Conclusion

Most US payers indicated that patient costs will decline due to the upcoming Inflation Reduction Act of 2022 (IRA). Payers agreed that increased Medicare spending would result in reduced patient costs, but fear this would increase due to more number of treatments launching in the near term.

Regarding plan costs, oncology products and orphans drugs are most likely to result in increased costs due to the IRA, plan costs for GLP will also increase, but this is due to increased number of treatments launching in the near term.

With higher plan costs, increased UM is inevitable, and diabetes, CVD, neurology, immunology, and CPT products are those most likely to experience restrictions, steps, and even significant product choice limitations.

Payers agreed that financial contracting for preferred products will increase, and plans may consider covering only one product within a treatment class for diabetes and neurology specifically.

The IRA will clearly impact MA plans, but the impact on other commercial segments such as employer-sponsored plans is less clear at this point; further research in this area is needed to fully understand the long-term impact on these plans.

References


Figure 2. Impact of the IRA on Patient vs. Plan Cost Across Different Disease Areas (where impact was assessed as + = low impact and 5 = high impact)