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Comprehensive Specialty Pharmacy Management: A Payer's Perspective

Suzanne Tschida Pharm.D., BCPS
Vice President, Specialty Benefit & Outcomes Strategy, OptumRx

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UnitedHealthcare defines a specialty medication as

- High Cost: $1,300/month avg.
- Biotechnology Drugs
- Treating rare, chronic or life-threatening conditions
- Requiring additional monitoring or clinical intervention

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Specialty Pharmacy Programs: Better Therapy Management and Outcomes?

The goal of UnitedHealthcare's Specialty Pharmacy Program is to improve healthcare outcomes of members taking specialty medications. Our condition-based programs are designed to:

- Improve appropriate medication use and adherence to therapy
- Reduce adverse effects with pharmacotherapy
- Improve health outcomes
- Reduce variability in pharmaceutical care delivery
- Track and report pharmacy and medical healthcare outcomes

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UnitedHealthcare's Specialty Pharmacy Program Requirements

- Clinical expertise in pharmacology and disease states
- Comprehensive member education
- Interventional adherence program
- Pharmacist practice interventions to help members manage medication and disease state issues
- Clinical management programs that meet specific requirements for members
- Competitive financial performance and operational excellence
- Outcomes reporting
- URAC Specialty Pharmacy accreditation

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A Successful Clinical Model

Guide Members to the Right Providers + **Provide the Right Level of Support** = **Deliver Industry Leading Results**

Basic Clinical Services
- 24/7 access to trained clinical staff
- Extensive member education
- Adherence support
- Physician outreach
- Integrated support

Network Design / Sourcing
- Lower drug costs through competitive discounts
- Free ancillary supplies for members
- Drug sourcing - access to limited distribution and REMS program medications

Utilization Management
- Dose optimization
- Appropriate use/waste avoidance
- Promote lower cost/tier options

Adherence Programs
- Extensive member education
- Monthly adherence monitoring and intervention

Physician outreach

Clinical Management Programs
- Disease management interventions
- Oversight throughout medication therapy
- Coordinate care with physician/patient
- Member and physician reporting

Better adherence and health outcomes

Lower total health care costs (Rx/medical)

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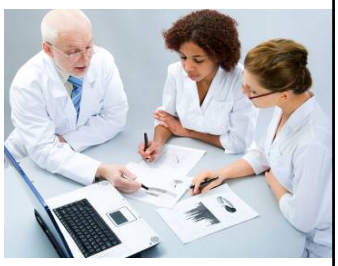
UnitedHealthcare Specialty Pharmacy Outcomes Studies

The following studies compare the effectiveness of services received at a designated specialty pharmacy to services provided at retail pharmacies.

Up to four years* of program data were evaluated for each category. Yearly studies were completed for members with:
- Cancer
- Multiple sclerosis
- Organ transplantation
- Rheumatoid arthritis



**Due to health plan attrition rates, continuous follow up of a single member cohort over the four-year period was not feasible. A two-year continuous enrollment study was conducted on transplant members.*

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Data and Sample Selection

Study Medications

- **Oral or self-injectable formulations** of specialty medications for:
  - Oncology
  - Organ transplantation
  - Multiple sclerosis
  - Rheumatoid arthritis

Cohort Assignment

- **Specialty Pharmacy Cohort (Study group)**: Members who filled ≥ 80% of their specialty prescriptions from the specialty pharmacy
- **Retail Cohort (Control group):** Members who filled ≥ 80% of their specialty prescriptions from retail pharmacies
- Cohorts balanced using **propensity score matching method** for baseline member characteristics: sex, age, geographical location, comorbidities, medical and pharmacy costs

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Data and Sample Selection

Retrospective Claims Analysis

- Data: prescription drug and medical claims; member eligibility
- 6-month member identification period
- Members assigned an index date based on first fill of specialty medication within identification period
- Member continuous enrollment required for one year prior to index date (baseline period); and one year post index-date (follow-up period)

Study Duration

- Cost and utilization statistics generated for baseline and follow-up periods
- Program independently evaluated each year since inception for select specialty classes:
  - Oncology: 2 years of data
  - Transplantation: 2 years of data
  - Rheumatoid arthritis: 4 years of data
  - Multiple sclerosis: 4 years of data

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Statistical Analysis

Primary outcomes
- Total healthcare costs
- Total outpatient costs
- Total medical costs
- Pharmacy costs

Secondary outcomes
- Clinical resource utilization
- Inpatient hospital visits
- Outpatient hospital visits
- ER department visits
- Specialty disease-specific total medical and pharmacy costs

Other outcomes
- Medication adherence using four methods:
  - Number of specialty medication prescriptions filled
  - Medication possession ratio (MPR)
  - Medication gaps (MG)
  - Medication discontinuations (DC)

