

# Pharmacy Benefit News

Issue # 267 | October 29th, 2015

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## Specialty Spotlight

### Stop Hormone Therapy After a Heart Attack?

“Postmenopausal women may get some vascular protection from hormone therapy during a first heart attack but should stop the treatment afterward because it could increase the risk of a second attack, researchers from Finland reported at the North American Menopause Society’s annual meeting (10-2-2015, abstract 5-13). Study data showed women taking hormone therapy were less likely to die from a heart attack before reaching the hospital and had lower fatality rates in the 28 days following an event.”

Source: [www.medscape.com/viewarticle/852283](http://www.medscape.com/viewarticle/852283) (free registration required) (10/7)

#### **Comment:**

It is easy to start therapy, but in my experience it is hard to stop. Once started, therapy for chronic conditions is rarely stopped. Programs like Medication Therapy Management (MTM) and Comprehensive Medication Reviews (CMRs) have as one of their targets the need for evaluation of continued therapy. **Note:** That means that we must evaluate the impact of stopping therapy in the long term both clinically as well as avoid re-initiating unnecessary therapy. Whether the reason is medico-legal, patient demand, commercial advertising, or the feeling that all conditions must be treated, none of these reasons replaces the need for constant evaluation of therapy to targeted goals.

As the benefits of therapy outweigh the risks, the problems of continued therapy are frequently not considered. The large body of literature emphasizing the impact of multiple drugs on drug-induced disease, additional adverse effects, and conflicting therapies requires we, as health care professionals, be vigilant and monitor for long-term success with as few therapies as are clinically necessary.

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## California Laying Down the Law on Vaccinations

Since the passage of SB 277 on June 29, 2015, California no longer allows exemptions for school-entry vaccinations on the basis of religious or personal beliefs. Still permitting medical exemptions, the bill focuses on protecting these schoolchildren who may be medically contraindicated to receiving vaccinations. California has become the third state to mandate this law, which applies to all children attending both public and private elementary and secondary schools and day-care centers, and experts believe that other states will follow suit.

*Source: Mello MM, Studdert DM, Parmet WE. Shifting vaccination politics – the end of personal-belief exemptions in California. N Engl J Med. 2015;373:785-87.*

### Comment:

The passing of SB 277 in California has caused an uproar among parents. Petitions to repeal this bill are now surfacing, as many believe that it is their parental right to choose how their child is treated medically. While this may be a valid argument, giving parents the right to choose may also be giving them the right to endanger others.

As seen with the Disneyland measles outbreak (2014-2015), low vaccination rates will compromise herd immunity. Perhaps these parents who refuse to vaccinate should accept this bill as added protection to their own children. Though they may not be able to send their children to traditional school, they can feel more at ease at public places, like Disneyland, knowing that their children are benefiting from those who are vaccinated.

Further controversy may arise if unwilling parents do comply with these vaccine requirements but their children still acquire the diseases that the vaccinations were intended to prevent. The public needs to understand that no drug has the ability to be 100 percent effective. Vaccinations work to significantly reduce the risk of disease, which is why the concept of herd immunity is important to achieve to provide better protection to all.

## Hepatitis C: Still Untreatable to Some

The once incurable disease, hepatitis C, now has several FDA approved oral agents, such as Sovaldi (sofosbuvir) and Harvoni (ledipasvir-sofosbuvir), with the ability to achieve sustained virologic response. Now, the only thing standing in the way of treatment is cost. Several groups, including experts from the Public Health Service and President Obama's Advisory Council on H.I.V./AIDS, are pushing for Federal and State Medicaid programs to expand their coverage of these drugs. Some conditions that various states require to be considered for eligibility include a diagnosis of advanced liver disease, abstinence from the use of alcohol or illicit drugs for up to a year prior to treatment, or a referral by a specialist like gastroenterologists or experts on infectious diseases. Many believe that these restrictions should be lifted, arguing that limiting access to drugs that could essentially cure hepatitis C is discriminatory and "inconsistent with sound medical practice."

