Data Trends and National Benchmarks

Retrospective 2018

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Content outline

- I. Terminology and background
- II. Key results
- III. Drug type utilization
- IV. Specialty drug analysis
- V. Therapeutic category rankings





Terminology and definitions

- Insured: any covered dual i.e. employee, spouse or child
- **Certificate**: the employee and the linked dependants
- Average age: average age of the insureds or the employees depending of the context
- Utilization: number of claims paid per certificate or insured depending of the context
- Eligible cost: the cost of the drug found eligible by TELUS Health. This measure does not take into account any deductible or co-insurance
- Adjudicated amount: the amount the plan paid for the claim after any cost sharing



Comparison with a specific group

- Results reflect the entire TELUS Health book of business (BoB)
- Results may differ significantly from plan to plan
- The following elements have an important impact on the costs:
 - Plan coverage
 - Demographics:
 - Age distribution
 - Gender distribution
 - Number of dependants
 - Provincial distribution
 - Industry





Comparison with a specific group (cont.)

For renewal, the factors used by carriers are based on many other elements:

- Group experience
- The entire medical claim not only drugs (including hospital, paramedical, out-of-country, etc.)
- Higher volatility for a specific group compared to TELUS Health BoB
- Ageing of insured population
- Changes in insurers manual rate
- Renewal is a prospective exercise, our analysis is retrospective



- Single-source brand drug for which no generic exists
- Multi-source brand one or more generics exist

Generic –

bioequivalent drug that is a copy of the innovator molecule



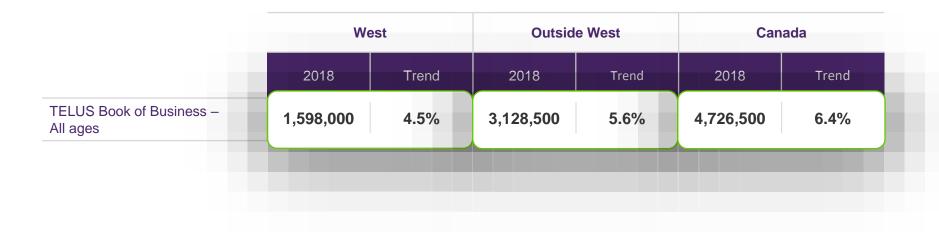


Except if otherwise mentioned, data in this presentation is based on:

- Insured aged less than 65
 - Additional comparisons excluding OHIP+ ages (24 and younger) considering that OHIP+ is primary payer until April 2019
- Costs are eligible costs, i.e. before deductible and co-payment
- Regional comparisons are made where applicable

