



Hemophilia drug coverage moves to pharmacy benefits

About 20,000 people in the U.S. have hemophilia, a lifelong blood-clotting disorder. The condition can be life-threatening. The price of treatment is also daunting, costing \$150,000 to \$300,000 a year for each patient.

To provide members with safe, high-quality care while managing the costs of prescription drugs, Blue Cross Blue Shield of Michigan and Blue Care Network are moving coverage of hemophilia medications from medical benefits to pharmacy benefits on Jan. 1, 2020. The move:

- Allows Blue Cross to monitor benefits in real time, the way we do other pharmacy benefits
- Improves our ability to analyze claims data through greater transparency
- Improves the quality of care for hemophilia patients

Blue Cross and BCN are working with National Hemophilia Foundation leaders from around the country on this change to ensure that members receive the care they need to stay healthy.

Our new hemophilia program maintains coverage

The change won't affect members' hemophilia treatment. Members will continue to receive care from their current hemophilia health care providers. Covered drugs, dosage and frequency remain the same. The medications will be included on our drug lists as non-specialty brand-name medications, starting Jan. 1, 2020. Copays for some members may change, based on their pharmacy benefits.

All hemophilia drugs covered under medical benefits will be covered under pharmacy benefits. The drugs are limited to 30-day supplies. The hemophilia drug Hemlibra® will require prior authorization.

The move may result in future cost savings as out-of-state members move to higher-quality, lower-cost hemophilia care providers, and as payment rules for those out-of-state claims become more consistent under pharmacy benefits. Out-of-state medical costs are managed by the Blue plan where the member receives treatment, while pharmacy benefits are managed here in Michigan.

We'll explore opportunities for additional savings for members through management of the drugs under our pharmacy benefits.





Hemophilia care improves

Moving hemophilia treatment coverage to pharmacy benefits allows us to monitor claims in real time, as patients receive treatment. This real-time information improves collaboration with care management teams to better support members in treatment by quickly monitoring:

- New hemophilia diagnoses
- Increased medication dosage
- Emergency room visits
- Medication delivery more frequently than once a month
- Place of service, to refer members to higher-quality, lower-cost providers

The result is members' quality of life improves while the cost of their care decreases.

Benefits change automatically

Members don't need to do anything to get their hemophilia medication covered after Jan. 1. We're instructing health care providers to bill these drugs under pharmacy benefits starting that day. If a member is covered by a self-funded group that's opted out of the program, a point-of-sale automated message will tell the pharmacy to bill the drug under medical benefits, as it has done previously.

Blue Cross and BCN will monitor pharmacy and medical claims to prevent both benefits from being used for coverage of a single medication.

Hemophilia A and Hemophilia B

There are two types of hemophilia. Both are genetic disorders caused by missing or defective blood clotting proteins. Treatment includes intravenous infusion of replacement clotting factor, which patients either give themselves at home or receive at a hemophilia treatment center.

Hemophilia A, also called factor VIII deficiency or classic hemophilia, is caused by a missing or defective factor VIII protein. It's four times as common as hemophilia B. More than half of hemophilia A patients have a severe form of the disorder, according to the National Hemophilia Foundation.

Hemophilia B, also called factor IX deficiency or Christmas disease, is caused by a missing or defective factor IX protein.



If you have any questions, please contact your Blue Cross or BCN sales representative for more information.

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