

Poster Supplement:

"Impact of the Inflation Reduction Act on Payer Drug Coverage and Utilization Management – Insights from a Quantitative Survey"



Varun Saxena, Jessica Liu, John Stahl, Dee Chaudhary, Alan He, Margaux Cornell Presented May 6, 2024

The IRA enables the government to directly negotiate the price Medicare pays for highly utilized medications

CMS¹ is negotiating the price of the following drugs, selected on the basis of high Medicare expenditure:

Therapeutic Area	Medications Selected for Negotiation in 2024	
Diabetes	Farxiga, Januvia, Jardiance, NovoLog	
Cardiovascular Conditions	Eliquis, Entresto, Xarelto	
Immunology	Enbrel, Stelara	
Oncology	Imbruvica Negotiated prices become effective Jan. 1, 2026	

Negotiation Timeline Additional therapies will be selected for negotiation on an annual basis 10 Part D drugs 15 Part D drugs 15 Part B & D drugs 20 Part B & D drugs 2027+ 2025 2026 2024 Prices become effective two calendar years after the year of negotiation

Under the IRA, CMS¹ must obtain at least a:

- 25% reduction in the non-FAMP³ price of negotiated drugs on market for 9-12 years
- **35% reduction** in the non-FAMP³ price of negotiated drugs on market for 12-16 years and
- **60% reduction** in the non-FAMP³ price of negotiated drugs on market for > 16 years OR
- Pay the drug's average net price after rebates to private payers, whichever is lower

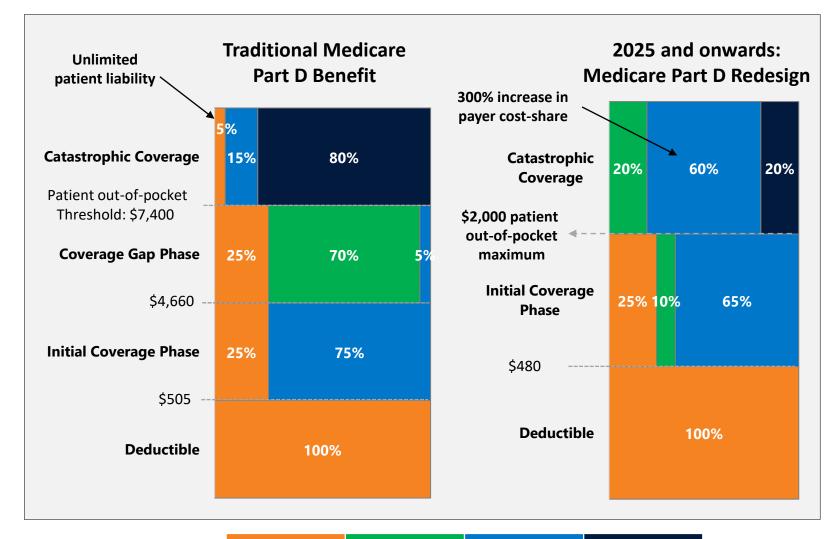
CMS¹ can negotiate for price cuts beyond the mandatory minimums described above. If a manufacturer does not come to an agreement with CMS on a "maximum fair price":

- Its selected drug will be subject to an escalating excise tax worth 65-95% of its sales
- Companies may avoid paying the tax by withdrawing all their drugs from Medicare and Medicaid



IRA Reform to Medicare Part D Benefit Design for Self-administered Prescription Drugs

Medicare



Key Changes

- Enrollees will no longer face unlimited liability in Part D due to the patient cost cap. (2024 is a transition year, and features a patient cost cap of ~\$3,500)
- Plans face 60% liability in the catastrophic phase, up from 15%
- Manufacturers see reduced discounts on lower-cost drugs due to elimination of "donut hole," but pay new 20% discount in catastrophic phase
- **Federal government** has reduced Medicare cost-sharing for high-cost drugs in the catastrophic phase (20% vs. previous 80%)
- Not depicted: 6% cap on Medicare premium increases, co-pay smoothing program allowing seniors to spread their out-pocketcosts out over time in monthly installments

Financial Obligation: Enrolled Seniors Manufacturers Private Plans



Author Contact Information

Please reach out if you have any questions about the content of the poster

Name	Title	Email
Varun Saxena, lead author	Associate Consultant	Varun.Saxena@clarivate.com
Mengyun Liu, primary co-author	Associate	Mengyun.Liu@clarivate.com
John Stahl, co-author & poster presenter	Partner	John.Stahl@clarivate.com
Dee Chaudhary, co-author & poster presenter	Principal	Dee.Chaudhary@clarivate.com
Alan He, co-author	Director	Alan.He@clarivate.com
Margaux Cornell, co-author & poster presenter	Senior Consultant	Margaux.Cornell@clarivate.com

