

Impact of the Inflation Reduction Act on Patient Assistance Program Enrollment for Oral Hematology and Oncology Medications Managed Through a Large Academic Medical Health System Specialty Pharmacy

The investigators declare no conflicts of interest

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Background

- Specialty medications used to treat hematology and oncology conditions continue to grow in utilization, however the cost design of these therapies is often unaffordable, particularly in the Medicare population.¹
- Literature cites that people with cancer are more likely to have financial toxicity than those without cancer, potentially leading to lower quality of life.²
- The Inflation Reduction Act (IRA) was signed into law in August 2022. Provisions affecting Medicare part D copays for patients took effect January 1, 2024. This new law lowers prescription drug costs for patients in a variety of ways including elimination of catastrophic copays and expansion of eligibility for low-income subsidy benefits.
- It is standard practice to assess patients for alternative copay assistance programs, however, grant funding for Medicare patients is criteria specific and contingent on availability.
- Patient assistance programs (PAP) provide a pathway for patients to receive medications and most health system specialty pharmacies (HSSP) help coordinate enrollment into these programs.

Objectives

To describe the impact of the IRA on PAP enrollment for patients receiving specialty oral hematology/oncology medications through an HSSP.

Methods

Study Design: This was a retrospective operational analysis of the number of PAP enrollment applications coordinated by the HSSP for prescriptions in quarter 1 of 2023 and 2024.

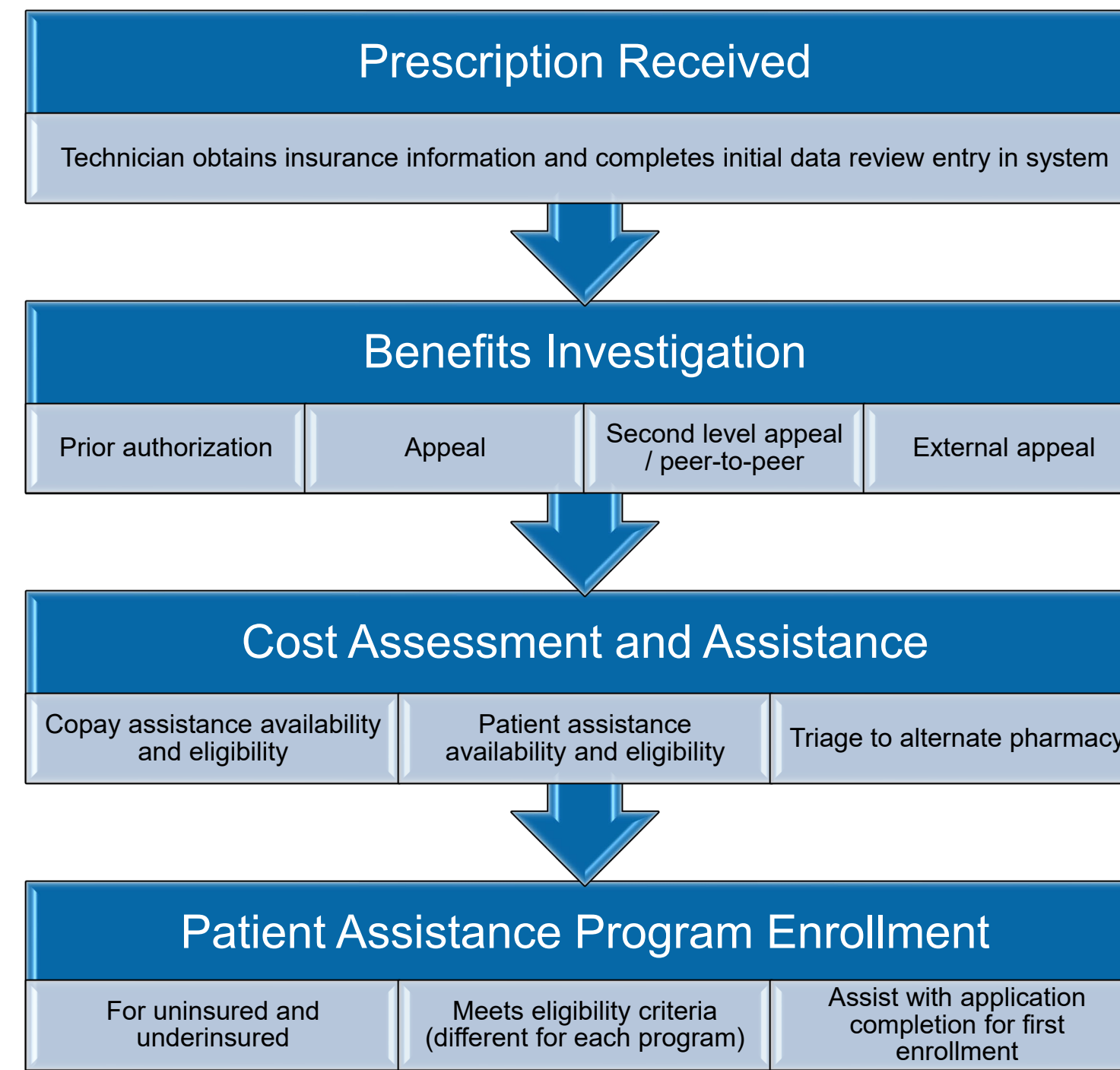
Data: Data included patient demographics, medication data, patient out of pocket cost, and primary insurance type.