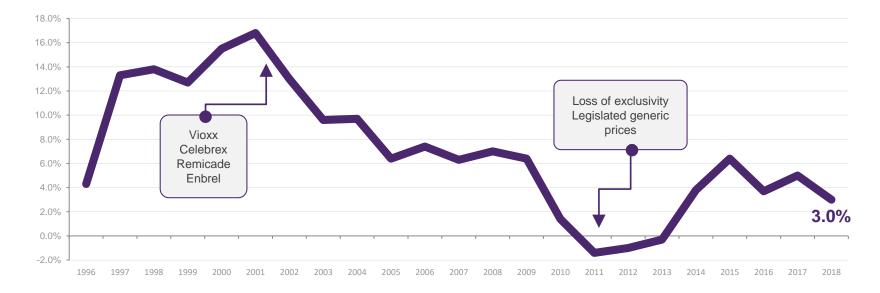


TELUS Book of Business – Change in number of certificates 2017-2018





Growth in purchases by community pharmacies in Canada



Source : IQVIA, Study on pharmacy and hospital buying habits in Canada





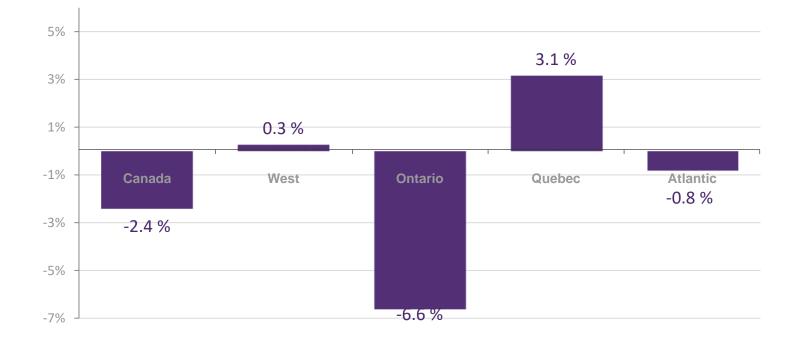
Key results

Key results by region – insureds age 25-64 2018

	Canada	Quebec	Ontario	Atlantic	West
Eligible monthly cost per certificate	\$51.42	\$68.52	\$53.31	\$64.06	\$39.43
Eligible monthly cost per claim	\$72.65	\$58.57	\$82.76	\$81.52	\$68.66
Monthly utilization per insured	0.71	1.17	0.64	0.79	0.57
% generic (# of Rx) *	63%	62%	60%	69%	65%
Cardholder average age	44.1	44.4	44.5	45.3	43.3

