Lights, Camera, Traction! Diabetes Affordability, Progress & Potential

Moderator: Connecticut Representative Michelle Cook, Women In Government State Director

Erika Emerson, MPP, Chief Policy Officer, Diabetes Leadership Council

Sarah Wood, Policy Associate, Diabetes Patient Advocacy Coalition





Lights, Camera, Traction! Diabetes Affordability, Progress & Potential

Women in Government June 9, 2023



Erika Emerson

Diabetes Leadership Council

Sarah Wood

Diabetes Patient Advocacy Coalition

PEOPLE WITH DIABETES, PARENTS & ALLIES



Former leaders of national diabetes organizations provide policy expertise for lawmakers & advocates

NATIONAL LEADERSHIP & NETWORKS

- American Diabetes Association
- Association of Diabetes Care & Education Specialists
- Certification Board for Diabetes Care and Education
- Children with Diabetes
- Diabetes Dietetic Practice Group of the Academy of Nutrition and Dietetics
- Diabetes Patient Advocacy Coalition

MEDICAL & SCIENTIFIC EXPERTS

- · Diabetes Care & Education Specialists
 - Dietitian
 - Pharmacist
 - · Registered Nurse & Dietitian
- Dietitian
- · Internal Medicine & Diabetes Specialist
- Pediatric Endocrinologist
- Research Scientist and Professor of Molecular Physiology and Biophysics



STRONGER TOGETHER







501(c)(3) Diabetes Policy Shop 501(c)(4)
Grassroots Patient Advocacy

Former leaders of national diabetes organizations provide policy expertise for lawmakers and advocates

Turn knowledge into action through advocacy on state and federal issues impacting people with diabetes



LIGHTS, CAMERA, TRACTION!

U.S. INSULIN AFFORDABILITY IS IMPROVING -

but we haven't (yet) fixed the root causes driving up prices for insulin and other prescription drugs

STATES ARE LEADING THE WAY BUT MORE PERMANENT NATIONAL SOLUTIONS ARE STILL

NEEDED – to deliver more patient-centered and evidence-based transparency and accountability across the prescription drug supply chain

SECURING AFFORDABLE INSULIN AND OTHER PRESCRIPTIONS REQUIRES A MATRIX OF POLICY CHANGES & MARKET SHIFTS – there is no silver bullet when reducing prescription drug costs, but there is silver buckshot*

