

**Your voice
matters.**

EACH  **PIC**
COALITION

*Ensuring Access through
Collaborative Health (EACH) & the
Patient Inclusion Council (PIC)*

*The PIC is part of a bigger coalition.
PIC participants include patients
and caregivers.*

Welcome!



CMS Medicare Drug Pricing Negotiation
Patient Experiences Driving Change

Wednesday, February 19
6pm ET/5pm CT/3pm PT

 **PATIENT
INCLUSION COUNCIL**

PATIENT INCLUSION COUNCIL


 **ENSURING ACCESS THROUGH COLLABORATIVE HEALTH**

Patient organizations & allied groups (doctors, pharmacists, etc.) who advocate for drug affordability policies that benefit patients.

 **PATIENT INCLUSION COUNCIL**

Patients & caregivers who participate in activities that ensure patient-reported needs are incorporated into drug affordability solutions.

WWW.EACHPIC.ORG

 EACHPIC  EACHPIC

 [COMPANY/EACH-PIC-COALITION](https://www.linkedin.com/company/each-pic-coalition)

This is a transparent, judgement-free space.

Who are we? People living with chronic conditions that require treatment with high cost prescription drugs. We are also leaders within the Patient Inclusion Council (PIC).

Who are you? We invited patients/caregivers as our primary audience, as we would like to inform you about CMS negotiation and make sure you know how vital it is to get involved. Feel free to introduce yourself, where you are from, why you are here, etc., in the chat.

Participation. Share experiences and concerns in the chat. Be respectful. You may submit questions using the Q&A, which can be anonymous.



It's just about putting patients in the pilot seat. If you support or do not support drug negotiations, if you love or hate insurance companies or pharmaceutical companies, it's not relevant to this conversation. This is about patients using our voices for change.



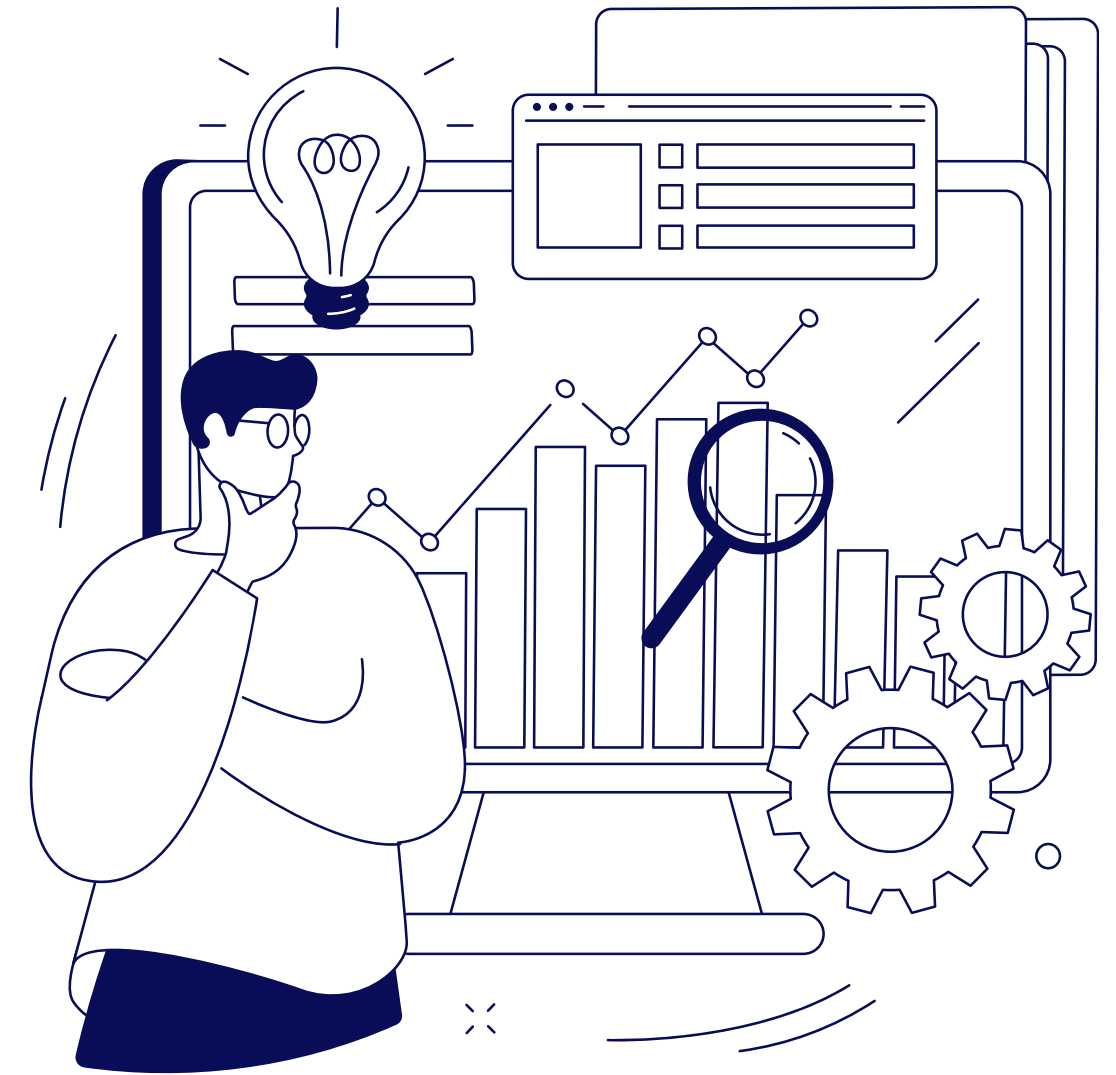
We will discuss opportunities and concerns regarding CMS. The goal is to encourage patients/caregivers to get involved.

