

In the midst of incredible scientific progress, medicine cost growth is declining







5.3%

2015



0.4%

2018



2015



3.3%

2018

8.5%

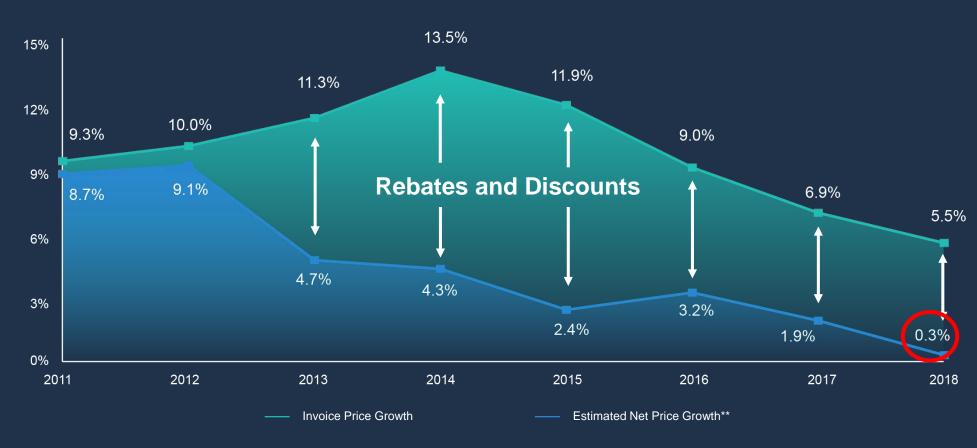
2015



4.5%

2018

In fact, after discounts and rebates, brand medicine prices grew just 0.3% in 2018



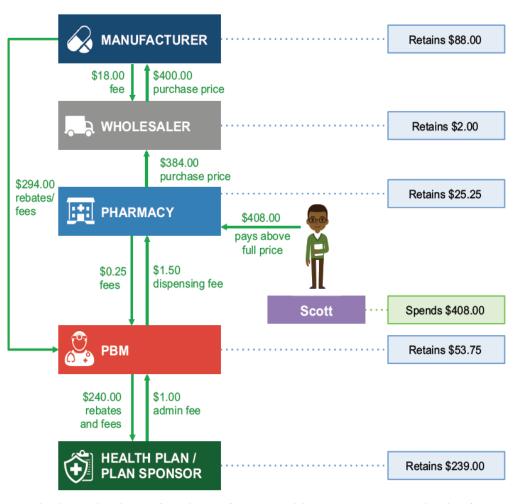
Source: IQVIA, January 2019.

^{*}Includes protected brand medicines only (ie, brand medicines without generic versions available in the year indicated).

^{**}Net price growth reflects impact of off-invoice rebates and discounts provided by manufacturers.

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Flow of Payment for a \$400 Insulin



- Since Scott hasn't reached his deductible, his insurer does not cover any of his costs
- Scott pays more than the list price of his medicine
- The PBM and health plan pay nothing, and actually <u>earn</u> \$292.75 on this prescription
- Due to industry consolidation, the PBM, health plan, and even the pharmacy are often part of the same parent company

Assumptions:

- \$400 list price per prescription
- 65% base rebate
- Patient pays full undiscounted price of medicine



Lack of competition in the supply chain

 Highly concentrated supply chain with few key players controlling large market shares







- Top 3 PBMs account for roughly 75% of covered lives
- Wholesale, pharmacy and insurer markets are also highly concentrated



 Of \$100 spent on drugs, \$42 goes to PBMs, wholesalers, pharmacies, and insurers.

State Policy Solutions to Address Affordability Challenges

PROMOTE VALUE-DRIVEN HEALTH CARE

- Encourage states to explore innovative valuebased arrangements that are voluntary
- Better use of APCDs to reduce spending on low value care

SUPPORT FIRST DOLLAR COVERAGE OF CERTAIN PRESCRIPTION DRUGS

 Support policy that requires health insurers to provide coverage of certain medicines prior to the deductible

ENSURE PATIENTS WITH STATE-REGULATED INSURANCE DIRECTLY BENEFIT FROM REBATES

 Support legislation at the state-level that could potentially reduce patients' out-of-pocket costs by requiring insurers to share manufacturer discounts and rebates with patients at the pharmacy counter

SUPPORT POLICIES COUNTING PAYMENTS OUTSIDE OF INSURANCE TOWARD OUT-OF-POCKET COSTS

 Change health insurance rules to require health plans to count the cost of prescriptions purchased through third-party programs, like Blink Health and GoodRx, toward patient out-of-pocket costs limits