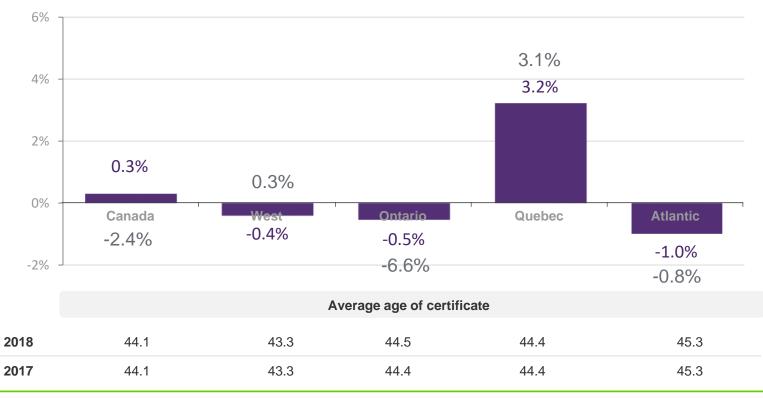


Change in eligible monthly costs per insureds 2017 to 2018



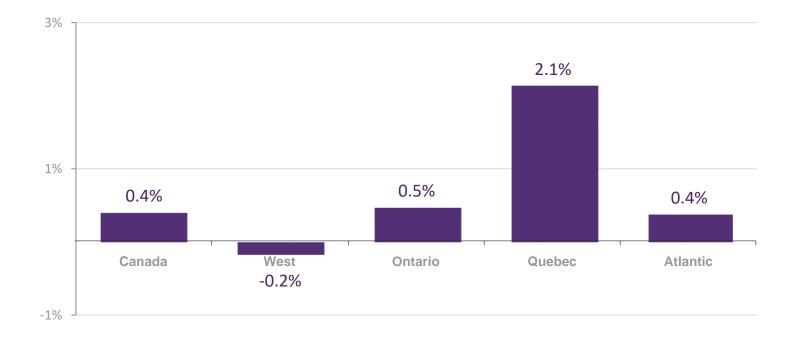


Change in eligible monthly costs – insureds age 25-64 2017 to 2018



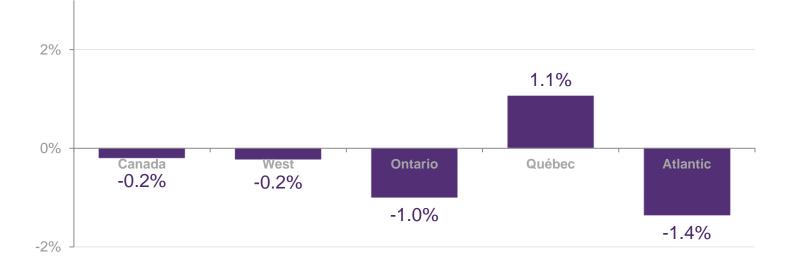


Change in eligible monthly costs per claim – insureds age 25-64 2017 to 2018





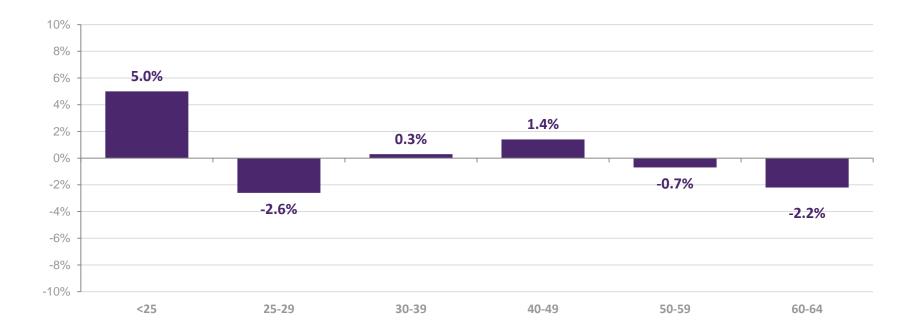
Change in monthly utilization – insureds age 25-64 2017 to 2018



2017	44.1	43.3	44.4	44.4	45.3
2018	44.1	43.3	44.5	44.4	45.3
	Average age of certificate				