Medication Cost Determination: For cost savings associated with PAP enrollment, the average wholesale price of drugs listed on Lexicomp[®] was utilized to determine 30-day cost savings.

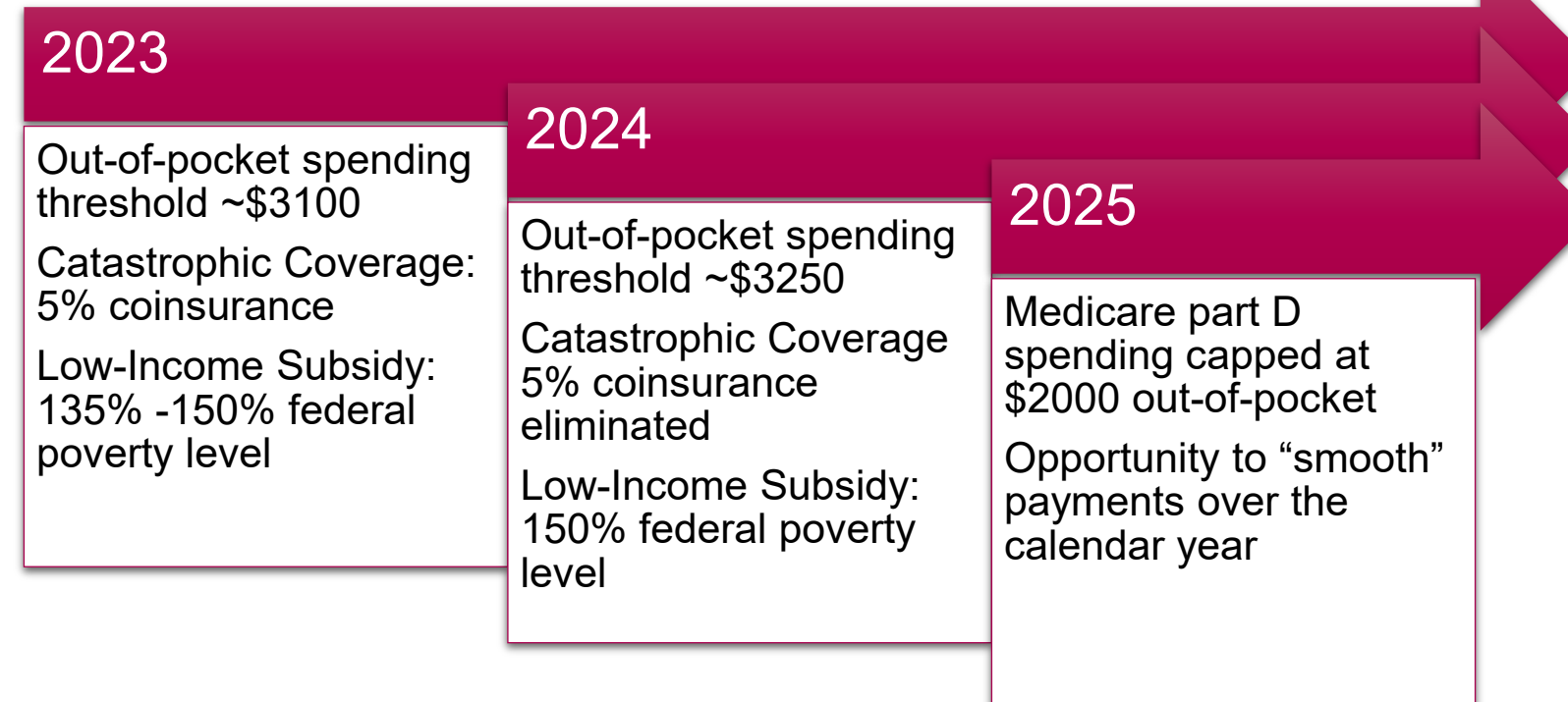
Sample: This analysis included hematology/ oncology orally administered prescriptions received by Cleveland Clinic Specialty Pharmacy that underwent benefits investigation between January 1 and March 31 of the year 2023 and 2024.

