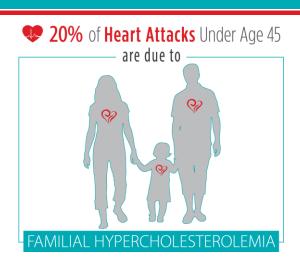
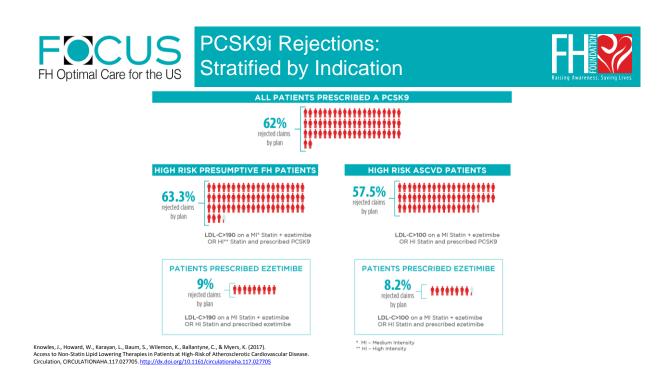


## FH: A Costly Burden



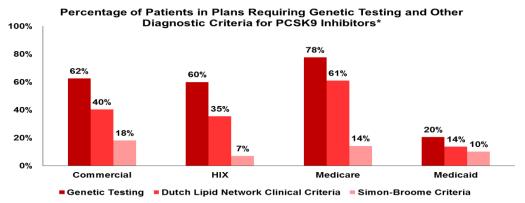
Hopkins P, Toth P. Familial hypercholesterolemias: prevalence, genetics, diagnosis and screening recommendations from the National Lipid Association Expert Panel on Familial Hypercholesterolemia. J Clin Lipidol. 2011 Jun;5(3 Suppl):S9–17.











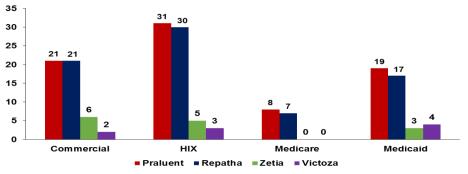
Doshi et al. Prior Authorization Requirements for PCSK9 Inhibitors across U.S. Private and Public Payers. *Circ Cardiovasc Qual Outcomes*. 2018 Jan;11(1):e003939. doi: 10.1161/CIRCOUTCOMES.117.003939.

\*Some forms allowed providers to choose which type of diagnostic confirmation to provide. The percentages of patients in plans that only listed genetic testing for diagnostic confirmation of FH on their PA form for Praluent were 38% commercial, 63% HIX, 29% Medicare, and 20% Medicaid. For Repatha, these numbers were 40% commercial, 50% HIX, 4% Medicare, and 19% Medicaid.





## Mean No. of PA Criteria or Fields on PA Form a Provider Must Complete to Receive Approval



Doshi et al. Prior Authorization Requirements for PCSK9 Inhibitors across U.S. Private and Public Payers. Circ Cardiovasc Qual Outcomes. 2018 Jan;11(1):e003939. doi: 10.1161/CIRCOUTCOMES.117.003939.