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Q & A



Please submit your questions at any time. We will pause throughout the presentation/discussion to answer these. Any questions not answered, we will follow up afterwards!



Disclaimer/Transparency: As a non-profit, we accept funding from corporate donors, including pharmaceutical companies. However, our work to manage the Patient Inclusion Council is driven by addressing patient-reported issues and patient-infused solutions (data-driven, factual). Our corporate donors have no influence over the mission or objectives of our organization or any of the work we do. **We do not discriminate regarding who can support the PIC. Any entity who agrees to support our efforts must agree our work is and always will be led by what patients say is the truth.**

EACH/PIC is a program led by [AiArthritis](#) (International Foundation for [Autoimmune & Autoinflammatory](#) Arthritis), but is disease agnostic.

Drugs Selected for 2025 Review

Would go into effect in year this will go into effect in 2027

Drug	Condition	Drug	Condition
Ozempic, Rybelsus, Wegovy	Type 2 Diabetes, Obesity	Austedo	Chorea in Huntington's disease, Tardive dyskinesia
Trelegy Ellipta	Asthma, Chronic obstructive pulmonary disease	Breo Ellipta	Asthma, Chronic obstructive pulmonary disease
Xtandi	Prostate cancer	Tradjenta	Type 2 diabetes
Pomalyst	Multiple myeloma, Kaposi sarcoma	Xifaxan	IBS, Hepatic encephalopathy
Ibrance	Breast cancer	Vraylar	Schizophrenia, Bipolar Disorder, Major depressive disorder
Ofev	Idiopathic pulmonary fibrosis	Janumet	Type 2 diabetes
Linzess	IBS, Chronic idiopathic constipation	Otezla	Plaque psoriasis, Psoriatic arthritis, Oral ulcers
Calquence	Leukemia/Lymphoma		

What is a Medicare Drug Review/Negotiation?



The portion of Medicare that covers prescription medications is known as Medicare Part D or Medicare Advantage.



In 2022, the passing of the Inflation Reduction Act (IRA) gave CMS the authority to negotiate with drug manufacturers to **establish the price of a handful of drugs for Medicare Part D** each year. The negotiated price is called the Maximum Fair Price (MFP).

- Negotiations started last year. 10 drugs were selected for negotiation and those prices **for Medicare** will take effect in 2026.
- This year, CMS has selected 15 more drugs for negotiation, and those prices **for Medicare** will take effect in 2027.



Drug negotiations have been advertised as a victory for patients and a way to lower their out-of-pocket costs. However, healthcare is complicated. Patient costs may go down, but they also might not go down, and there could also be unintended consequences of the program. We don't know yet, which is why we need patients to share their experiences related to these drugs AND the diseases treated by these drugs.

