
DRUG BENEFIT NEWS

2015 Outlook

Formulary Aside, PBMs Deploy Patient-Centric Hep C Approaches

Hepatitis C is the top priority for many payers when it comes to managing specialty pharmacy, according to *DBN's* annual poll of PBM officials, health plan pharmacy directors and industry experts. Now that multiple oral therapy options exist within the category, including the newly approved Viekira Pak (see story, p. 1), formulary management will certainly play a role in payers' efforts to contain hepatitis C costs. But PBMs are also deploying patient-focused programs to avoid waste and guide patients to therapy completion.

"New strategies will be adapting 'no coverage' until full review or P&T [pharmacy and therapeutics] review process occurs. This is likely to curb some of the initial uptake of products and validate the right criteria are in place for proper management," observes Phil DeNucci, R.Ph., managing consultant at *The Burchfield Group*. "As just seen with [Express Scripts Holding Co. and CVS Health], payers should follow the guidance of their PBMs for price negotiations and capitated reimbursement."

At the same time, an exclusive relationship with the pharmacy vendor (i.e., filling hepatitis C agents only through the specialty pharmacy) is recommended, adds Burchfield Managing Consultant Craig Oberg, R.Ph. "Specialty pharmacies have a better track record for managing a patient's adherence and compliance as compared to retail providers," he suggests.

Here's a look at how several industry players are sharpening hepatitis C management:

◆ *Catamaran Corp.'s* Hepatitis C Patient Management Program features "intense patient outreach and clinical reporting to encourage the patient to stay adherent to their treatment regimen," according to Sumit Dutta, M.D., senior vice president and chief medical officer. The company also offers a "comprehensive suite of clinical utilization management programs" that includes step therapy and prior authorization, and will "intervene when clinically appropriate." Furthermore, Catamaran's P&T committee will "carefully consider tiering choices and exclusions" in the category. "This is based on the characteristics of the drug in question, which must be weighed on their own merit and against the merits of competitive products for clinical effectiveness and value," he explains.

◆ *Cigna Corp.'s* overall specialty pharmacy strategy this year will include additional leveraging of its integrated health data to gain insights into "real world" outcomes. According to real-world data released by the insurer last month, members with hepatitis C who have been treated with a prescription combination including Sovaldi had a 91.1% cure rate, or sustained virologic response (SVR), when measured after a 12-week course of treatment. "Understanding these clinical results provides us with the opportunity to further address the affordability issue by exploring potential outcome-based strategies whether in hepatitis C as new entrants appear or in other high-cost treatment areas," says Christopher Bradbury, vice president, integrated clinical and specialty drug solutions, for Cigna Pharmacy Management. He adds that Cigna will continue to "invest heavily" in customer care support to ensure that hepatitis C patients adhere to their prescribed therapies and achieve the intended outcome.

◆ *Envision Pharmaceutical Services (EnvisionRxOptions)* says it will "remain focused on not just the initial appropriateness of therapy" for new oral agents, but on the ongoing management of the oral treatment regimens to ensure compliance, and monitor resistance in an effort to "avoid waste and maximize treatment outcome." Moreover, the "role of the specialty pharmacist will be less about monitoring adherence and will focus more on monitoring patients for drug/drug interactions that pose safety issues or lower efficacy (e.g., HIV regimens)," remarks EnvisionRx. The PBM will also adhere to newly updated American Association for the Study of Liver Diseases guidelines recommending the need for clinical monitoring to determine whether therapy should continue or be stopped. "Patients with detectable viral counts at week 4 would qualify for a two-week supply or split-fill," explains EnvisionRx. "Viral count should then be done again at 6 weeks. If no reduction is seen then the recommendation appears to be to discontinue therapy."

◆ *Independent Health* has implemented "drug clinical policy development through a community approach," according to Vice President for Pharmacy Martin Burruano, R.Ph. The Western New York insurer, which operates its own PBM, has "convened a clinical advi-

sory panel comprised of local community practicing infectious disease, hepatologists, and primary care physicians to provide community support for rational treatment protocols due to the high costs of treating these patients to ensure those most in need can be treated," he explains.

◆ **Navitus Health Solutions, LLC**, says it "coordinates a prior authorization with the specialty pharmacy to expedite any process approval that could lead to gaps in therapy." The PBM's specialty pharmacy, Lumicera Health Services, also uses clinical care pathways to help patients adhere to therapy for hepatitis C and other disease states and avoid medication waste. Navitus explains that it has a "thorough clinical pathway" for reviewing hepatitis C therapy at the start of treatment, seven days after the first prescription fill, 21 days after the first fill and with refills. In addition, the company is updating prior authorization protocols specifically around genotypes, and is "aggressive" if members fail to comply with therapy.

◆ **PerformRx's** two-fold strategy first involves the implementation of "more aggressive yet clinically appropriate prior authorization criteria for the entire spectrum of hepatitis C-related treatment regimens," remarks Mesfin Tegenu, R.Ph., president of Ameri-Health Caritas-owned PBM. "These new protocols are based on what we believe is the best clinical evidence available to date on the use of these products." The company has also modified its hepatitis C medication therapy management program to require "even greater patient contact" to ensure compliance for patients who qualify for treatment with the new agents.

◆ **Prime Therapeutics LLC** says it will deploy utilization management programs (i.e., prior authorization), engage in "care-centered contracting for reimbursement of hepatitis C treatment failures," and address adherence through pharmacy care management programs. ◆