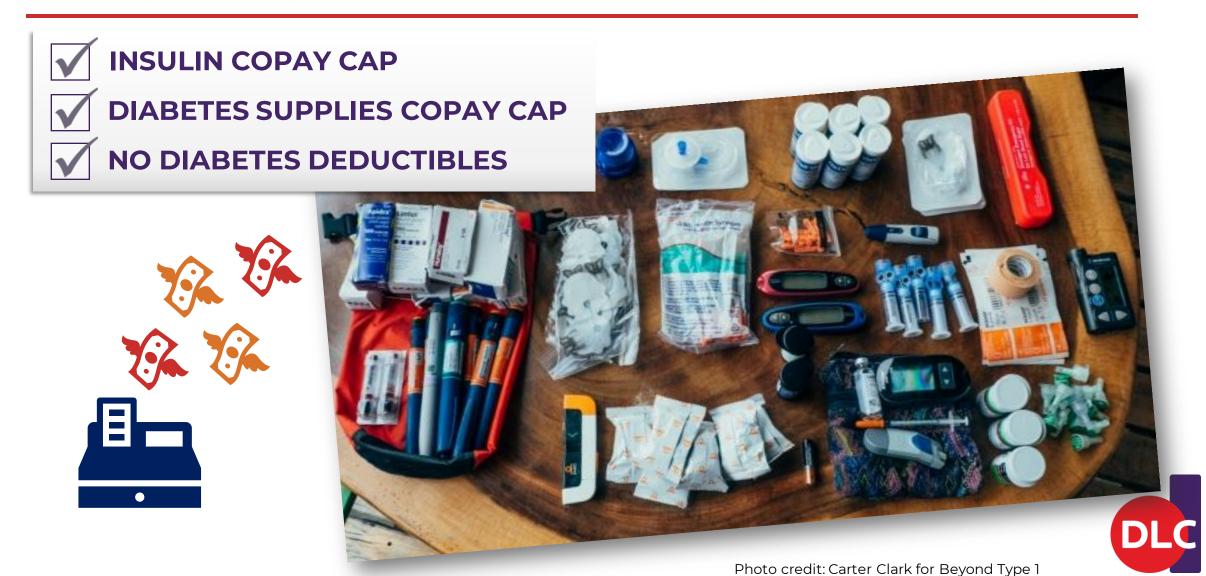


^{*} Quote credit to Senators Cassidy (R-LA) and King (I-VT)

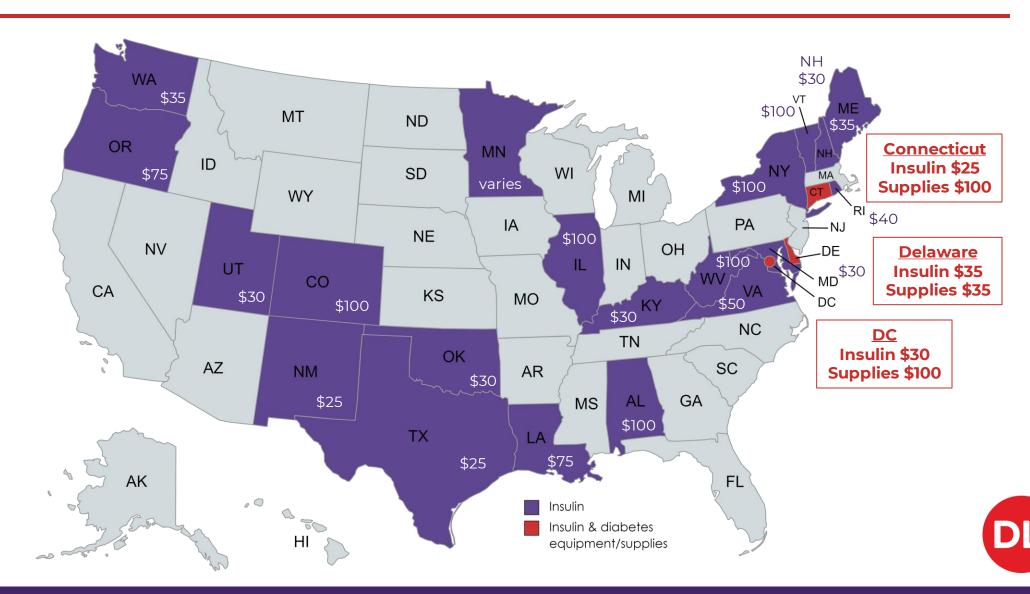
TRACTION: AFFORDABLE INSULIN



FLASHBACK: 2022 WIG POLICY MEETING



STATE TRACTION! COPAY CAPS



NATIONAL TRACTION

MEDICARE



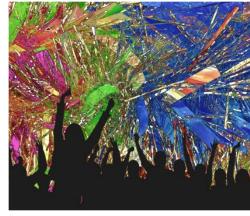
- Copay caps in effect for Medicare Parts B & D
- \$35 or 25% of net cost per prescription
- At least 1 insulin per type/form
- Senate bills introduced to expand to all U.S. health plans

EMPLOYERS



More employers are opting to eliminate or cap cost sharing for insulin and other diabetes care

MANUFACTURERS



- Top 3 insulin manufacturers announced 65-78% list price reductions for certain insulins
- Civica Rx insulin manufacturing plant breaks ground in in VA
- Mark Cuban Cost Plus Drugs insulin pilot program



INSULIN COST INFLUENCERS

"Results of this analysis demonstrate how all entities in the pharmaceutical distribution system (manufacturers, wholesalers, pharmacies, PBMs, and health plans) profit from the sale of insulin and that all contribute to its final price."