TELUS[®] Health

Monthly cost variation per insureds by age band Western - 2017 to 2018

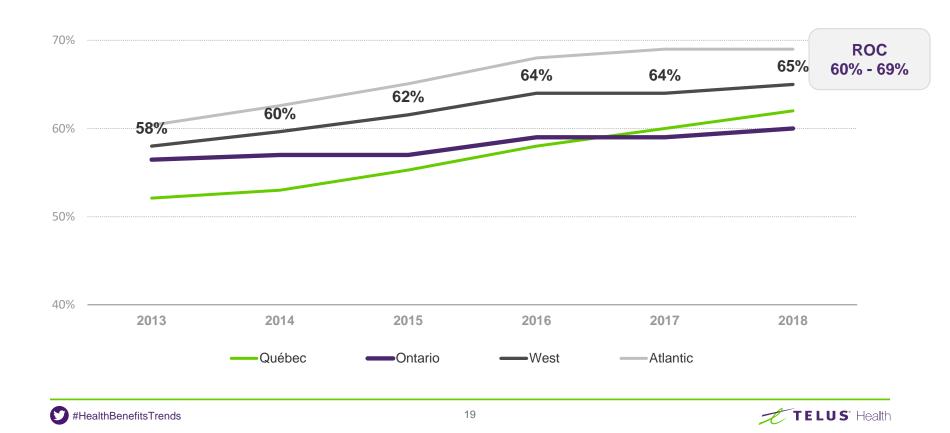




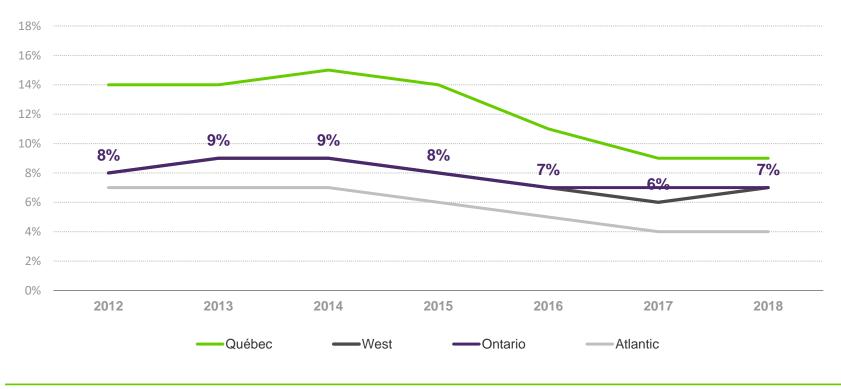


Drug type utilization

Generic utilization Per region – as % of Rx



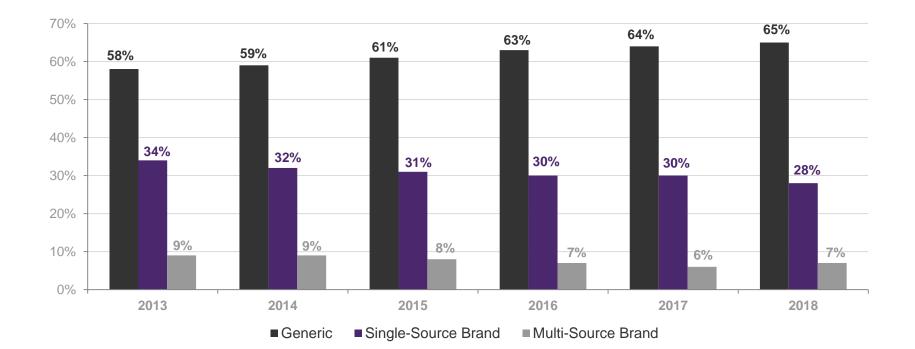
Multi-source brand utilization Per region – as % of Rx







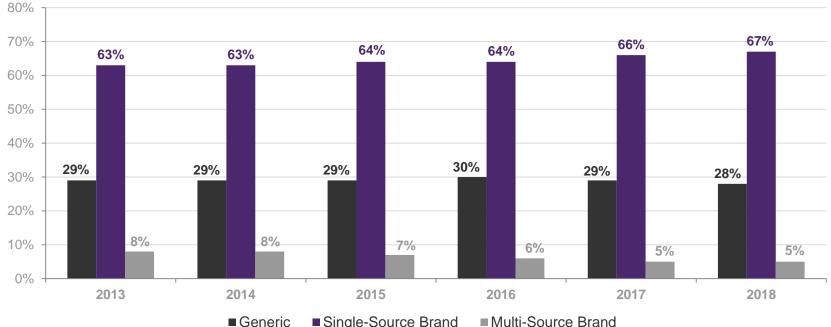
Utilization percentage by type of drug Western – # Rx



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Paid percentage by type of drug Western - eligible amount



■ Single-Source Brand Multi-Source Brand



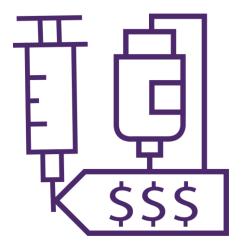


Specialty drugs

A TELUS Health specialty drug is a drug that has a high cost based on a potential per patient amount exceeding **\$10,000 per year**

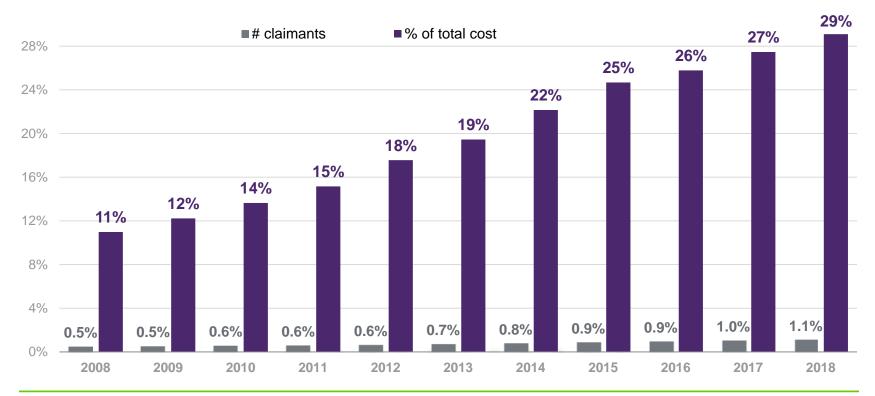
Further characteristics of these drugs may include but are not limited to:

- Requires special medication delivery (e.g. special handling, preparation, administration, storage, or distribution)
- Requires complex treatment maintenance (e.g. complex disease, complex dosing, intensive monitoring & clinical management etc.)