Definitions

Specialty Pharmacy Workflow



Inflation Reduction Act Medicare Part D Provisions Timeline



Results

Table 1. Patient Assistance Enrollment

	Q1 2023	Q1 2024	
Overall # of enrollments	163	88	↓ 46%
Total Cost Savings	\$2,866,341	\$1,758,536	↓ 39%
Total Out-of-pocket cost	\$611,400	\$351,273	↓ 43%

Table 2. Patient Assistance Enrollment Characteristics

	Q1 2023	Q1 2024	
Top 5 medications	Apalutamide (Erleada)		
	Venetoclax (Venclexta)	Lenvatinib (Lenvima)	
	Enzalutamide (Xtandi)	Cabozantinib (Cabometyx)	
	Ibrutinib (Imbruvica)	Everolimus (Afinitor)	
	Acalabrutinib (Calquence)	Relugolix (Orgovyx)	
Insurance Type Group	Government	142 (87%)	76 (86%)
	Non-Government	2 (1%)	2 (2%)
	Uninsured	19 (12%)	10 (11%)
Average Wholesale Price	\$17,585	\$19,983	
Average Out-of-pocket Cost	\$3,751	\$3992	
Average Out-of-pocket Cost (Medicare patients only)	\$2046	\$2197	

Results

Figure 1. Q1 2023 and Q1 2024 Coverage Type

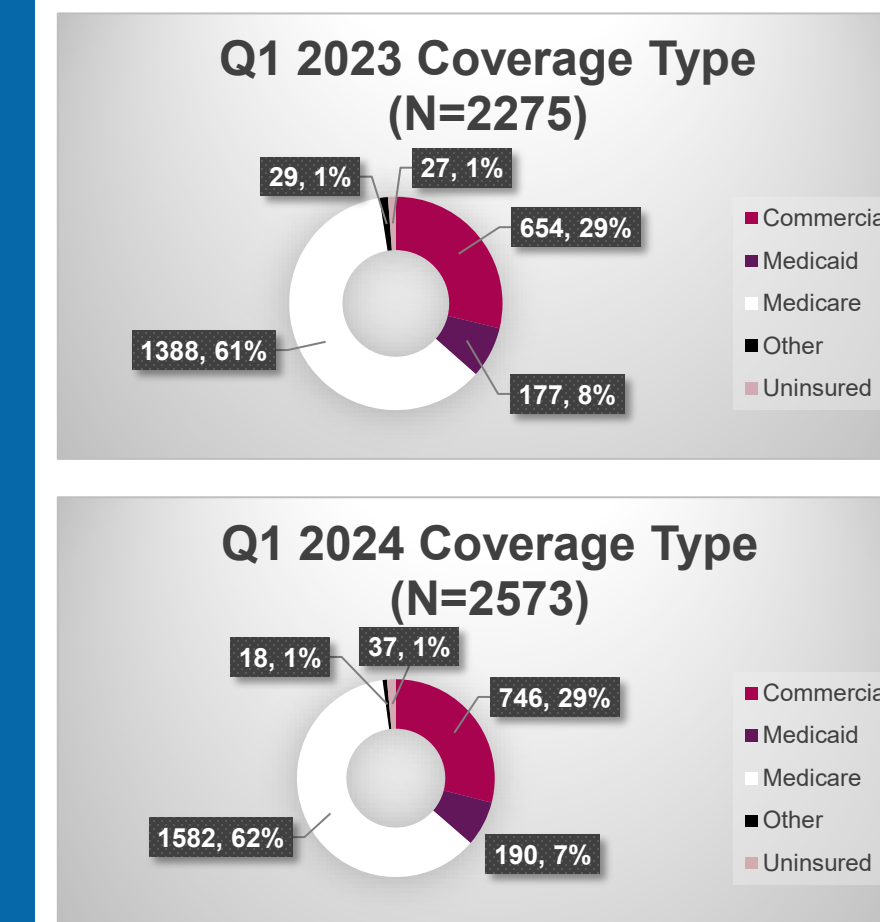


Table 3. Copay Assistance Characteristics

	Q1 2023 (%)	Q1 2024 (%)
Copay Assistance	607 (27% of all orders)	661 (26% of all orders)
Grants and PAP*	568 (41%)	584 (37%)
Specialty Pharmacy Assisted Enrollments*	142 (10%)	76 (5%)
Orders filled without any type of additional assistance**	637 (60%, n=1054)	810 (66%, n=1227)

*Medicare patients only. For Q1 2023, 1388 orders were reviewed and for Q1 2024, 1582 orders were reviewed.
**All orders were reviewed for outcomes (Filled at internal specialty pharmacy - Other Pharmacy, Alternate Treatment, Patient Assistance)

Conclusions

- This observational analysis demonstrates the impact the IRA had on patient assistance enrollment applications for the first quarter of 2024 at a single center large academic medical center specialty pharmacy.