PHARMACY

BENEFIT

MANAGERS



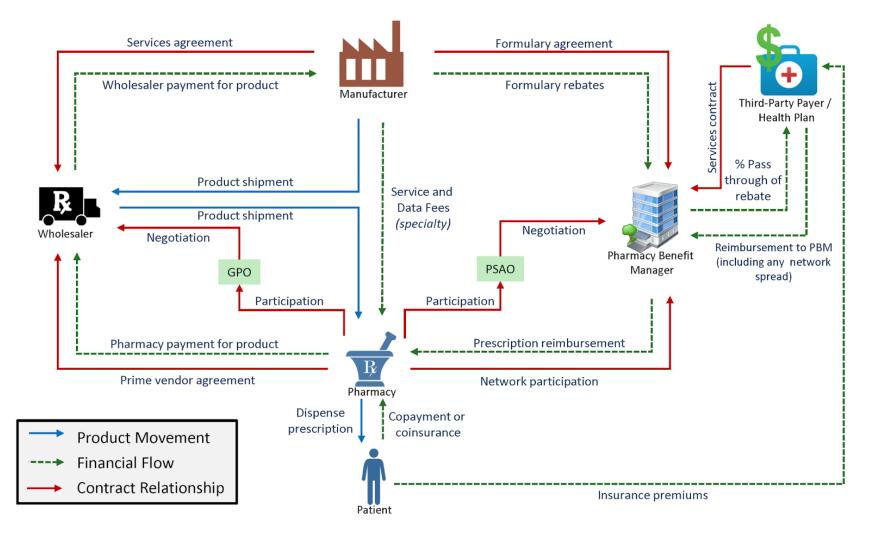




PLAN **SPONSORS**



MAKE IT MAKE SENSE





INSULIN PRICE EXPECTATIONS VS REALITY

EXPECTATION PATIENT COST PAYER COST COMPETITION Brands Biosimilars Unbranded



INSULIN REALITY



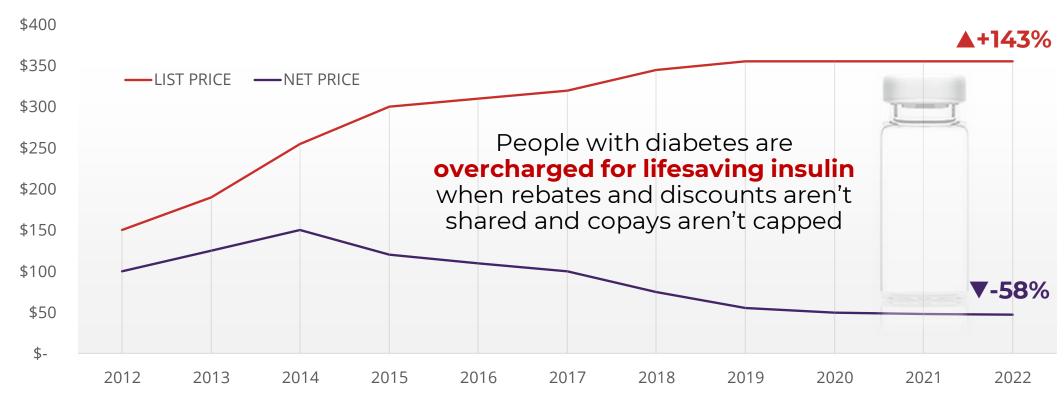
? PAYER COST

COMPETITION



COMPETING FOR SPREAD NOT SAVINGS

INSULIN REBATES CAN EXCEED 80% VS 48% FOR ALL BRANDS



^{1.} U.S. Senate Finance Committee on Finance. Insulin: examining the factors driving the rising cost of a century old drug. January 14, 2021. https://www.finance.senate.gov/imo/media/doc/Grassley-Wyden%20Insulin%20Report%20(FINAL%201).pdf.