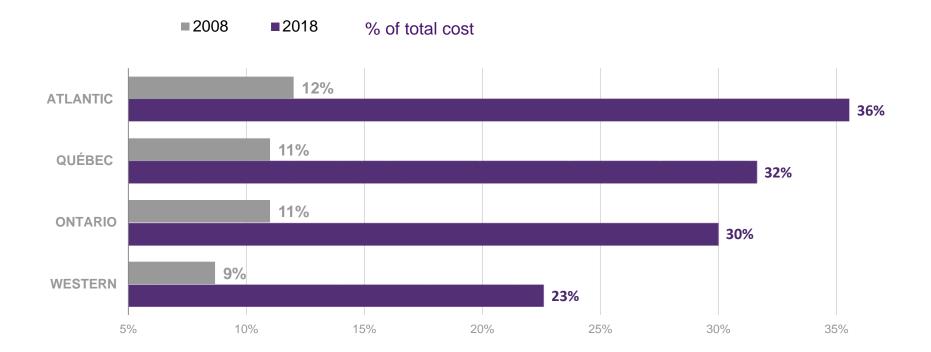
Specialty drugs Canada – less than 65





Specialty drugs

Region - Less than 65





Rising cost of specialty drugs

	Drug	Cost
1996	Betaseron	\$17,000



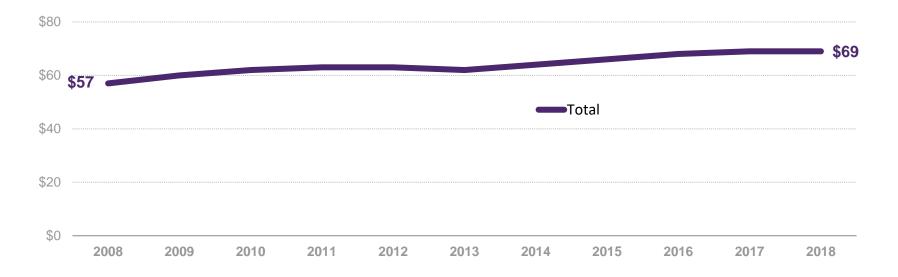
Rising cost of specialty drugs

	Drug	Cost
1996	Betaseron	\$17,000
2018	Strensiq	\$1,278,000



Specialty drugs Western - less than 65 – monthly cost per certificate

• The average cost of drugs increased by 1.9 % per year over 10 years

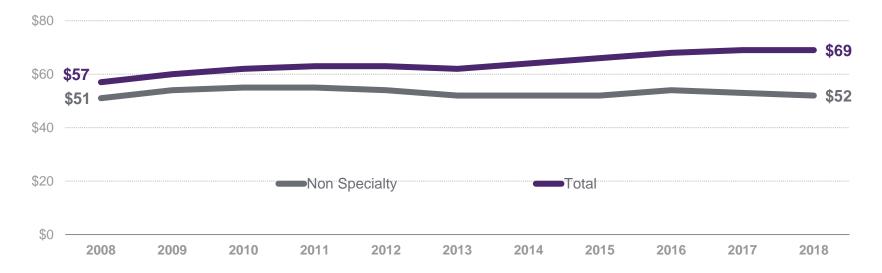




Specialty drugs

Western - less than 65 - monthly cost per certificate

- The average cost of drugs increased by 1.9 % per year over 10 years
- The average cost of non specialty drugs increased by 0.2% per year over 10 years

