

Multiple Sclerosis: Payer Insight

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Abstracts

Drug prices rising while needs remain unmet. Now payers are fighting back

Payers have had it with the high cost of Multiple Sclerosis (MS) drugs and now they're fighting back—demanding better data to justify pricing, and using a host of strategies to offset and contain costs. Get the details in Payer Insight: Multiple Sclerosis. You'll learn what drives treatment costs up, what payers are doing to bring them down, why assessing cost effectiveness for MS drugs is so difficult, and how payers make access and reimbursement decisions.

We interviewed 12 US and EU payers with expertise in formulary development and drug reimbursement to get their perspective on the challenges facing the MS market. Plus you'll find out how payers view pipeline MS treatments, what advice they have for Pharma, and which clinical trials to watch.

"...it is not the insurance companies that are causing those co-pays to increase. It is the doing of the pharmaceutical industry."

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TOP TAKEAWAYS

Ripple effect: Rising drug costs put pressure on other needed treatments for MS patients. Do payers envision a time when patients may have to go without?

Cost-effectiveness difficult to assess: What information are payers missing in order to measure cost-effectiveness? How will it influence PR and MA decisions?

Route of administration: The way drugs are administered has important consequences that affect cost and adherence, and shape payers' decisions.

What about biosimilars and generics? Will they displace branded MS treatments, or are payers simply using them as a negotiating tool? Learn what will determine their near-term prospects.

Needs remain unmet: Current disease modifying agents only do so much. Payers point to four main areas of unmet clinical need that affect the MS pricing landscape in different ways.

A payers' eye view

Cost containment: Payers are experimenting with a number of discounting, contracting, and payment schemes to contain drug costs. Which ones are showing the most promise?

Complex PR and MA decisions: Payers predict several factors will affect pricing, reimbursement, and market access decisions in the near term. Which ones will have the greatest impact?

Poor adherence: Patient adherence is key to assessing efficacy, but difficult to achieve. How does adherence affect drug choice, and what are payers doing to understand and improve it?

Lack of data: With little efficacy data to support MS drugs' high prices, payers are pushing back. What data are they demanding? How will it affect future drug launches and access decisions?

Drugs Summary: Get a breakdown of approved and pipeline drugs, as well as payers' thoughts about several oral, subcutaneous, and infusion therapies.

Coverage and access recap: Learn how coverage and access decisions are made in the US and several EU countries, and what payers are doing to improve transparency. Includes an update on Obamacare for US readers.

Clinical trials to watch: A comprehensive list of important upcoming trials for

approved and pipeline products gives you a window into how the treatment landscape may evolve.

Warnings for pharma: Payers identify the two key things providers have to do if they want to avoid past mistakes.

Payers interviewed

We interviewed 6 US payers and 6 from the EU. All interviewees have expertise in formulary development and drug reimbursement. All respondents requested that their details remain confidential.

US Payers

Pharmacy Director, Pharmacy Benefit Manager

Chief Medical Officer, Managed Care Organisation

Chief Medical Officer, PMT Chair, Managed Care Organisation

Pharmacy Director, Community Health Plan

Medical Director, Managed Care Organisation

Pharmacy Director, Health Maintenance Organisation

EU Payers

Regional Pharmaceutical and Formulary Advisor, UK

Chief Hospital Pharmacist, Vice President Formulary Drug Committee, France

Pharmacist Director, France

Head of Drug Reimbursement, Germany

Member of the Drug Commission, Germany Medical Association, Germany

Chief Pharmacist, UK

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