^{2.} Kakani P, Chernew M, Chandra A. Rebates in the pharmaceutical industry: evidence from medicines sold in retail pharmacies in the U.S. March 2020. NBER Working Paper 26846. https://www.nber.org/papers/w26846.

^{3.} Sanofi 2023 Pricing Principles Report. https://www.sanofi.us/dam/jcr:356cc1f5-92dd-47a1-9770-ba60dfdfab1e/Sanofi%202023%20Pricing%20Principles%20Report.pdf

WHAT IS "UNBRANDED" INSULIN?

The same insulin - different packaging and price

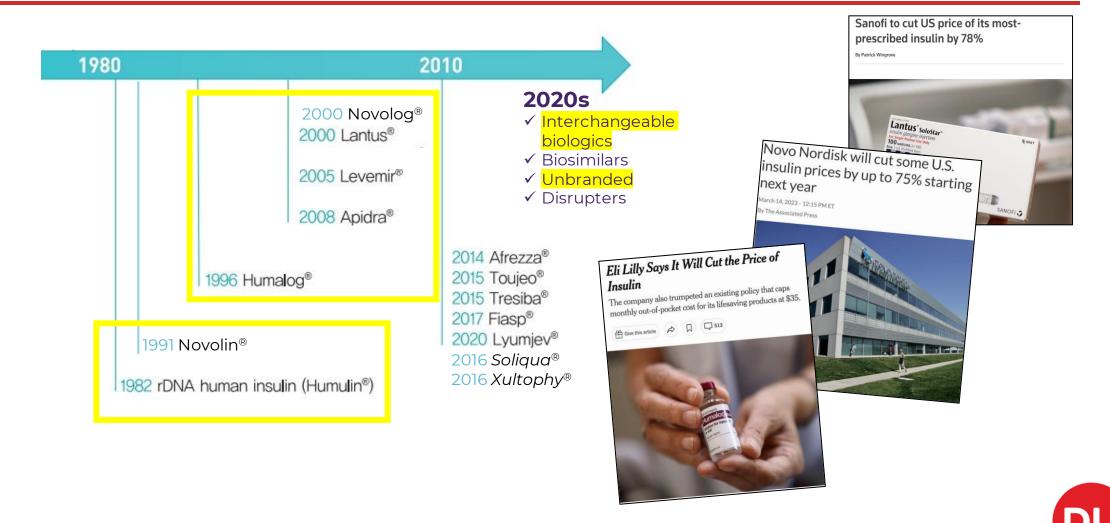
BRANDED INSULIN NDC 49502-251-80 Rx only (insulin glargine-yfgn) injection 100 units/mL (U-100) Do not mix with other insulins Use only if solution is clear and colorless with 809-251-00 Rx only no particles visible For subcutaneous use only Use with U-100 syringe only 100 units Int. 83-100 with other insulins One 10 mL 125 days after initial use Multiple-Dose III Mylan Mylan **HIGH LIST PRICE &** LARGE REBATE