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UnitedHealthcare Specialty Pharmacy Program Outcomes:

Transplantation

Two-year continuous enrollment analysis
of Specialty Program members for all transplant types

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UnitedHealthcare Specialty Pharmacy Program Outcomes:

Oral Oncology

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Oral Oncology Study Results

Total Cost (mean)

Lower in the Specialty Pharmacy Program

	Retail		Specialty	
– Year 1:	$97,196	vs.	$84,105	p = 0.024
– Year 2:	$90,021	vs.	$84,598	p = 0.320

Medical Cost (mean)

Lower in the Specialty Pharmacy Program

	Retail		Specialty	
– Year 1:	$61,137	vs.	$45,696	p = 0.007
– Year 2:	$52,243	vs.	$40,837	p = 0.030

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Oncology Study Results: Adherence

Medication Possession Ratio* (MPR)

Higher with Specialty Pharmacy Program members

	Retail		Specialty	
– Year 1:	58%	vs.	65.7%	p < 0.001
– Year 2:	53.3%	vs.	68.6%	p < 0.0001

Medication Gaps (MG) (mean)

Lower with Specialty Pharmacy Program members

	Retail		Specialty	
– Year 1:	57%	vs.	37%	p < 0.001

*Weighted MPR methodology

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Oral Oncology Primary Healthcare Outcomes

	First Year of Follow Up					Second Year of Follow Up				
	Retail (mean)	Specialty (mean)	Diff in means S-R	% Diff	p-Val	Retail (mean)	Specialty (mean)	Diff in means S-R	% Diff	p-Val
N			-	-	-	433	433	-	-	-
Total Cost	$97,196	84,105	(13,092)	(13%)	0.024	90,021	84,598	(5,423)	*(6%)*	0.320
Medical Cost	$61,137	45,696	(15,440)	(25%)	0.07	52,243	40,837	(11,406)	*(22%)*	0.030
Pharmacy Cost	$36,059	38,408	2,349	7%	0.193	37,778	43,761	5,983	16%	0.000
Outpatient Visit Cost	$28,629	16,777	(11,852)	(41%)	0.004	18,117	17,268	(849)	*(5%)*	0.780

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Oncology Outcomes Summary

- Higher medication costs (significant in year 2 only) in the Specialty Pharmacy Program were **driven by significantly higher adherence to oncology medication** in both years of program.
- The **22-25% lower medical costs** in the Specialty Pharmacy Program (significant in year 2) were attributed to the following trends in the Specialty Pharmacy Group:
  - Outpatient visit costs: 5-41% lower
  - Inpatient hospital visit costs: 21-33% lower
  - Office visit costs: 5-31% lower
  - Oncology-related medical costs: 19-23% lower
  - Oncology-related inpatient costs: 22-29% lower
  - Oncology-related office visit costs: 4-32% lower (significant)

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UnitedHealthcare Specialty Pharmacy Program Outcomes:

Rheumatoid Arthritis

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UnitedHealthcare Specialty Pharmacy Program Outcomes:

Multiple Sclerosis (MS)

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Overall Conclusions

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Study Limitations

- Potential for information bias found in retrospective claims data
- May also be confounding factors related to higher severity of disease and/or co-morbid conditions
  - Propensity scoring was conducted to overcome this limitation in cohort selection
- Potential for difference in type and extent of care provided through both the specialty pharmacies and retail pharmacies, leading to possible confounding
- The Specialty Program does not currently include assessments of quality of life or work productivity

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Overall Conclusions

- UnitedHealthcare Specialty Pharmacy Program focuses on patient education and specialty clinician oversight leading to improved adherence while simultaneously reducing overall healthcare costs
  - Pattern exhibited in continuous years of program implementation across multiple disease states
  - Improved adherence was shown through increased MPR, fewer gaps in therapy, fewer discontinuations
- Specialty pharmacists appear to help to coordinate pharmaceutical care and reduce medical resource utilization among members with cancer, rheumatoid arthritis, multiple sclerosis, or organ transplantations

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Overall Conclusions

- Oral Oncology and Transplant program savings are driven by reduced medical costs, primarily hospital outpatient costs
- MS and RA savings come from competitive medication reimbursement rates from the Specialty Pharmacy Program
  - The impact of incremental utilization management programs such as prior authorization, step therapy, supply limits, or medication tiering strategies was not compared between the specialty pharmacy or control groups.
  - Longer-term, longitudinal studies would be required to show significant impact on total healthcare costs
- Investment in Specialty Pharmacy Programs can improve medication adherence, reduce overall medical resource utilization and healthcare costs

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