NEW!

Since the negotiation process is still under construction, we (the patients) **MUST** make sure we participate and, in turn, help shape their work and make sure what we need is addressed as a priority.

It is a pilot project. So we need patients to be pilots.

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How does the drug negotiation work?

Drug Name	Commonly Treated Conditions*	Total Gross Presc Costs 2023-
Ozempic; Rybelsus; Wegovy	Type 2 diabetes; Type 2 diabetes and cardiovascular disease; Obesity/overweight and cardiovascular disease	
Trelegy Ellipta	Asthma; Chronic obstructive pulmonary disease	
Xtandi	Prostate cancer	
Pomalyst	Kaposi sarcoma; Multiple myeloma	
Ibrance	Breast cancer	
Ofev	Idiopathic pulmonary fibrosis	
Linzess	Chronic idiopathic constipation; Irritable bowel syndrome with constipation	
Calquence	Chronic lymphocytic leukemia/small lymphocytic lymphoma; Mantle cell lymphoma	
Austedo; Austedo XR	Chorea in Huntington's disease; Tardive dyskinesia	
Breo Ellipta	Asthma; Chronic obstructive pulmonary disease	
Tradjenta	Type 2 diabetes	
Xifaxan	Hepatic encephalopathy; Irritable bowel syndrome with diarrhea	
Vraylar	Bipolar I disorder; Major depressive disorder; Schizophrenia	
Janumet; Janumet XR	Type 2 diabetes	
Otezla	Oral ulcers in Behçet's Disease; Plaque psoriasis; Psoriatic arthritis	

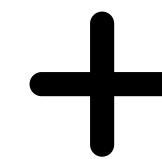


CMS selects a **handful of drugs that have high costs to them** and starts a formal negotiation process with manufacturers. **These are not drugs identified based on patient-reported needs.**



CMS asks all groups who are part of the complex prescription drug system to submit information to them about the drug under review.


Some include drug companies, insurance/Pharmacy Benefit Managers (PBMs) who pick the drugs on your drug lists, pharmacists, doctors, patient organizations, and **PATIENTS/CAREGIVERS**. roundtables, and a townhall. **Currently, VERY, VERY few patients are participating in these sessions and CMS is making decisions WITHOUT OUR INPUT.**



CMS - NOW through April

Patient Inclusion Council (PIC)

How does drug negotiation work?

 CMS wants to know about patient/caregiver experience with this drug, including experience with any “therapeutic alternatives”. Other questions they ask will be reviewed later!

 CMS proceeds with negotiation and publishes a list of final prices to establish the Maximum Fair Price (MFP) for each selected drug.

It is a pilot project. So we need patients to be pilots.

CMS defines Therapeutic Alternatives as “drugs that are used to treat the same condition or disease state as the selected drug; the Inflation Reduction Act (IRA) directs CMS to consider how the selected drug compares to therapeutic alternatives when negotiating.

What does this mean for me?

- **It's possible savings will be passed on to the patient, which is good for those on this drug.**
 - **However**, CMS expects plans may switch patients away from the negotiated drugs, possibly because plans won't be able to gain as much profit from a low cost drug.
 - Plans may adjust their formularies (preferred drug lists) to drive doctors/patients to other drugs that treat the same condition or disease (therapeutic alternatives).
- **This could mean:**
 - Medicare patients taking the drug under review could see changes to how those drugs are prescribed to them
OR
 - if a patient is diagnosed with a condition the drug under review treats, if that drug becomes the cheapest for Medicare, others could be asked to switch to it.

"CMS is concerned that Part D sponsors may be incentivized in certain circumstances to disadvantage selected drugs by placing selected drugs on less favorable tiers compared to non-selected drugs, or by applying utilization management that is not based on medical appropriateness to steer Part D beneficiaries away from selected drugs in favor of non-selected drugs."

Potential Outcomes

- Negotiated prices are price caps to the health insurance plans.
- Plan savings might or might not be passed on to patients.
- Plans still will be able to adjust how each medication is treated on their plans.

Outcome Options:

Concerns, having a voice is the best way to ensure great outcomes!