UNBRANDED INSULIN





TRACTION! MANUFACTURER ANNOUNCEMENTS



ANNOUNCEMENT SNAPSHOT

	WHAT	WHEN	WHY / WHY NOW?
LILLY	INSULIN LISPRO: 5/1/23 \$82 → \$25 HUMALOG: ▼70% \$275 → \$65 HUMULIN: ▼70% \$149 → \$45 *NEW* REZVOGLAR: \$92 for 5 pens Expanded monthly cap program(\$35)	3/1/23 – Q4 2023	 POLICY & POLITICS Political pressure Anticipated Medicaid rebate liability
NOVO	LEVEMIR: ▼65% → \$108 NOVOLIN: ▼65% → \$48.20 NOVOLOG: ▼75% \$289 → \$72 NOVOLOG MIX 70/30: ▼75% \$289 → \$72 Unbranded biologics ▼ to match Maintained monthly cap program(\$99)	1/1/24	 MARKET FACTORS Reduces \$ currently flowing to intermediaries instead of patients Rebate savings could translate to increased earnings Mature products with competitors like Civica Rx on the horizon Shifting focus to newer products
SANOFI	LANTUS: ▼78% \$292 → \$64 APIDRA: ▼70% \$309 → \$93 Expanded monthly cap program(\$35)	1/1/24	



POST-ANNOUNCEMENT LIST PRICES



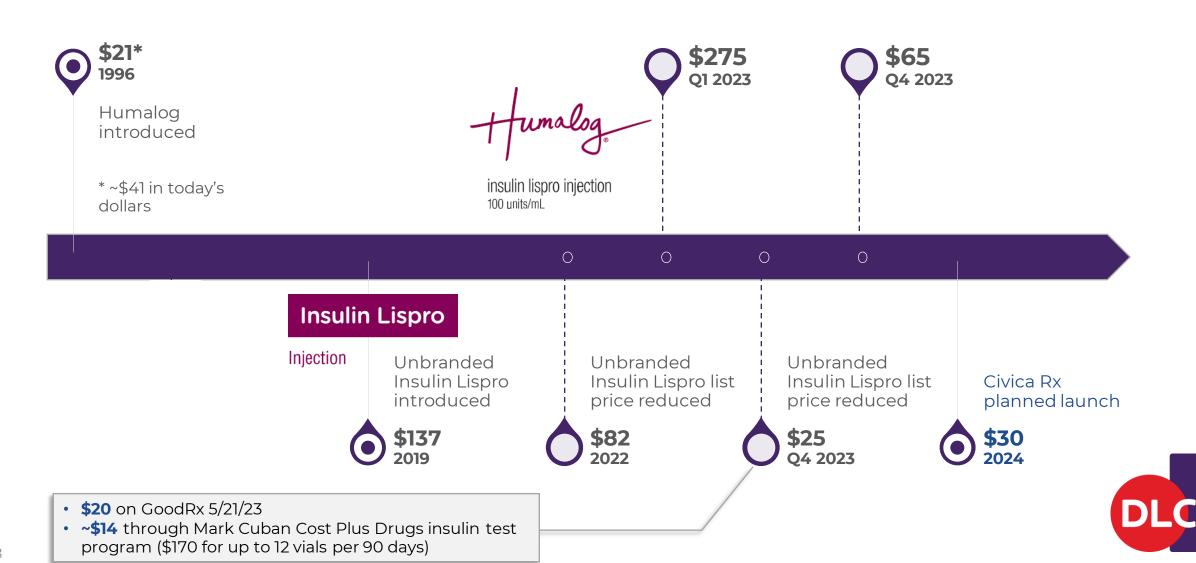








HOW LOW WILL IT GO?



LOWER PRICES ARE A WIN, RIGHT?

YES! WHEN PATIENTS SHARE DISCOUNTS FOR THEIR MEDICINES (JUST LIKE OTHER HEALTH PRODUCTS & SERVICES)

Rebate walls & misaligned incentives can favor bigger rebates vs lower net cost



List price exposure & non-medical switching shift costs & disrupt stable treatment regimens



