

# The Crystal Ball for Cancer Policy in 2022



Ted Okon
Executive Director
Community Oncology Alliance



Rose Gerber, M.S.

Director of Patient Advocacy & Education
Community Oncology Alliance





# Today's Chat Agenda

- Updates: Community Oncology Alliance (COA) and COA's Patient Advocacy Network (CPAN)
- Review of the landscape impacting cancer <u>care</u> policy
- What to expect at the federal and state levels?
- COA's priorities for 2022
- What to expect in the midterm elections?

Learn more:

COA's Patient Advocacy Network: <a href="www.coaAdvocacy.org">www.coaAdvocacy.org</a>
Community Oncology Alliance: <a href="www.communityoncology.org">www.communityoncology.org</a>



### **Biggest Issues Relating to Cancer Care Policy?**

- Drug pricing, drug pricing, drug pricing
  - Cancer drugs are expensive
  - Many politicians love to bash pharma
    - Regardless of what pharma is doing to deliver vaccines and anti-virials in record times
  - Easy to point fingers at pharma, but actual problem is much more complicated
- Drug <u>price</u> to most (all) Americans means their out-of-pocket <u>cost</u>
  - The drug price is only relevant to the extent it relates to the out-of-pocket cost incurred
- Pharma on the hook for setting the underlying drug <u>list</u> price
  - List and net drug prices are going in different directions
- Drug cost is a function of several factors
  - Drug list price
  - Benefit design
    - Co-pay/co-insurance/deductibles
  - Provider mark-up
  - Insurer formularies



### Reality of Drug Price (List vs. Net) Dynamics

#### Brand-Name Drugs, Change in List vs. Net Price, by Company, 2020

Company	[A] Average list price change	[B] Average net price change	[A] - [B] Gross-to-net difference	Average reduction from list price
Eli Lilly and Company	+3.4%	-5.3%	-8.7%	-60.0%
Janssen	+3.8%	-5.7%	-9.5%	-53.0%
GlaxoSmithKline	+3.2%	-0.7%	-3.9%	n.a.
Merck & Co	+3.1%	+0.9%	-2.2%	-45.5%
Novartis	+3.7%	-0.2%	-3.9%	-46.8%
Sanofi	+0.2%	-7.8%	-8.0%	-54.0%
Unweighted average	+2.9%	-3.1%	-6.0%	-51.9%

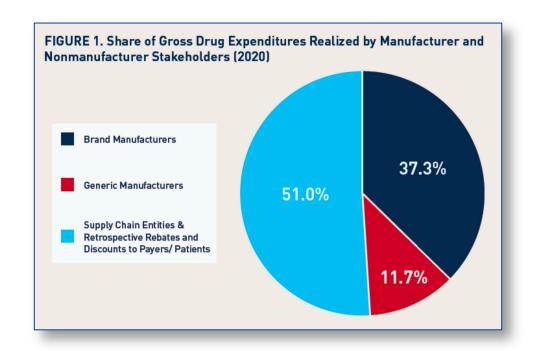
Source: Drug Channels Institute analysis of company reports

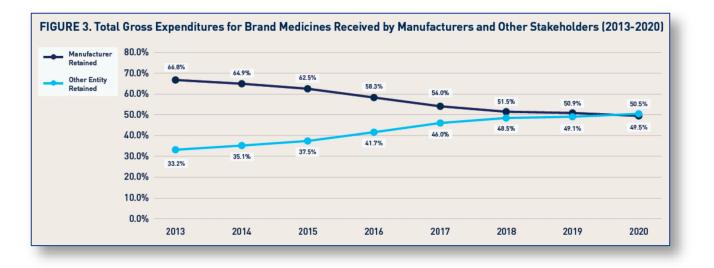
Published on Drug Channels (www.DrugChannels.net) on April 14, 2021.





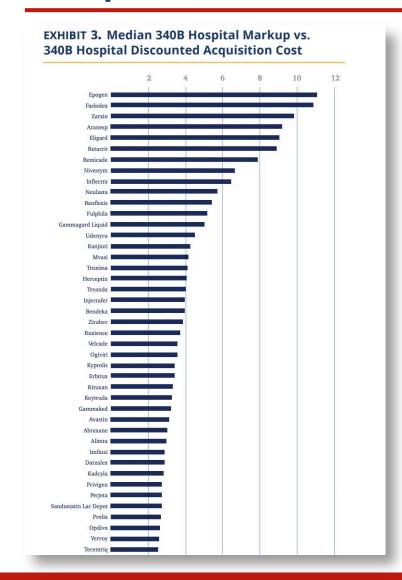
# More Reality on Drug Prices



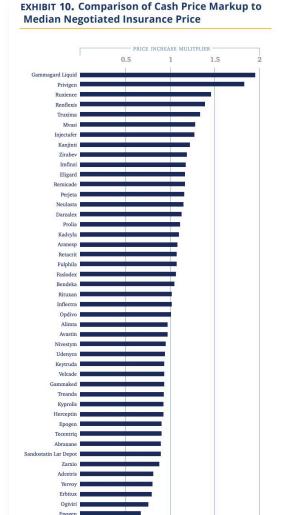




### **Hospitals Profit from Cancer Drugs**







340B hospitals charge virtually the same median price for cash paying or uninsured patients as they do for insurers

