Objective

To examine real world data regarding utilization and cost of therapy in commercially insured patients treated with toxins, and to capture payer panel insights from a Medical and Pharmacy Director to and 1 year following the index date (1/1/2014-12/31/2016)

Methods

This retrospective study examined medical and pharmacy administrative claims data from 3 regional health plans (4.5M lives) to evaluate utilization and cost of toxins.

Qualifying patients were at least 2 years of age at index date, met eligibility criteria, with at least 1 paid claim for toxins during the measurement period (1/1/2014-12/31/2016)

The index date was the first toxin claim for each patient occurring during the measurement period

Patients were eligible for 6 months prior to and 1 year following the index date and categorized based on indication, including all adult and pediatric uses

Results were reviewed with an independent payer panel, comprised of health plan Medical and Pharmacy Directors

Given these results, the payer panel provided insight regarding current and proposed management strategies for toxins

Results

A total of 5,108 patients were included in the study

- Qualifying patients had a mean age of 46 years and 74% were female
- Toxin costs totaled $14.7M
- The most commonly used product was onabotulinumtoxinA with over 90% of patients, followed by incobotulinumtoxinA and abobotulinumtoxinA
- Toxins were prescribed for conditions related to migraine (39%), adult spasticity (7%), cervical dystonia (7%), any use in pediatrics (6%), and bladder disorders (3%) (Table 1 and Figure 1)
- Cost analysis considered differences in per unit billing costs, taking into consideration the variations in units associated with Healthcare Common Procedure Coding System (HCPCS) codes for each product

The most commonly used product was Botox® (onabotulinumtoxinA) (first to market), Dysport® (abobotulinumtoxinA), Xeomin® (incobotulinumtoxinA)

All toxins are not approved for all indications and toxin units are not interchangeable

Conclusion

Current toxin utilization favors a single product

The availability of other marketed toxin products offers flexibility to evaluate potential incremental cost savings and manage the toxin class in an evidence-based and financially advantageous manner, while allowing access for patients with conditions indicated for use of these products

In a collaborative discussion, health plan Medical and Pharmacy Directors determined these data support the potential benefit of implementing a clinical management strategy, to assist payers in managing toxins and optimizing the utilization of cost saving therapies

Disclosures

This research was conducted by Magellan Rx Management, Scottsdale, AZ, with external funding by Ipsen Biopharmaceuticals, Inc. • Botox® is a registered trademark of Allergan, Inc. Xeomin® is a registered trademark of Merz Pharma GmbH & Co. KGaA. Dysport® is a registered trademark of Ipsen Biopharm Ltd.