Disproportionate burden on people with chronic conditions



TRACTION: TRANSPARENCY & ACCOUNTABILITY



FLASHBACK: 2022 WIG POLICY MEETING

V

COPAY ACCUMULATOR BAN

V

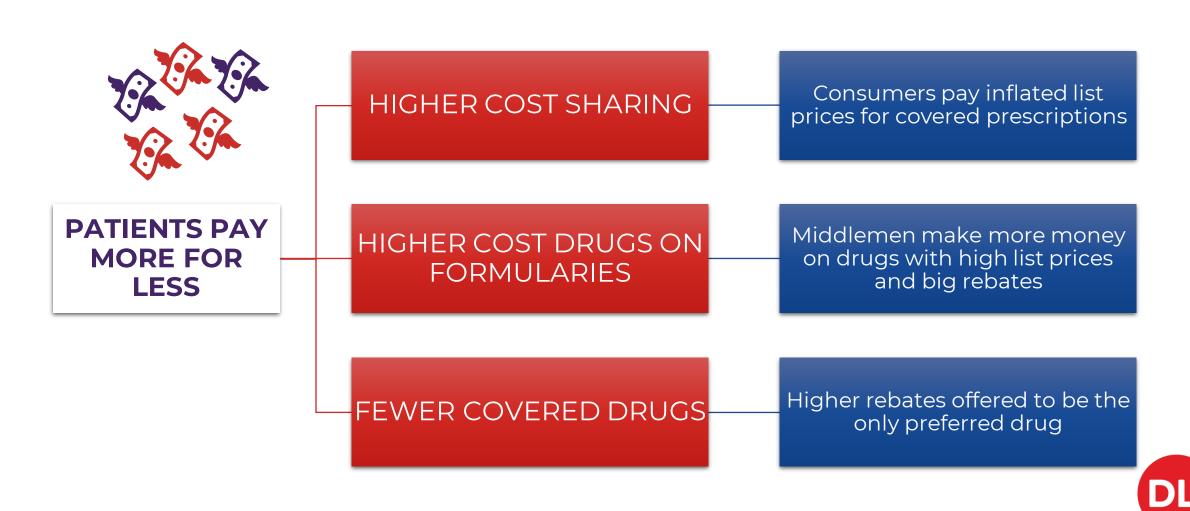
REBATE PASS THROUGH

PATIENTS BENEFIT FROM:

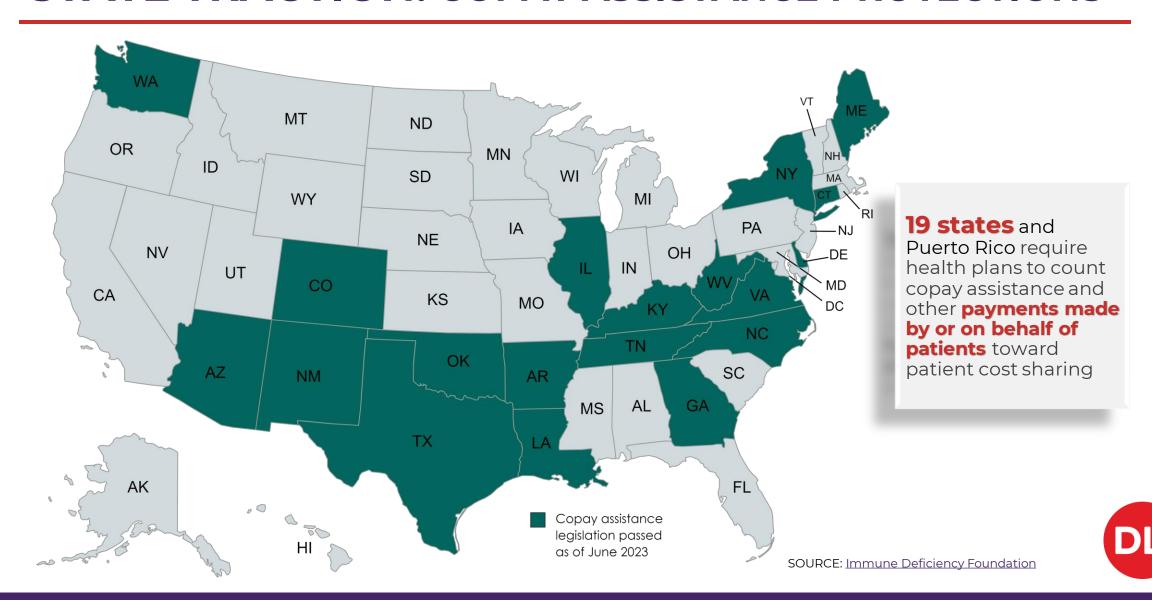
- Prescription drug payments made on their behalf
- Prescription drug discounts negotiated on their behalf



