Comprehensive Care Sustainability Collaborative

National **Bleeding Disorders** Foundation

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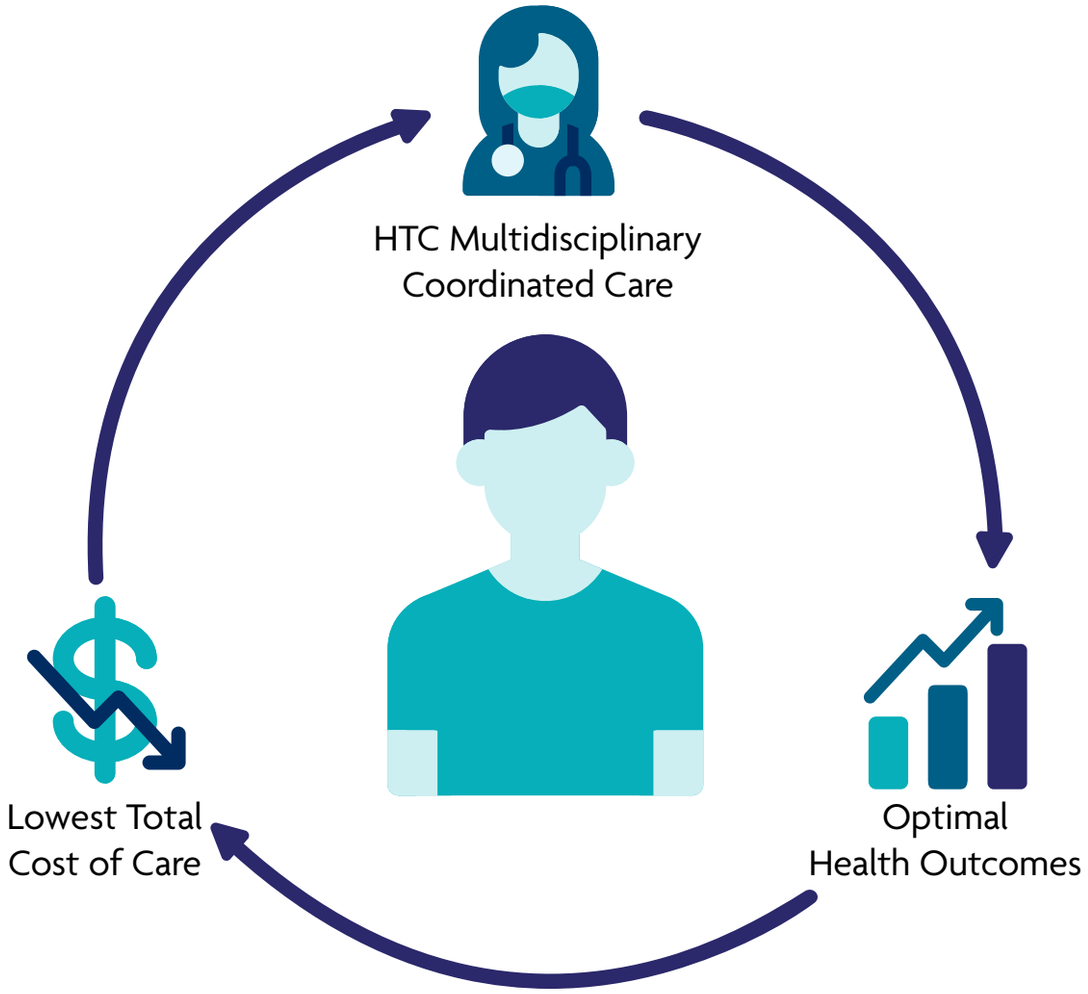
High-Quality, Cost-Effective Care for Bleeding Disorders

HEMOPHILIA: Optimal Outcomes at the Lowest Total Cost of Care

The Triple Aim Approach

Hemophilia is a high cost rare disorder that requires a high touch approach to care. Hemophilia treatment centers (HTC's) are federally recognized centers of excellence (established by congress over 40 years ago) that subspecialize in rare hematologic disorders utilizing an integrated multi-disciplinary approach to care, which is the gold standard.



HTCs deliver

the right care, at the right time, at the right place

HTCs are federally recognized health care centers that bring together an expert team of doctors, nurses, social workers and other health professionals experienced in treating people with hemophilia and other bleeding and clotting disorders.