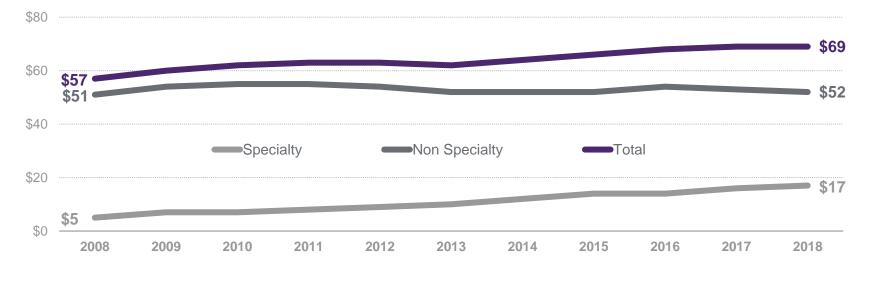




Specialty drugs

Western - less than 65 – monthly cost per certificate

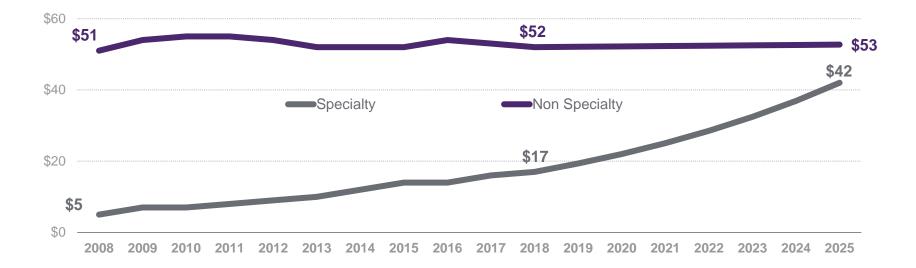
- The average cost of drugs increased by 1.9 % per year over 10 years
- The average cost of non specialty drugs increased by 0.2% per year over 10 years
- The average cost of specialty drugs increased by 13.0% per year over 10 years





Specialty drugs Western - less than 65 – monthly cost per certificate

 At this pace, the monthly cost per certificate of specialty drugs will surpass the non-specialty drugs within approximately 9 years





Specialty drugs

Western - less than 65 - monthly cost per certificate

- At this pace, the monthly cost per certificate of specialty drugs will surpass the non-specialty drugs within approximately 9 years
- and the monthly cost per certificate will have increased by almost 37%







Therapeutic category rankings

Top 10 drug classes by adjudicated amount Western - less than 65

Therapeutic class	Rank by total adjudicated amount		Percent of total adjudicated amount	
	2018	2017	2018	2017
Diabetes	1	1	11.0%	10.0%
Rheumatoid Arthritis	2	2	8.2%	8.2%
Asthma	3	3	6.8%	6.7%
Skin Disorders	4	5	6.2%	5.3%
Depression	5	4	5.8%	6.2%
Blood Pressure	6	6	4.3%	5.1%
Add/Narcolepsy	7	8	4.2%	3.7%
Antibiotics/Anti-Infectives	8	7	4.1%	4.4%
Birth Control	9	9	3.7%	3.6%
Ulcers	10	10	3.1%	3.4%
% of total adjudicated amount			57.4%	56.6%



Top 10 products by adjudicated amount Western - less than 65

Drug name	Rank by total adjudicated amount		Percent of total adjudicated amount	
	2018	2017	2018	2017
Humira	1	1	3.4%	3.3%
Remicade	2	2	2.6%	2.8%
Insulin	3	3	2.6%	2.7%
Stelara	4	11	1.4%	1.0%
Symbicort	5	4	1.3%	1.3%
Vyvanze	6	10	1.3%	1.0%
Botox	7	6	1.3%	1.1%
Concerta	8	12	1.2%	1.0%
Advair	9	5	1.1%	1.2%
Victoza	10	7	1.0%	1.1%
% of total adjudicated amount			17.2%	16.5%





- The overall change in plan costs (based on monthly eligible amount per cardholder) saw a marginal increase in Canada of 0.8% year over year. The national 0.8% increase was split equally between increased utilization and increased cost per claim. However, on a region basis there are differences.
- Plans that have significant employee distribution in Ontario will have seen a savings from the implementation of OHIP+, yet that will change.
- Chronic conditions and high cost treatments of more rare disease dominate the top drug class profile.
- Specialty drugs saw the greatest growth in recent years (up 2% to 29%). More than half of the drugs in the pipeline are specialty drugs (the majority to treat cancer and some new biologics that will target larger patient populations i.e. migraine). How will proposed national pharmacare changes help?
- Witnessing slow but steady trend towards adoption of plan management features to contain costs as employers try to strike the balance between sustainability and providing a competitive program that employees will value.
- Monitor your specific plan risks regularly to ensure you are focusing on the areas that can be optimized the most.



Questions

Thank you



