Employer Rx Value Assessment Framework: Building the Bridge to Sustainability

SUPPORTING HEALTHCARE DECISION-MAKING

- Patients and their doctors use frameworks to choose among therapy options.
- Employers/payers use frameworks to determine how therapies will be covered and reimbursed.

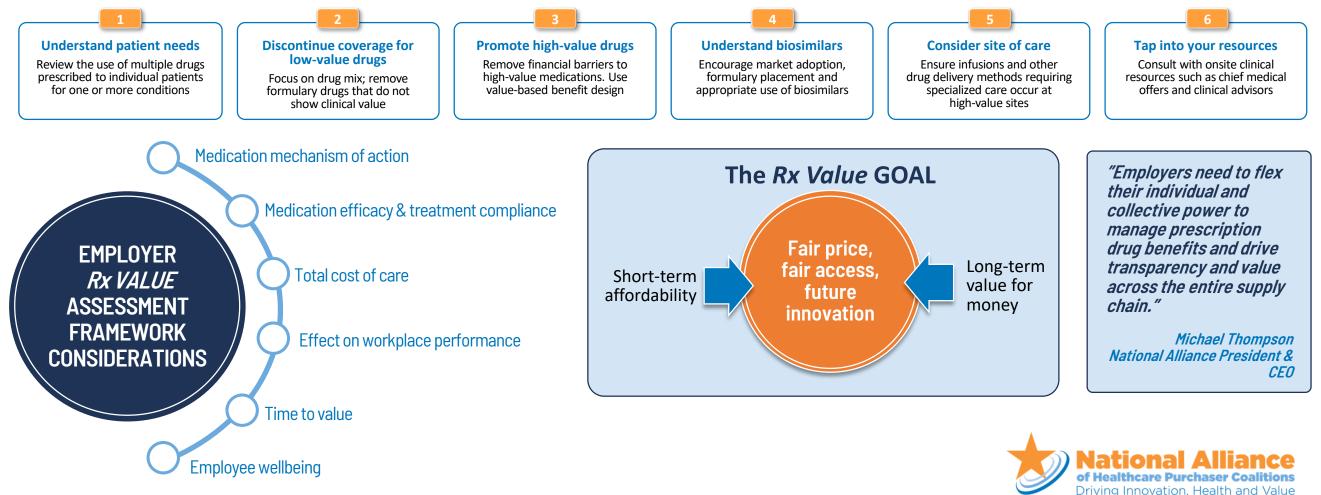
Today's Rx value frameworks' shortcomings

- Do not consistently address employer or employee needs.
- Are highly influenced by business models of intermediaries (payers, PBM, providers).
- Have methodologies that may not factor in the nuanced and personalized needs of organizations and people.
- Lack consideration of "real-world" evidence of impact and performance.

Enhancing our approach to Rx value frameworks

- Integrate employer- and employee-relevant measures.
- Enhance transparency of reviews of new/existing drugs and therapies, including costs.
- Feature relevant outcomes for use in value-based contracts (VBCs).
- Identify tactics for employer-based VBCs independent of rebates.
- Offer practical, actionable materials for effective dissemination.

Action Steps for Employers/Purchasers to Regain Control Over Prescription Drug Benefits Management



*Framework models reviewed by the National Alliance include the American College of Cardiology-American Heart Association; American Society of Clinical Oncology; DrugAbacus; Institute for Clinical and Economic Review; Innovation and Value Initiative; National Cancer Care Network; Patient Perspective Value Framework.

Moving the System Forward: Areas of Focus

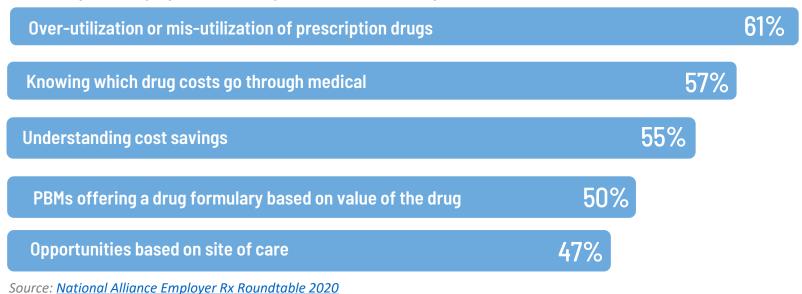
All stakeholders should re-examine their approach to managing Rx value to be

more responsive to the needs and expectations of patients and purchasers.

MEDICATION MECHANISM OF ACTION	MEDICATION EFFICACY & TREATMENT COMPLIANCE	TOTAL COST OF CARE	EFFECT ON WORKPLACE PERFORMANCE	TIME TO VALUE	EMPLOYEE WELLBEING
 Does it fill an unmet clinical need or is it a "me, too" drug? Does administration require special care/facility? What is the timeline to clinical impact? 	 Adherence concerns (e.g., 30-day vs. 60-day). Evidence provides insights into – and solutions for – concerns. Personalized medicine to identify candidates for certain therapies. 	 Employer: Net drug acquisition cost, including all contributors to costs and rebates, recognizing PBM contracting transparency concerns. Employee: Total out-of- pocket costs. 	 Do employees have to leave work to have the drug administered? Will the drug affect cognitive status? Is job safety a concern? Will the drug shorten lost work time? 	 Length of drug therapy; cost evaluation. Does the drug accelerate the path to health improvement? Benefits of treatment to the employee and the employer? 	 Supporting an organizational culture of caring. Employee loyalty based on thoughtful employer benefits. Long-term benefits for employers and employees.

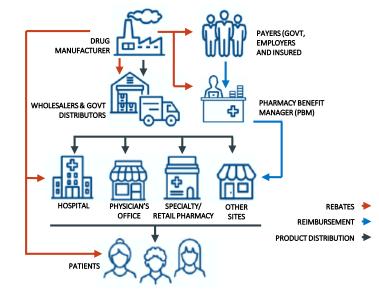
KEY CHALLENGES WITH MANAGING DRUG TREND (BESIDES COST)

Percentage identifying issue as a major or medium challenge



DRUG VALUE SUPPLY CHAIN

A circuitous route from drug manufacturer to patient



Data adapted from Janssen Global Services, LLC, 2018 Jannsen U.S. Transparency Report (Jannsen, March 2019), 21.

National Alliance of Healthcare Purchaser Coalitions | 1015 18th Street, NW, Suite 730 Washington, DC 20036 | (202) 775-9300 | nationalalliancehealth.org |twitter.com/ntlalliancehlth | linkedin.com/company/national-alliance/