

Who Treats Patients, Doctors Or Payers?



The 21st Century Question

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Presenting Faculty



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Disclosures

Served as Advisor or Consultant or National Speaker
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Key Points

- Clinician obligations are to their patients
- The Black Boxes
- Payers' Strategies to Control Prescribing of Medications

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Hippocratic Oath – The Original Proclamation of Doctors’ Duties to Their Patients

Original: 350 BC



Updated: 2017



- I SOLEMNLY PLEDGE to dedicate my life to the service of humanity;
- **THE HEALTH AND WELL-BEING OF MY PATIENT will be my first consideration;**
- I WILL RESPECT the autonomy and dignity of my patient;
- I WILL MAINTAIN the utmost respect for human life;
- I WILL NOT PERMIT considerations of age, disease or disability, creed, ethnic origin, gender, nationality, political affiliation, race, sexual orientation, social standing, or any other factor to intervene between my duty and my patient;
- I WILL RESPECT the secrets that are confided in me, even after the patient has died;
- I WILL PRACTISE my profession with conscience and dignity and in accordance with good medical practice;
- I WILL FOSTER the honour and noble traditions of the medical profession;
- I WILL GIVE to my teachers, colleagues, and students the respect and gratitude that is their due;
- I WILL SHARE my medical knowledge for the benefit of the patient and the advancement of healthcare;
- I WILL ATTEND TO my own health, well-being, and abilities in order to provide care of the highest standard;
- I WILL NOT USE my medical knowledge to violate human rights and civil liberties, even under threat;
- I MAKE THESE PROMISES solemnly, freely, and upon my honour.



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Who truly prescribes medicines to patients?

In 2001...

- 150 million off label prescriptions were written in the US
- 21% of all prescriptions written for 160 common medications in the US

Now, we can't even get approval for 'On-Label' Prescriptions.

Who's in Control?



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The “2 Black Boxes”

Innovations by Pharmaceutical/ Medical Device Companies & The Payers



- Costs of Developing Drugs/Devices
- Payers' Infrastructure
- Pharmacy Benefit Manger (PBM) Infrastructure
- Rebates – to whom and how much?

A Third Black Box?



LIMITED AND
FINITE FUNDS
"Protected by
Payers"

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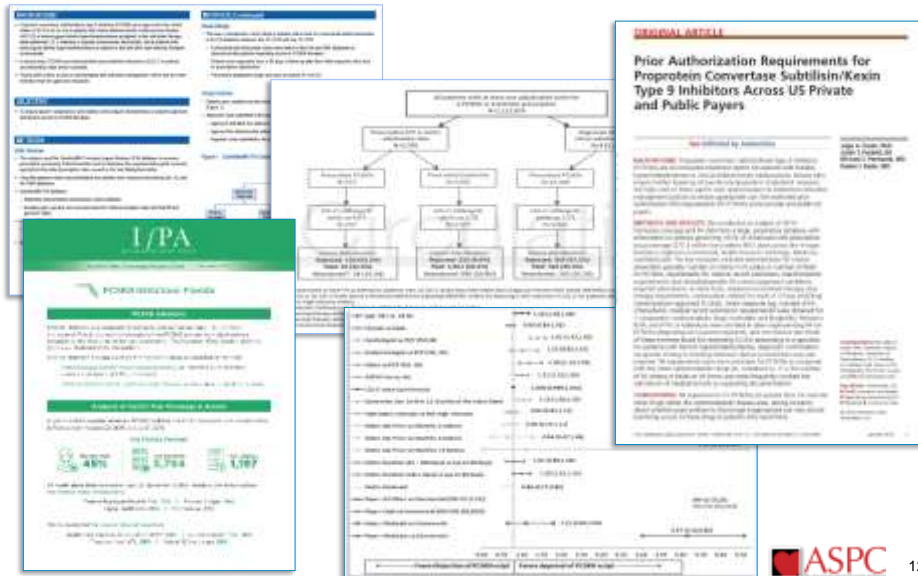
Payer Strategies to Limit Product Use: A Case Study

PCSK9i's FDA approved for use in patients with ASCVD and FH **BUT...**

- 83% claims rejected on first attempt
 - Flawed Utilization Management Process
- Higher approval rates with Medicare (57%) versus commercially insured (30%) – Oversight!



Barriers to Product Access: Published Literature



Important Terms Defined

Non-Medical Switching

When insurers reduce prescription coverage in a way that forces a patient to switch to a different treatment without any medical reason.¹

Step Therapy

A prior authorization program that encourages the use of less costly {yet effective} medications before more costly medications are approved for coverage.²

Prior Authorization

A feature of the prescription benefit plan that helps ensure {the appropriate use} of selected prescription drugs; designed to prevent {improper prescribing} or use of certain drugs that {may not be the best choice} for a health condition.³

1. <https://uspainfoundation.org/advocacy/keyissues/nonmedical-switching/>

2. Step Therapy: Frequently Asked Questions: CIGNA; 876395 08/14.

3. Prior Authorization. Caremark; 5274-13680b 02.08



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So... Who Treats Patients....
Payers or Doctors?
Who do you want taking care of you?



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July 27-29, 2018 – SAVE THE DATE!



Save the Date

ASPC

ASPC 2018
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The graphic features a stylized heart with a cactus silhouette inside it, set against a background of a desert landscape with mountains. The text is arranged in a clean, modern layout with various shades of purple and pink.