APPLYING ICER ASSESSMENTS IN OREGON COULD LIMIT PATIENTS’ ACCESS TO MEDICINES

If Oregon Health Plan—Oregon’s Medicaid program—relied on one-size-fits-all value assessments like those conducted by the Institute for Clinical and Economic Review (ICER), it could put patient access to medicines in jeopardy, including for diseases like cancer and multiple sclerosis.

12,743 prescriptions per year could face restrictions if Oregon Health Plan used an ICER-like standard

PRESCRIPTIONS THAT MAY BE SUBJECT TO ACCESS RESTRICTIONS UNDER AN ICER-BASED FORMULARY IN OREGON HEALTH PLAN

- **Asthma**: 52% could be forced to alternative treatment, 48% could stay on treatment
- **Multiple Sclerosis**: 100% could be forced to alternative treatment
- **Non-Small Cell Lung Cancer**: 42% could be forced to alternative treatment, 58% could stay on treatment
- **Rheumatoid Arthritis**: 16% could be forced to alternative treatment, 84% could stay on treatment

Methodology and Limitations: Patient-level detail (e.g., number of beneficiaries, diagnoses, patients using more than one prescription) was not provided; therefore, utilization was assessed per product and not per product and indication over one calendar year (2019). Differences in how medicines may be covered in different Medicaid plans and what access restrictions may exist were not accounted for. This work was done on behalf of PhRMA. Xcenda maintained control over methodology and editorial content.

23% of Oregonians are covered by Medicaid and CHIP

3 in 8 Oregonians with disabilities receive their health care coverage through Medicaid

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