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Title: The US Payor Landscape For Specialty Pharmacy: Results from a Survey of Medical and Pharmacy  
Directors

Background: Specialty pharmacy (SP) products are pharmaceuticals designed to  
treat specific, complex chronic diseases. SP products are: written by  
specialists, have few prescribers/centers; and are costly; often  
require reimbursement assistance, prior approval, or special  
handling with unique/limited distribution processes. SP products

often special training to administer, and have patient adherence programs. In 2014 SPs accounted for one third of spending, up from 23% in 2009.

**Objective** Determine how medical and pharmacy directors (MDs+PDs) of US health plans, insurers, and PBMs manage specialty pharmaceuticals (SPs).

**Methods** Managed care (MC) MDs+PDs from public and private plans covering multiple types of members completed an online interactive survey of: advisor+plan information; use of specialtypharmacies, and current/future coverage of SPs.

Fifty-four percent of respondents were MDs, the remainder mostly pharmacists. Most worked for a health plan (83.6%) and the plans were: 39.6%=local; 35.4%=National; 25.0%=regional. SP providers were restricted by 53.7% of the plans, of those with restrictions: the majority restrict SP provider services to a small set under contract (63.0%), 17.4% allow any SP; and 6.5% only restricted products available through multiple specialtypharmacies. Plans covered clinician administered products (i.e., injections and infusions) under the medical benefit (MB=67.3%); none exclusively under the

**Results** pharmacybenefit (PB=0%); and 32.7% based on cost thresholds. Most plans (72.9%) do not anticipate a change, 18.8% expect a change before 12-2016 and 2.1% prior to 122018. Oral

Biologics (OBs) were managed under the PB 78.3%; 10.9% under the MB; the other 10.9% based on cost thresholds. Benefits for OBs are not expected to change by 71.1% of the plans, 11.1% were currently making changes; 13.3% expect changes prior to 122016; and 4.4% before 12-2018. SP and OB copays vary by group and benefit design and are shifting from fixed to percent copays. Responses to open ended questions placed SP products at the top causes for concern currently, and for the coming years.

**Conclusions** Expenditures for SP products and the use of specialty pharmacy will continue to grow. The environment for MC is undergoing a series of changes, and payer MD and PD, who commonly serve as P&T Committee members, have distinct opinions as to how to alter the process to adapt to these influences.

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and that  
funding for  
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