New Pipeline of Medications on the Horizon for FDA Approval on 2017 and 2018

The cost of prescription medications continues to impact employers and plan sponsors. By 2020, it is expected that the cost of specialty medications may represent 50% of all pharmacy costs and while the non-specialty trend has moderated, pharmacy costs have ticked up to 20% of the total cost of benefit plans. Conner Strong & Buckelew monitors developments in the pharmacy sector to keep clients aware of changing dynamics. According to publicly available data, here’s a look at conditions that may get new drugs in 2017 and 2018:

- **Oncology:** More higher-cost oral therapies and combination regimens are likely to come to market. The last three approved oral oncology products’ annual cost was approximately $170,000 per patient.

- **Multiple Sclerosis (MS):** Among those drugs that could get FDA approval is Roche’s Ocrevus (ocrelizumab), which has the potential to treat both relapsing-remitting MS and primary progressive MS. Most MS patients have the relapsing-remitting form of the disease, but 10% have primary progressive MS, which has no acute relapses or remissions. There are no treatments now available for primary progressive MS, so Ocrevus is likely to get significant uptake. The potential cost of the drug is an estimated $100,000 per patient per year.

- **Autoimmune:** This drug class is one of the fastest growing classes with utilization increasing by about 10% from 2015 to 2016. Sanofi and Regeneron Pharmaceuticals’ rheumatoid arthritis (RA) drug Saracta (sariluab) is showing promise. Other potential new entrants are Eli Lilly and Co. and Incyte Corp.’s Olumiant (baricitinib), a once-daily oral RA medication that could compete against Xeljanz (tofacitinib); and GlaxoSmithKline and Johnson & Johnson’s RA drug sirukumab, which could compete against Roche’s Actemra (tocilizumab).

- **Severe Eczema:** Another biologic from Sanofi and Regeneron, Dupixent (dupilumab), is likely to be approved as the first prescription drug for patients with the condition. This injectable drug is believed by its manufacturer to be a ‘blockbuster’ drug with an annual cost of $40,000-$50,000. It would compete against topical steroids or topical immunosuppressants like Protopic (tacrolimus) or Elidel (pimecrolimus).

We will continue to share emerging data about other new medications and their impact to employers and plan sponsors.

Please contact your Conner Strong & Buckelew account representative toll free at 1-877-861-3220.