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Contact: Sheila Thelemann
Prime Therapeutics
Director, PR and Marketing
Communications
612.777.5508
sthelemann@primetherapeutics.com

New Study Finds One in Six Cancer Patients with High Out-of-Pocket Costs Not Filling Prescriptions

SAN DIEGO, CALIF., April 9, 2010– A new study presented today at the Academy of Managed Care Pharmacy's 22nd Annual Meeting finds that one in six cancer patients with high out-of-pocket (OOP) costs abandons their medication. The study by Prime Therapeutics (Prime), a thought leader in pharmacy benefit management, found patients with an OOP cost greater than \$200 were at least three times more likely to not fill their prescription than those with OOP costs of \$100 or less. The study suggests higher OOP costs for these oncology medications may negatively impact patient health as well as long-term health care costs.

While only 4.9 percent of members with an OOP expense of \$100 or less abandoned their medication, that number climbed to 6.5 percent for patients with an OOP expense between \$101-\$200, 16.1 percent for patients with an OOP expense of \$201-\$500 and 28.8 percent for patients with an OOP expense greater than \$500 ($p < 0.001$). In the study, one in five patients had an OOP expense greater than \$100.

"Cancer patients are faced with difficult financial choices, and this study suggests that high out of pocket costs may discourage many patients from filling their prescriptions," said Pat Gleason, PharmD, FCCP, BCPS, Director of Clinical Outcomes Assessment with Prime. "As the medications in the study work to cure active cancer, it is important to ensure these patients take their medications as prescribed to receive the health benefits and potentially avoid future costly hospitalizations and medical procedures."

Oral oncology medications are considered specialty drugs, which are high-cost therapies that often require complex care. While specialty drugs account for a small percentage of overall pharmacy spending today, costs are rising rapidly. In 2009, based on Prime Therapeutics' book of business, the average paid for a one-month supply of a brand oral oncology medication was \$2,942, a 17.6 percent increase over 2008. Because of the rapid increase in costs, insurers have looked for opportunities to best manage spending, including increased OOP costs.

"The results of this study suggest that increasing out-of-pocket costs for these oncology patients may actually have an adverse impact on patient health and therefore long-term cost management," said David Lassen, PharmD, Chief Clinical Officer, VP Clinical Services. "Through benefit design that takes into consideration the potential impact of out-of-pocket costs, plan sponsors may have a significant impact on patient care and on the total cost of health care down the road."

For the study, Prime researchers reviewed claims from more than seven million members from eight commercial Blue Cross and Blue Shield Plans in the Midwest and South to identify

members with a new claim for an oral oncology medication from July 2006 through June 2008. Patients with new claims were then classified as either initiating (defined as a paid oral oncology medication claim) or abandoning therapy (defined as an oral oncology medication claim which was subsequently reversed with no evidence of a paid oncology medication claim in the following 90 days).

The study looked at patients taking oral oncology medications including Gleevec[®], Iressa[®], Nexavar[®], Sprycel[®], Sutent[®], Tarceva[®], Tasigna[®] and Tykerb[®]. Members were then placed into one of the four following OOP expense categories: \$0-\$100, \$101-\$200, \$201-\$500, or >\$500 to determine the proportion of patients abandoning therapy in each.

The published study abstract can be found in the March 2010 issue of the *Journal of Managed Care Pharmacy* at <http://www.amcp.org/data/jmcp/141-168.pdf>.

Source

Gleason PP, et al. Oral Oncology Prescription Abandonment Association with High Out-of-Pocket Member Expense. *J Manag Care Pharm* 2010;16:161-162.

Prime Therapeutics is a pharmacy benefit management company dedicated to providing innovative, clinically-based, cost-effective pharmacy solutions for clients and members. Providing pharmacy benefit services nationwide to approximately 14.7 million covered lives, its client base includes Blue Cross and Blue Shield Plans, employer and union groups, and third-party administrators. Headquartered in St. Paul, Minnesota, Prime Therapeutics is collectively owned by 12 Blue Cross and Blue Shield Plans, subsidiaries or affiliates of those Plans. Learn more at www.primetherapeutics.com.

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