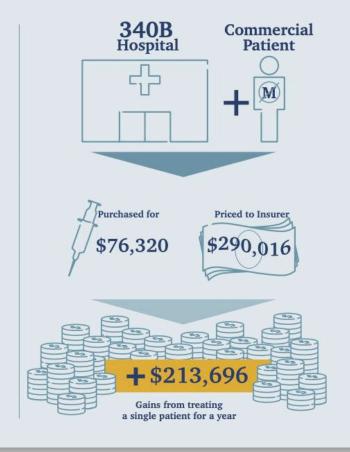


## Real Example of Hospital Drug Profits

#### **EXHIBIT 5. Price Breakdown of Darzalex Markups and Profit Across Care Settings and Payers**







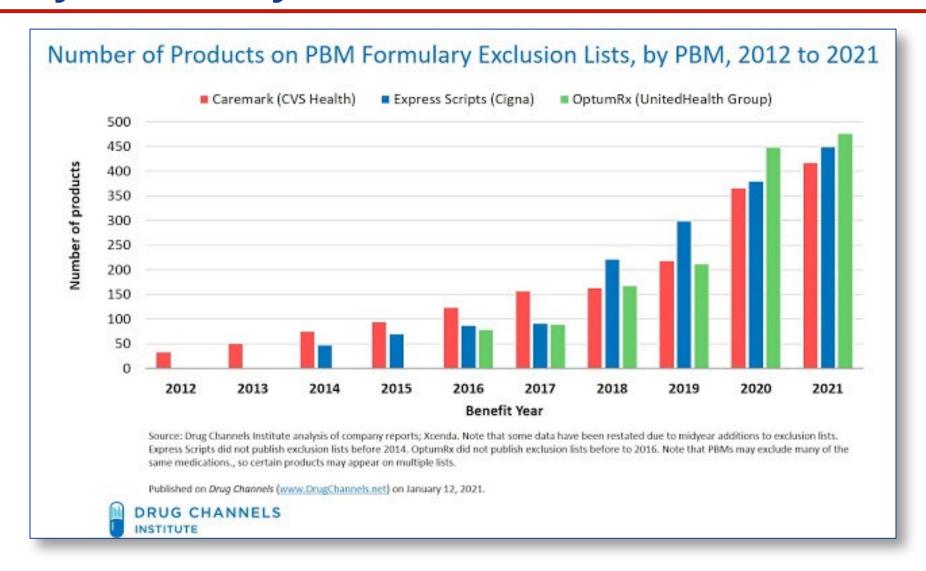


### **PBMs Profit from Cancer Drugs**

- Pharmacy Benefit Managers (PBMs) are top Fortune 100 corporations that control virtually all of the prescription drugs in this country
  - The top 3 PBMs, who are also tied to the largest health insurers, control upwards of 80% of all prescription drugs
    - CVS/Aetna, Express Scripts/Cigna, OptumRx/UnitedHealthcare
- PBMs profit from high drug list prices the higher the list price, the more PBMs profit
  - They extract (extort) rebates from pharma to include their drugs on formularies
  - They extract (extort) after-sale fees (DIR) from pharmacists
- Collectively, PBMs and their insurers adversely impact cancer care
  - Fuel drug list prices higher
    - Cancer patients pay off of list prices
  - Dictate (restrict) treatment and where it is given



### **Pharmacy Formulary Exclusions**





### Crystal Ball on DC Drug Pricing Initiatives

- Democrats in Congress tried to advance the Build Back Better Act to allow Congress to "negotiate" prescription drug prices in the Medicare program
  - Major problems with the BBBA approach to fix drug costs:
    - Deals with prices of drugs with no competition after they are on the market
      - Could even fuel initial drug list prices
    - Does not stop hospitals and PBMs from marking up and fueling drug prices
    - Puts oncologists and physicians in the middle of government and pharma "negotiations"
      - Puts undue financial exposure to oncologists making their practices not financially viable
  - BBBA now dead in the water
    - Democrats may try later this year to advance drug pricing legislation
- House Oversight & Reform Committee held a forum/hearing on PBMs

# **Comer: Congress Must Review PBMs' Role in Rising Prescription Drug Prices**

WASHINGTON—House Committee on Oversight and Reform Ranking Member James Comer (R-Ky.) **opened today's forum** on "Reviewing the Role of Pharmacy Benefit Managers in Pharmaceutical Markets" by emphasizing congressional oversight of rising prescription drugs must include an examination of pharmacy benefit managers' (PBMs) role.