**Patient Costs Improve
Or
Patient Costs Do Not Improve**

**Diagnosis/Not on Drug -
Asked to Switch to
Negotiated Medication**

**On Drug - Drug not chosen -
Asked to Switch to an
Alternative Medication**

The impact of Medicare drug negotiations on individual patients still largely depends on their individual plan and how insurers/PBMs decide to handle the new pricing.

Potential Patient Impact: Reported Savings - Advertising

Drug Name	Participating Drug Company	Commonly Treated Conditions	Agreed to Negotiated Price for 30-day Supply for CY 2026	List Price for 30-day Supply, CY 2023	Discount of Negotiated Price from 2023 List Price	Total Part D Gross Covered Prescription Drug Costs, CY 2023	Number of Medicare Part D Enrollees Who Used the Drug, CY 2023
Januvia	Merck Sharp Dohme	Diabetes	\$113.00	\$527.00	79%	\$4,091,399,000	843,000
Fiasp; Fiasp FlexTouch; Fiasp PenFill; NovoLog; NovoLog FlexPen; NovoLog PenFill	Novo Nordisk Inc	Diabetes	\$119.00	\$495.00	76%	\$2,612,719,000	785,000
Farxiga	AstraZeneca AB	Diabetes; Heart failure; Chronic kidney disease	\$178.50	\$556.00	68%	\$4,342,594,000	994,000
Enbrel	Immunex Corporation	Rheumatoid arthritis; Psoriasis; Psoriatic arthritis	\$2,355.00	\$7,106.00	67%	\$2,951,778,000	48,000
Jardiance	Boehringer Ingelheim	Diabetes; Heart failure; Chronic kidney disease	\$197.00	\$573.00	66%	\$8,840,947,000	1,883,000
Stelara	Janssen Biotech, Inc.	Psoriasis; Psoriatic arthritis; Crohn's disease; Ulcerative colitis	\$4,695.00	\$13,836.00	66%	\$2,988,560,000	23,000

Let's Review 2024 List

You probably saw this table circulating around election time this year. It demonstrates the negotiated costs of the first 10 drugs selected for negotiation.

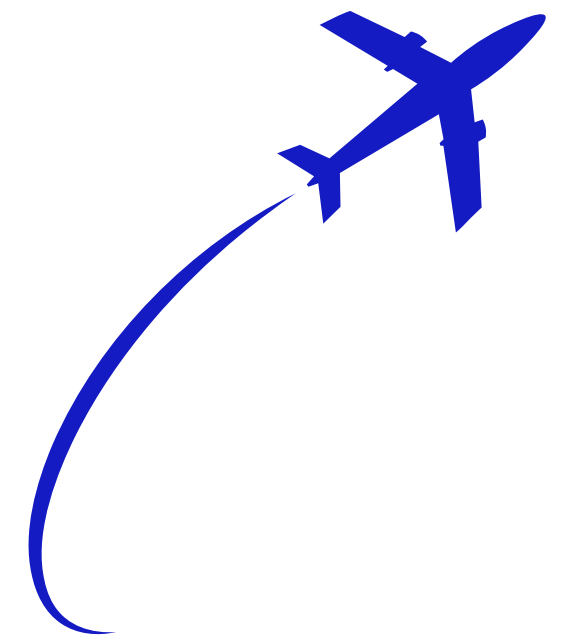
However, while this looks GREAT, this is not actually about patient costs. **It's about Medicare's costs (savings to the system).**

CMS has established a couple opportunities to provide feedback on the 15 drugs:

Written Comments

Submitted through an Information Collection Request (Form) - **Due March 1**

- **This is a little hard to navigate, so we have directions to help you.** [We also will be linking the original CMS directions, that include questions in full, in the chat.](#)
- **Are you interested? Example of questions (in simple terms):**
 - **Disease impact.** How your condition impacts your life: daily life, how has your condition changed over time?
 - **Challenges** faced managing your condition?
 - **Medication:** Why did you start taking it? Experience with it? Stopped, if so, why? Benefits? Side effects?
 - **Interesting, there is no question about affordability challenges? But there is an open ended box to add anything else you want CMS to know. *This is also a reason to get involved with the PIC - we are collecting this and will be making sure “affordability and unaffordability and WHY” is a focus.***



