Strategies to improve patient access to biological therapy

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New IBD Cases Diagnosed Annually
Groote Schuur Hospital + 5 private practice audits
September 2017

2,967 patients
Epstein Practice 2008 to 2017: New IBD Cases Annually vs. New Biologics Applications

24% of IBD patients have applied to start a biologic drug.
Confusion –
remission
postop recurrence
Active disease

Algorithms from 1950’s

No Anti TNF’s

CMS uses these algorithms
What is a PMB?

• Prescribed minimum benefit condition – CD, UC

• “set of defined benefits to ensure that all medical scheme members have access to certain minimum health services, regardless of the benefit option they have selected. The aim is to provide people with continuous care to improve their health and well-being and to make healthcare more affordable “
The Medical Schemes Act 131 of 1998 stipulates certain PMB conditions are governed by regulations and amendments. These regulations and amendments concern fees payable for Prescribed Minimum Benefits and Chronic Diseases and state that:

• “any benefit offered by a Medical Scheme must reimburse in full, without co-payment or the use of deductibles, the diagnostic treatment and care cost of prescribed minimum benefit conditions as specified in Annexure A.”
Biologic Access Challenges

- Outdated gazetted care plans
- Increasing demand
- Affordability
- Medical Plans - limited access and amount
- Co-Payments – 10% to 30%
- Patient knowledge re different options limited
- Decisions made with lack of insight
- Ex Gratia – financial services companies
- MCC - Section 21
- Limited State biologic slots
- No Biosimilars
Case:

- 10 years old
- Underweight
- Stopped growing
- “Difficult” at school - ? ADHD
- Diagnosed with CD.
- Cramping, fatigue
- Biologic = 30% co-payment - Medshield
- 6 month process
Biologics Available

• Anti TNF’s - certain plans types cover
• Vedolizumab - Section 21
• Guidelines - SAGES
Options Available

• Medical aids
• Ex Gratia
• ACIF
• Section 21
• Council for Medical Schemes
• Self fund
Medical Aids

• Most have annual biologic limit of R120 000
  • Discovery Comprehensive / Executive Plans
  • Momentum – State option – chronic disease - state

• Momentum/Medshield – 30% co-payment

• PMB treatment baskets outdated
Based on the approved chronic condition(s) for your patient, we will cover the following:

<table>
<thead>
<tr>
<th>Condition</th>
<th>Diagnosis</th>
<th>Procedure codes</th>
<th>Number of diagnostic tests we cover</th>
<th>Type of follow-up test</th>
<th>Procedure codes</th>
<th>Number of follow-up tests we cover</th>
<th>Number of specialist consultations we cover each year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crohn’s disease</td>
<td>Colonoscopy</td>
<td>1653 or 1656</td>
<td>1</td>
<td>Colonoscopy</td>
<td>1653 or 1656</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Erythrocyte sedimentation rate or C-reactive protein</td>
<td>3743 or 3947</td>
<td>1</td>
<td>C-reactive protein</td>
<td>3947</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Full blood count</td>
<td>3755</td>
<td>1</td>
<td>Full blood count</td>
<td>3755</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Histology</td>
<td>4567 &amp; 4571 or 4582 &amp; 4584</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The Chronic Medicine Review Committee has assessed this case as part of the appeals process. We regret to inform you that ongoing funding of Humira® has been declined.

GEMS would fund a biologic until the patient is in stable remission. According to the information available to us, [name] has been in remission since June 2015. There are no local guidelines regarding withdrawal of biologic therapy. A trial of oral treatment would be funded for patients in stable remission. In the event of a relapse, ongoing treatment with a biologic would be considered.

Yours faithfully
SAGES guidelines....

- Maintenance of remission in luminal CD 1. Long term regular scheduled anti–TNF therapy should be used to maintain anti-TNF induced remission in patients with luminal CD. The failure to follow a scheduled regimen may result in increased symptoms, flares and the need to escalate therapy or rotate to another agent.
Ex Gratia

- Underutilised
- Forms to be completed
- Waiting period
- Granted on understanding will upgrade at year end
- Sometimes a co-payment
- Some medical aids will not offer this
ACIF

- Access to Innovative Care Foundation, NPO
- Helps to cover co-payments and biologics
- Application forms
Section 21 - Vedolizumab

- Must have failed on Anti-TNF’s
- Forms - Section 21 (updated Aug 2017)
- MCC approval for 6 months then re-motivate.
- NOT available if under 18 years
Council for Medical Schemes

- Can overturn MA decisions
- Complaint against medical aid
- Lengthy Process
Self fund / “Donation” programme

• Short term

• Patient support
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24% of IBD patients have applied to start a biologic drug
Strategies going forward?

• Government legislation needs to be updated
• Medical Aids – appropriate treatment baskets
• Pressure on MCC to approve drugs
• Patient advocacy groups – CCUK, CCFA
Do what you can with what you have and when you have more, do better.