### Crystal Ball on DC Drug Pricing Initiatives (continued)

- Biden Administration moved to force PBMs to disclose all after-sale fees (DIR) so drug costs are lowered for Medicare seniors at the pharmacy
  - First meaningful step to acknowledging that the "drug pricing" problem is not all a pharma problem
  - PBMs are a real problem

# **Biden Regulators Take Action on Hidden Pharma Monopolies**

A proposed rule would eliminate the ability of pharmacy benefit managers to extract profits after a prescription drug is sold.

BY DAVID DAYEN JANUARY 10, 2022

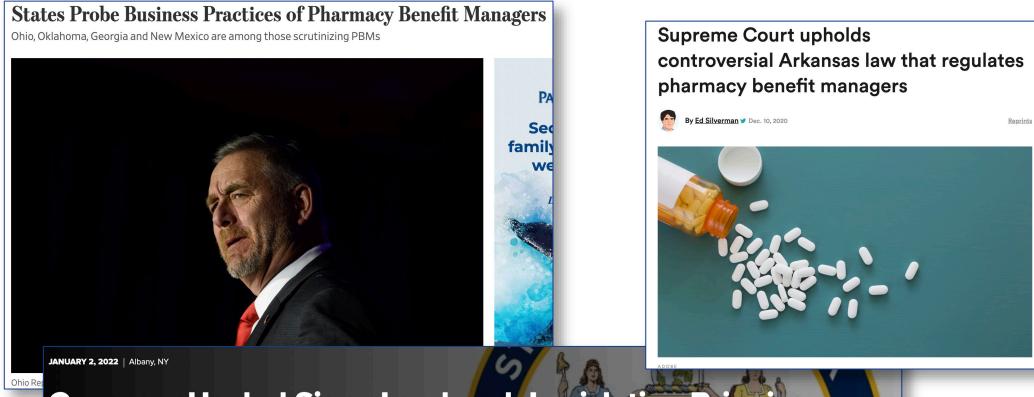


Pharmacy benefit managers such as Express Scripts are middlemen who negotiate prices between health plans and drug companies.

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### **Crystal Ball on State Drug Pricing Initiatives**



Governor Hochul Signs Landmark Legislation Bringing
Transparency and a Comprehensive Regulatory Structure to
Otherwise Unregulated Pharmacy Benefit Managers



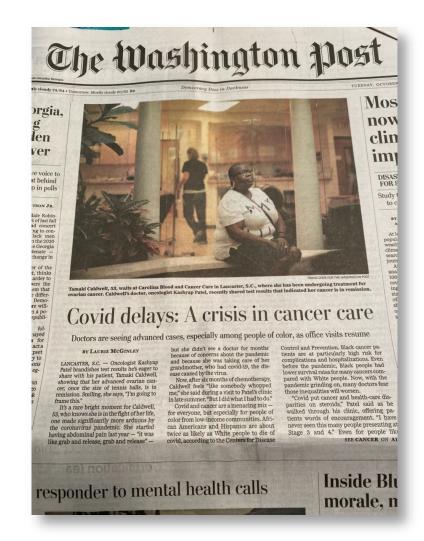
### **COA 2022 Priorities**

- Bring down treatment costs for cancer patients
  - Advance legislation that would provide pharma 340B discounts directly to patients in need rather than go to hospital profits
  - Advance legislation that would stop PBMs from denying and delaying cancer treatment,
     especially by restricting where patients can get their drugs
  - Support legislation and the Biden Administration in stopping PBM rebates and after-sale pharmacy fees that artificially fuel drug prices
  - Stop restrictive PBM and insurer tactics that limit cancer patient treatment options
  - Advance the use of effective but less expensive biosimilar drugs
- Stop misguided public policy that puts community oncology practices in undue financial harm's way leading to clinic closings and mergers into expensive hospital systems



### COA's 2022 Priorities (continued)

- Continuing to help practices navigate COVID-19
  - Heighten the awareness of the adverse impact of COVID on cancer screenings and treatment
  - Launched a MAJOR PSA campaign, "Time to Screen," on the importance of cancer screenings
- Work with employers to understand how they can provide their employees with the highest quality, most affordable cancer care close to home





### Crystal Ball on the Midterm Elections?

- As of now, Republicans take the House and Senate
- Threat of Democrats losing the House and Senate forcing them to go big on issues, like drug pricing, rather than taking an incremental approach
- \$60,000 question is will a divided government bring policymakers together or just further divide them?
- Republicans likely will put less emphasis on pharma in drug pricing investigations and more on the middlemen like PBMs



### Thanks!



#### **Ted Okon**

Email: <a href="mailto:tokon@COAcancer.org">tokon@COAcancer.org</a>

Web: www.CommunityOncology.org

Twitter: @TedOkonCOA



### Thank You to Ted Okon & Our Listeners!

Don't miss our next advocacy chat Wednesday, February 2, 2022, 12:00 PM – 12:30 PM ET

### The Financial Crisis of Cancer



Carla Tardif
Chief Executive Officer
Family Reach