



Employers' Forum of Indiana All-Stakeholder Meeting

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AGENDA



Welcome and Introductions



PBMs: What's the Buzz?



PBM Playbook Highlights



What You Should Demand From Your PBMs



Break



PBM Panel Discussion



LET'S TALK ABOUT DRUG COSTS



https://www.centralmaine.com/2017/09/19/todays-editorial-cartoon-1393/

SOME (BUT NOT ALL) FRUSTRATIONS



Chasing Rebates: Just because a PBM touts large rebates, does not mean pharmacy spend is lower.



Specialty Drugs: Drug prices are increasing, and most of the cost drug cost for employers is linked to a small number of individuals on specialty medications.



Utilization Management & Prior Authorization: There are pros and cons to UM and PA, but these are essentially built around the drugs with rebates, so don't assume these are always working to your financial benefit.

REBATE EXAMPLE



Dexcom

Cash Price at Sam's:

\$1,041.78

90-day supply



Libre

Cash Price at Sam's:

\$396.47

84-day supply

- Dexcom is approximately three times more expensive than Libre if you pay the cash price at a pharmacy. However, some PBMs will place one over the other on the formulary based on rebates
- Employers need to provide the most clinically effective medications and monitors, and reduce barriers for patients to manage their chronic conditions.

SPECIALTY DRUG TRENDS

	Percent of Total Patients		
	Non-Specialty Patients	Specialty Patients	Percent Specialty
2019	37,468	1,224	3.6%
2020	32,707	1,276	3.9%
2021	35,368	1,438	4.1%
2022	41,006	1,975	4.8%

Percent of Total Cost			
Non-Specialty Patients	Specialty Patients	Percent Specialty	
\$23,523,492	\$27,494,394	54%	
\$22,536,927	\$33,111,943	60%	
\$24,862,529	\$34,663,325	58%	
\$27,694,166	\$39,123,471	59%	

IT'S NOT JUST PBMS

Be sure to watch your drug spend on the medical side.



Rebates are hidden there, too!

- Ask for the savings through contracts
- Monitor J-codes
- Oncology is harder to manage



Gene therapy drugs are covered under medical.

Watch for carve-outs, or laser provisions