*Source: Pear, R. White House is pressed to help widen access to hepatitis C drugs via Medicaid." The New York Times. 24 Aug 2015. Accessed from [http://www.nytimes.com/2015/08/26/us/wider-reach-is-sought-for-new-hepatitis-c-treatments.html?\\_r=0](http://www.nytimes.com/2015/08/26/us/wider-reach-is-sought-for-new-hepatitis-c-treatments.html?_r=0).*

### Comment:

While the new hepatitis C medications are indeed very expensive, costing up to \$1,000 per pill, the Federal and State Medicaid officials are seriously considering the consequences of restricting access to these drugs. The new drugs may be more cost effective as they allow patients to be treated in an ambulatory setting. By not treating these patients, Medicaid may be faced with increased costs down the road as disease progression may lead to hospitalizations and much more costly procedures, such as liver transplantations. Furthermore, hepatitis C is a blood borne pathogen, and limiting coverage of these drugs could be considered a disservice to the public health.

On the other hand, these requirements set by Medicaid may be necessary to ensure that budgets are not going to waste. Should these medications be readily accessible to patients who are going to continue abusing their livers with alcohol or putting themselves at risk with IV illicit drug use? Another question to consider, do all newly diagnosed hepatitis C cases require treatment? It is estimated that a considerable number of people are unaware that they even have hepatitis C, as they remain asymptomatic. Initiating treatment in these patients may do more harm than good, as there are potential adverse effects, as with any drug. Implementing prior authorizations can prevent overuse of medications and ensure that Medicaid budgets are providing patients with therapies that are absolutely necessary.

Finally, with little evidence to prove the long-term efficacy of these novel hepatitis C drugs, Medicaid should consider the possibility of having to “cure” the disease multiple times.



## Halloween is fast approaching... Are you scared of increasing Drug Spend yet?

Frighteningly increasing Drug Spend threatens cost and quality efficiency, putting organizations at greater risk.

**CANOGA PARK, Calif. - Oct. 20, 2015 - *PRL*og** -- 13.1% was the Drug Spend increase in the United States in 2014 alone, according to the ESI 2014 Drug Trend Report. This is the largest annual Drug Spend increase in over a **decade**.

Although they comprised only **1%** of all prescriptions filled in the United States in 2014, Specialty Medication prescriptions represented **31.8%** of all Drug Spend.

Dr. Craig Stern, President of Pro Pharma commented, “When this increasing drug trend is not managed concurrently and proactively it puts your organization at greater risk for detrimental situations.”

Detrimental Situations Include, but are not limited to:

- Utilization That Overtakes Cost
- Specialty Medication Use Becomes Uncontained
- Quality of Care Becomes Inconsistent

“Proactive management of financial and clinical outcomes is not only good business, but is more importantly cost and quality efficient,” added Carol Stern, CEO of Pro Pharma.

Managing healthcare populations concurrently and proactively provides for:

- Maximizing Therapeutic Benefit
- Minimizing Clinical and Financial Risk
- Assuring Affordable Cost for Members and Your Organization

Pro Pharma understands the challenges many organizations are facing with ever-increasing Drug Spend and is proud to provide various organizations with their industry and consulting expertise; coupled with sophisticated data analytical capabilities, to formulate strategies which enhance

process, performance and financial efficiencies to tackle constantly increasing Drug Spend.

**Do you know the questions to ask to diagnose and treat your Drug Spend issues?**

For additional information visit [http://propharmaconsultants.com/products/Specialty\\_Analyses/](http://propharmaconsultants.com/products/Specialty_Analyses/)

Learn how Pro Pharma Pharmaceutical Consultants, Inc. (Pro Pharma) can assist you in identifying trouble spots in Pharmacy Benefits but more importantly how to resolve and control your Drug Spend. ***These tools are accessible to you and your organization at an affordable cost, but more importantly are positioned to create value.***

**For more information and a Free Demonstration contact:**

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**Find out more →**

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Pro Pharma Pharmaceutical Consultants, Inc. has assisted payer and providers for over 29 years to maintain quality while controlling costs.

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