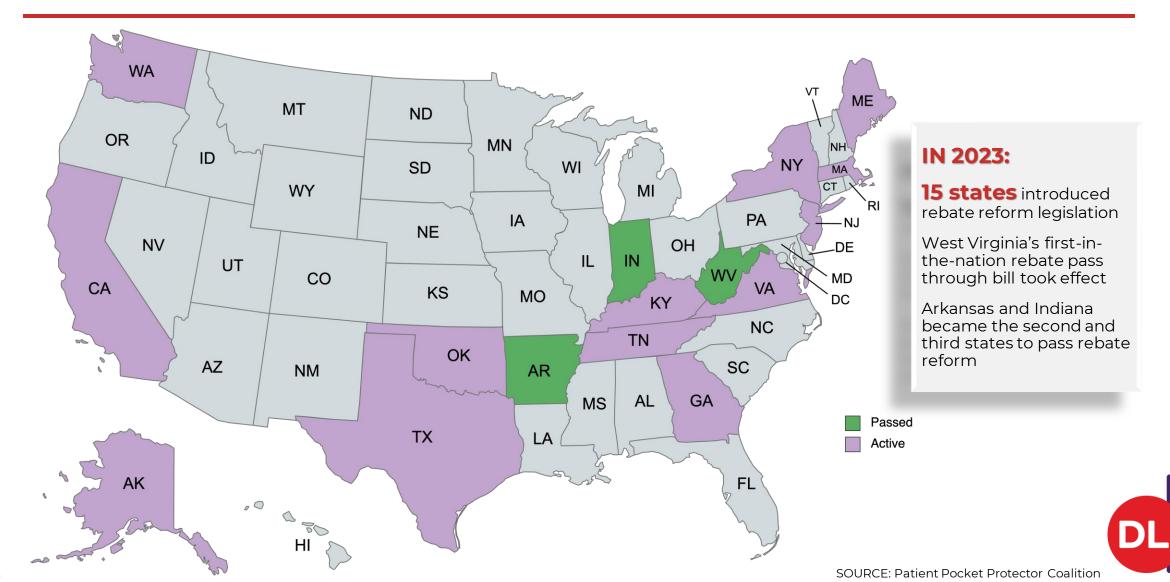
SYMPTOMS OF A BROKEN SYSTEM



STATE TRACTION! COPAY ASSISTANCE PROTECTIONS



STATE TRACTION! REBATE REFORM



THE SICK SUBSIDIZE THE HEALTHY

DIABETES	REBATE ²
Fast-acting insulins	73%
Intermediate- or long-acting combination insulins	71%
Long-acting insulins	63%
Combinations of oral blood glucose lowering drugs	65%
DPP-4 inhibitors	64%
GLP-1 analogues	38%

OBSTRUCTIVE AIRWAY DISEASES			
Selective beta-2-adrenoreceptor agonists	64%		
Adrenergics in combination with corticosteroids or other drugs	67%		
Glucocorticoids	69%		

PEOPLE WITH CHRONIC CONDITIONS OVERPAY WHEN REBATES AREN'T SHARED

REBATES AVERAGE 48% ACROSS ALL BRANDS & CHRONIC CONDITIONS¹

OTHER CONDITIONS	REBATE ²
Incontinence	58%
Hepatitis C	47%
Ulcerative colitis	44%
Blood clots	43%
Menopause	35%
HIV	29%



^{1.} National Bureau of Economic Research working paper 28439 https://www.nber.org/papers/w28439

^{2.} Kakani P, Chernew M, Chandra A. Rebates in the pharmaceutical industry: evidence from medicines sold in retail pharmacies in the U.S. March 2020. NBER Working Paper 26846. https://www.nber.org/papers/w26846.

