Access to MS Medications

The Ask

- **Senate:** Include the patient perspective as Congress discusses access to medications; the Society’s Advisory Committee on Access to MS Medications’ recommendations will be available late Summer/early Fall
- **House:** Include the patient perspective as Congress discusses access to medications; the Society’s Advisory Committee on Access to MS Medications’ recommendations will be available late Summer/early Fall
- **Congress could play an important role in pulling all stakeholders together and facilitating open dialogue.**

What are people with MS facing accessing medications?

- Between 2004 and 2015, the average price of MS disease-modifying therapies (DMT) increased 300%. In 1993, the first MS medication cost $11,500 per year – today it is more than $70,000.
- DMT prices in the United States are 2-3x higher than in comparable countries.
- The MS medications are all considered specialty medications, a category associated with insurance restrictions like prior authorization, step therapy, formulary tiers, and co-insurance.
- In 2013, 67% of employer-sponsored insurance plans reported use of step therapy policies – an increase from just 27% in 2005.
- Co-insurance for MS medications can be as high as 40%.
- Valuable patient care time is spent managing insurance denials and other insurance issues; healthcare providers estimate office staff spend 20-30 hours per month addressing issues related to insurance coverage for MS medications.

Why is access to MS medications important?

- **Both innovation and affordable access are critical to ensure that people receive the medication and treatments they need.**
- A growing body of evidence indicates that early and ongoing treatment with a disease-modifying therapy (DMT) is the best way to modify the course of the disease, prevent accumulation of disability, and protect the brain from damage due to MS.
- The trend of increased out-of-pocket costs across all types of health insurance severely impacts people with MS who need an expensive medication every month for decades.
- People with MS who are new to treatment have a higher-than-average rate of stopping treatment. This is directly correlated to unaffordable out-of-pocket costs.

Possible Questions & Helpful Answers

Q. Nobody actually pays the list price of the medications. So how big a problem is this? It’s actually not clear what price anyone pays. We use the list price or average wholesale price to demonstrate the escalating prices, because that’s what’s available. As a consumer of healthcare, there is a lot of pressure on me to make smart, informed decisions but I often feel like I don’t have the information I need. We need greater transparency throughout the system, from all stakeholders.

Q. Medicare price negotiation is talked about a lot. What are your thoughts on that? Barriers to MS medications because of price and access issues are common in Medicare and all other types of coverage. We should start by understanding the patient perspective.