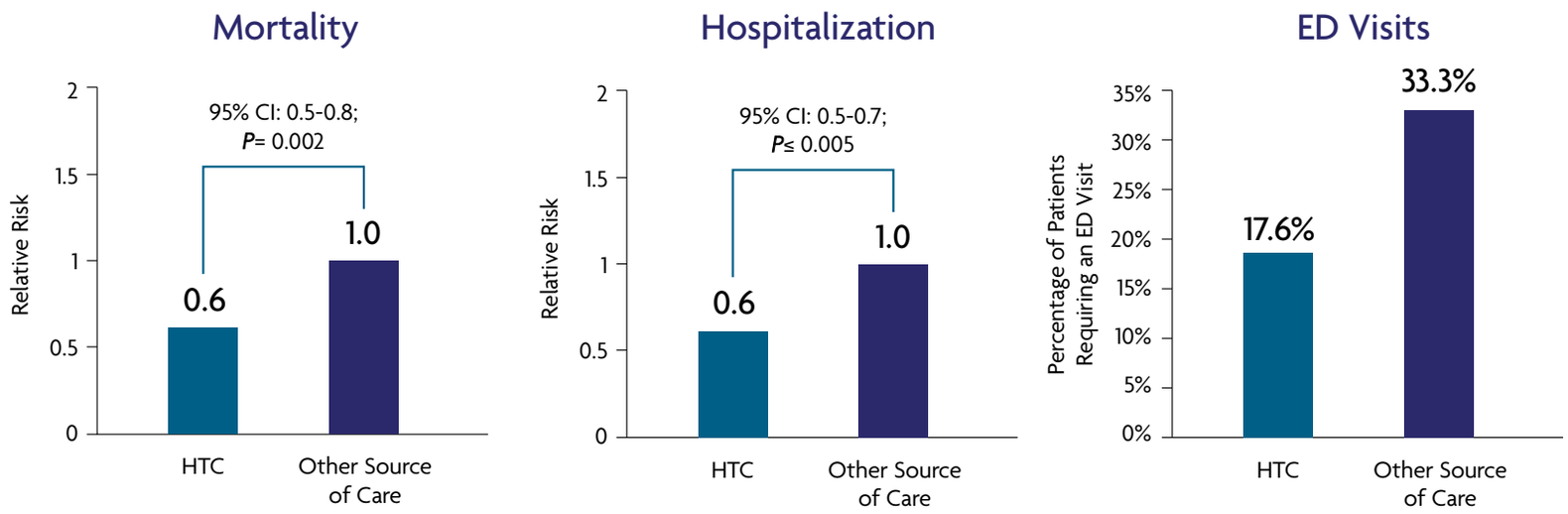
HTCs are often able to provide the specialty medications used to treat bleeding and clotting disorders, at reduced pricing via their participation in the federal drug **340B discount pricing program** (Click for link).

The ability to access these resources provide HTC's the mechanism necessary to deliver a medical home model of care.

Emergency access to provider care team 24/7/365.

Most HTC's offer integrated medical and pharmacy coordination resulting in real time response and/or intervention.

Patients managed via the HTC integrated care model benefit from 40% reductions in mortality and hospitalization and a 47% reduction in ED visits



Employers should have a clear line of sight to the cost drivers that impact hemophilia spend

1. Right Care, Right Time, Right Place. Verify HTC network access for your benificiaries.

2. Treatment represents approximately 90% of hemophilia spend. Prescriptions for the specialty medications used to treat hemophilia, are not written like traditional medications. Utilizing retrospecitve data to anaylze vendor performance of assay and dose management can help shape prospective strategies to drive significant savings.

3 Cost per unit can vary widely, depending on current network arrangements. Monopolies are never in the best interest of payers and purchasers. Verify your specialty pharmacy.

4 A Hemophilia Response Pathway is available at **CCSC*Hemo*.com** to guide health care purchasers through the process of managing beneficiaries with bleeding disorders.

Contracting with HTCs as in-network providers for beneficiaries with bleeding disorders is one means by which employers can improve patient outcomes and manage health care costs. Employers may be contributing to fragmented care and discouraging HTC use, when HTC's are not in the health plan network and by carving out specialty pharmacy services to an exclusive provider, which can contribute to higher total cost of care.

Our Data Shows Our Value

CLICK HERE TO UPLOAD YOUR LOGO

Total Number of Patients per month:

CLICK TO ENTER THE TOTAL NUMBER OF PATIENTS SEEN BY THE HTC PER MONTH

CLICK HERE

Average Number of Patient Contacts per month:

CLICK TO ENTER THE TOTAL NUMBER OF PATIENTS SEEN BY THE HTC PER MONTH

CLICK HERE

Ancillary Services Provided at Our Center:

Click here to enter all services provided, for example, type of phone support, 340B pharmacy, etc.

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Approximately 90% of the total cost for hemophilia care is related to the specialty drug spend

Employers can manage their hemophilia spend when equipped with the appropriate information

Pricing

- Clotting factor pricing can vary significantly among dispensing pharmacies for the same product

- HTCs often have access to discounted medications under the 340B Drug Pricing Program and may offer competitive and/or lower average pricing per unit

Prescribing and Dispensing Data

- Providers write prescriptions based on units per kilogram (U/kg) of patient weight
- Clotting factor is manufactured in a range of unit or assay sizes

- Payers do not traditionally have access to prescription data; however, they can and should collect this information
- Having the actual prescription data provides the payer with transparency to verify assay management and per unit pricing for their health care purchasers

Community Voices in Research is an initiative collecting real time data

Community Voices in Research is the first longitudinal initiative capturing a 360-degree view of living with a bleeding disorder, directly from those affected and their relatives. The information gathered supplements existing datasets and enhances the current provider-reported data available to researchers. The experiences shared will enable researchers to improve current treatments, discover transformational therapies, and most importantly, contribute to finding a cure. **Click here for more information.**

For questions and inquiries contact:

Click here to add name

Click here to add title

Click here to add phone number

Click here to add email

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For more information, visit www.CCSC*Hemo*.com

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References

Health Resources & Services Administration. 340B Drug Pricing Program.

Hemophilia Treatment Centers (HTCs). Centers for Disease Control Website. https://www.cdc.gov/ncbddd/hemophilia/HTC.html Published September 2, 2015. Updated February 6, 2017. Accessed June 2020.

MASAC 188:National Hemophilia Foundation. Medical and Scientific Advisory Council. Document #188. https://www.hemophilia.org/sites/default/files/document/files/masac188.pdf.

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NATIONAL BLEEDING DISORDERS FOUNDATION
Formerly NHF

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