Introduction

- Lack of LDL control and plaque stabilization can be detrimental to health outcomes in members with ASCVD or familial hypercholesterolemia.
- The PCSK9 inhibitors require less frequent dosing compared to the statin they replace and can achieve non-statistically significant results.
- During the first year of PCSK9 inhibitors were on the market, approximately one-third of patients who received a prescription for these medications actually received the medication. In this observational study of 45,019 patients with PCSK9 inhibitors prescriptions only 27,279 reached approval through their insurance company and of those 34,747 never filled the medication.
- A 2017 study of 26,696 patients found 60-day non-persistence rates for PCSK9 inhibitors compared to high intensity statins to be non-statistically significant.
- As these medications continue on the market and changes to prior authorization criteria are encouraged, it will be beneficial to know if members are not receiving these therapies due to restrictive criteria or if members are choosing not to fill due to other factors.

Purpose

- To evaluate the persistence of PCSK9 inhibitor therapy in patients who have received prior authorization approval for any reason.
- To evaluate similarities and dissimilarities of characteristics between groups with higher persistence and approval rates compared to those who were denied or never filled post-approval.
- To evaluate the proportion of initial approvals, proportion of members who filled post initial approval, and persistence in relation to low-income subsidy (LIS) members compared to non-LIS members will be evaluated for a Medicare Part D Plan.

Methods

Study Design, Data Source

- Retrospective analysis of a Medicare Part D Plan derived from the Magellan database was performed for prior authorization requests and claims from January 1, 2016 to June 30, 2018 for all members requesting and filling alirocumab or evolocumab.
- A 6 month window following the index date of first prior authorization approval was allowed to assess persistence, as the initial prior-authorization approval per plan policy is 6 months in duration.
- Members were excluded if they received alirocumab or evolocumab without a prior authorization approval or if they were not plan members for at least a month.

Results

- The majority 66% (71) of members who requested re-authorizations were approved in terms of mean age, sex, number of concomitant medications, use of cardiovascular medications, use of diabetes medications, and use of statin therapy.
- The overall approval rate for PCSK9i therapy was 70% (241) and the proportion of those members who filled post-approval was 61% (147).
- The post-approval persistence of PCSK9 inhibitor therapy in members who received at least one fill post-approval during the initial 180 day approval duration was 127 ± 60.41 days.
- Persistence during the initial 180 day approval duration in relation to low income subsidy (LIS) members was calculated from the number of days supplied post initial fill until the 6th month following the index date or the medication was discontinued, allowing for a 30-day refill gap.

Conclusion

- Nearly three-quarters of members were initially approved for PCSK9i therapy, and there was no distinct difference between those who received approval and those who were denied.
- Overall, members were relatively persistent during the initial 180 day approval duration.
- Compared to early studies, initial approval rates have increased, while the percent of the population with no fills post-approval has remained relatively constant.

Disclosures

- This research was conducted by Magellan Rx Management, Scottsdale, AZ, without external funding.

References

3. Sanofi. 2019; Magellan Rx Management • Scottsdale, AZ.