FEDERAL TRACTION

REDUCING PRESCRIPTION DRUG COSTS REQUIRES BETTER TRANSPARENCY & ACCOUNTABILITY ACROSS THE SUPPLY CHAIN

FEDERAL TRADE COMMISSION



- Investigating the 6 largest PBMs' impact on U.S. prescription drug access and affordability
- FTC's inquiry will shed much-needed light on PBM practices impacting patients and pharmacies
- Recently expanded to include additional PBM entities

118th CONGRESS



Since January launched an unexpected (but much-needed!) bipartisan, bicameral examination of the prescription drug supply chain:

- Hearings
- Investigations
- Legislation

PUBLIC BENEFIT CORPORATIONS



- Public benefit corporations and some for-profit entities are shedding light on misaligned incentives in current system
- Helps plan sponsors and policymakers deliver more patient-centered and evidence-based transparency and accountability



CONSOLIDATION & INTEGRATION

Vertical Business Relationships Among Insurers, PBMs, Specialty Pharmacies, and Providers, 2023



- 1. Since 2021, Prime's Blue Cross and Blue Shield plans have had the option to use Express Scripts or AllianceRx Walgreens Pharmacy for mail/specialty pharmacy services. IN Dec. 2021, Walgreens purchased Prime Therapeutics' 45% ownership interest, so this business had no PBM ownership as of 2022. Effective June 2022, the company was rebranded as AllianceRx Walgreens Pharmacy Services.

 2. Centene has announced that it would outsource its PBM operations to Express Scripts in 2023. Centene rebranded its pharmacy Services.
- 3. In 2021, Centene sold a majority stake in its U.S. Medical Management to a group of private equity firms.
- 4. Since 2020, Prime has sourced formulary rebates via Ascent Health Services. In 2021, Humana began sourcing formulary rebates via Ascent Health Services for its commercial plans.
- Previously known as Evernorth Care Group and Cigna Medical Group.
 In 2021, Cigna's Evernorth business acquired MDLive.
- 7. In 2022, Cigna invested \$2.7 billion for an estimated 14% ownership stake in VillageMD. Walgreens gwns a maigrity of VillageMD.
- 8. In September 2022, CVS Health announced its acquisition of Signify Health. In February 2023, CVS announced its acquisition of Oak Street Health. Both transactions closed in 2023.
- 9. Previously known as IngenioRx.
- 10. In 2021, Partners in Primary Care and Family Physicians Group businesses were rebranded as Centerwell Senior Primary Care.
- 11. in 2022. Kindred at Home was rebranded as Center/Well Home Health. in 2022, Humana amounced an agreement to divest its majority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seniority interest in Kindred at Home's Hospice and Personal Care Divisions to Clayton, Dubilier & Rice, Humana also announced plans to close a majority of its Seni





LET'S FIX THE BROKEN SYSTEM

WE CAN CONTINUE REQUIRING SICK PEOPLE TO PAY:

- More than the negotiated plan rate for prescriptions so intermediaries can pocket the spread
- Above-market prices to "keep premiums down" for everyone else (but not really)

OR WE CAN FIX IT





Less Talk, More Action

We need politicians and lawmakers to start putting their talk into action. Keep your commitment to the 100 million people with pre diabetes and diabetes enabling them to achieve better health outcomes.



RESOURCES FOR CHANGE-MAKERS



- Subject matter experts
- Policymaker briefings
- · Consensus statement
- Issue briefs



- Grassroots advocates
- State score cards
- Advocate training
- Diabetes & obesity handbook *coming soon





THANK YOU

contact@diabetesleadership.org diabetesleadership.org