty networks that cover most limited distribution drugs (LDD) products.

Look for a program that helps payers by reducing their members' drug waste through clinically appropriate interventions, resulting in significant savings for the payer and reductions in member cost share. It should target high-cost medications, allowing providers to prescribe a clinically equivalent dose to minimize the amount of drug waste.

The program should be flexible and sustainable, with a guaranteed pharmacy performance product and treatment cost containment, customized pharmacy network therapy management in real-time data and outcomes reporting. Overall, it's important to find a program with a patient-centric approach that supports hemophiliac treatment center alignment.

Keep in mind that a value-based program allows for greater transparency and accountability for patient and pharmacy activity. It will also be more likely to provide utilization management and clinical interventions based on active patient management that leads to contained costs and predictability on usage and costs. In this way, an appropriate utilization management and pharmacy network design can contain costs by 12 to 25 percent. ■



Dea Belazi

Dea Belazi, PharmD, MPH has more than 20 years of experience in the healthcare industry, mostly developing and managing pharmacy benefit management companies. He is currently the President and CEO of AscellaHealth, a national PBM with almost 2 million lives under management. He was part of the development of PerformRx, a PBM owned by Keystone First Health Plan as well as another, Future Scripts, an Independence Blue Cross company that was sold to Catamaran a few years ago. Dea holds a PharmD from the University of RI and completed his dissertational work at Brown University and later completed an MPH from Johns Hopkins University and a post-doc health outcomes research fellowship at Thomas Jefferson University. He is a reviewer for multiple medical journals and sits on multiple boards.

AscellaHealth, a national specialty pharmacy benefit manager (SPBMTM)--serving commercial, Medicare and Medicaid segments offers high quality prescription drug management services along with other customizable services, such as carved-out specialty pharmacy services and cost-savings discount programs through its unique and proprietary service that extends discounts on prescription medications to customers more than any other PBM in the industry. Visit www.ascellahealth.com.

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* MyHealthGuide. (2019, March). Stop-loss Premium Ranking. MyHealthGuide Newsletter. Retrieved from myhealthguide.com.

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