- The percent of Medicare orders remained consistent in Q1 of 2023 and 2024, but the percentage of grants and patient assistance enrollments decreased and notably the amount of Medicare orders filled by the specialty pharmacy requiring no additional assistance increased from 60% to 66% of Medicare orders.
- Further elements of the IRA will go into effect January 1, 2025, with a yearly cap of \$2000 on out-of-pocket drug costs. This may further decrease the number of patient assistance program enrollments.
- Although this analysis indicates patients may have been able to afford their medication due to the changes resulting from the IRA, future investigation into the abandonment of therapy in Medicare patients resulting from financial toxicity would be beneficial to observe a more detailed picture of the full effects of IRA on patient access to medication.

References

1. National Cancer Institute. "Financial Toxicity (Financial Distress) and Cancer Treatment (PDQ®)-Patient Version - National Cancer Institute." www.cancer.gov. 29 June 2017. www.cancer.gov/about-cancer/managing-care/track-care-costs/financial-toxicity-pdq.
 2. Longo CJ. Linking Intermediate to Final "Real-World" Outcomes: Is Financial Toxicity a Reliable Predictor of Poorer Outcomes in Cancer? *Curr Oncol*. 2022;29(4):2483-2489. Published 2022 Apr 2. doi:10.3390/cancers29040202
 3. Centers for Medicare & Medicaid Services. "Inflation Reduction Act and Medicare | CMS." www.cms.gov. 12 Sept. 2023. www.cms.gov/inflation-reduction-act-and-medicare.
 4. "Anniversary of the Inflation Reduction Act: Update on CMS Implementation | CMS." www.cms.gov. 16 Aug. 2023. www.cms.gov/newsroom/fact-sheets/anniversary-inflation-reduction-act-update-cms-implementation.