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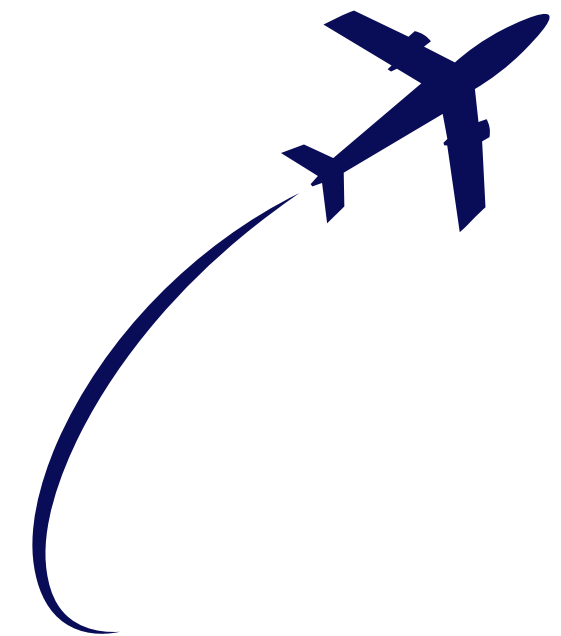
Participating in Events

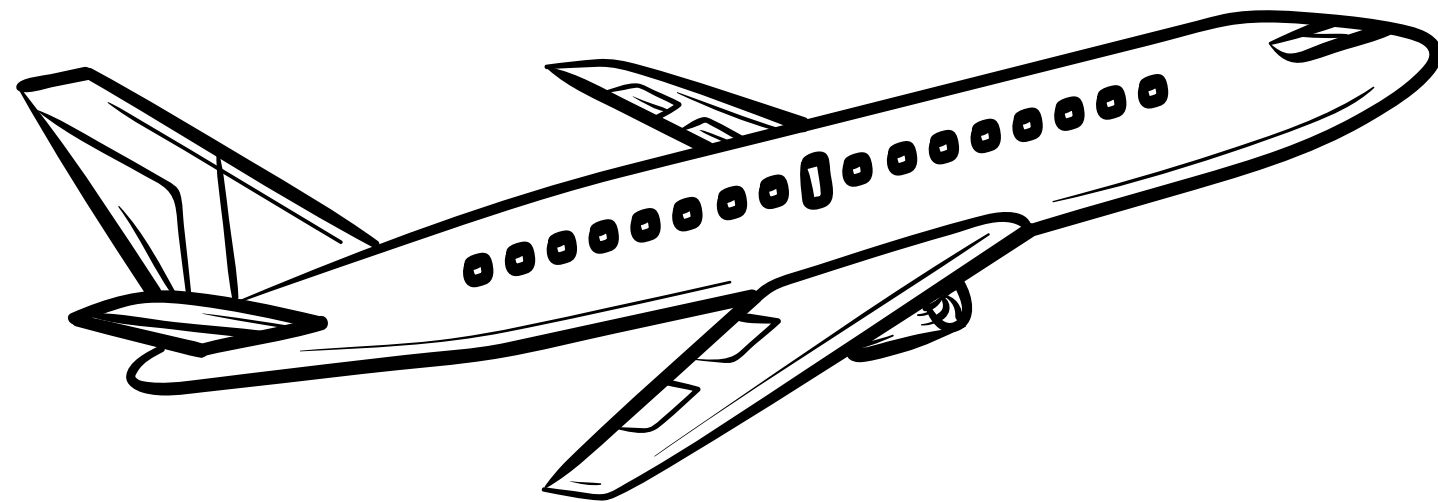
Patient/Caregiver Roundtables

- CMS will hold up to 15 roundtables for patients to share about their drugs
- Will ask questions and allow discussion among participants
- Patient organizations and patients/caregivers will both be invited to participate
- Roundtable events will be held virtually
- They will be recorded, but not “live”
- **By signing up to the PIC, you’ll have us to help you prepare!**

Opportunities from the PIC

- Let us help guide you to make sure your experiences are counted
- Take our survey!
- Communicate with CMS through our efforts
- Patient-led, leave opinions at the door, focus on sharing your truth and being a pilot!





THANK YOU

*Be a pilot for your own health
outcomes.*


Let us help you get there.

Interested in participating in anything
we talked about today?



eachpic.org/pic-voices/

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