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Dear members,

Over 2019, we’ve seen a continuation in the health care trends of recent years. We know that affordability and controlling health care costs are a top priority for employers. Health care costs are already high and still rising well above the rate of inflation. Pharmacy costs rank among the most difficult areas to improve and have a high impact on employees and employers alike. Through the Rx Collaborative we are able to better serve member organizations by delivering cost-effective options and strategies that manage pharmacy spend, while our innovative consultative approach helps employers offer a cutting-edge pharmacy program to employees.

The Rx Collaborative’s value continues to resonate in the market, as evidenced in its growth, which has risen to more than 420 plan sponsors. The Rx Collaborative is well positioned for future growth with the three largest pharmacy benefit management (PBM) partners, each of which has partnered with health plans, allowing them to adapt to ongoing changes. As the largest pharmacy group purchasing coalition in the nation, the Rx Collaborative has significant leverage to influence the market for its members’ benefit.

The level of expertise available to plan sponsors through Willis Towers Watson consultants is second to none, further enhancing member benefits and advantages.

The Willis Towers Watson health care management team includes the largest group of pharmacy consultants and clinicians in the industry.

Willis Towers Watson pharmacy consultants actively monitor the marketplace, evaluating emerging therapies, new pricing models and evolving technologies. They encourage Rx Collaborative PBM partners to update and enhance utilization management programs, expand contract options and identify additional vendor partners that can make a positive difference in the lives of members, especially those with complex or chronic conditions. These professionals have the proven experience and results to develop critical clinical strategies and solutions that consider providers’ changing landscape and the complexities of pharmacy benefit pricing and delivery.

As pharmacy benefits become more complex, Willis Towers Watson continues to identify new opportunities to shift the paradigm and support our employer clients through the changing environment.

Thank you for your continued support. As always, we strive to better serve your needs and welcome your feedback. If you have any questions, comments or suggestions, please contact your Willis Towers Watson pharmacy consultant or email me at jasmine.aral@willistowerswatson.com

Jasmine Aral
Rx Collaborative Team Lead
Our value proposition to clients

It’s been more than 15 years since Willis Towers Watson launched the Rx Collaborative, transforming the pharmacy benefit industry as the first large-scale, national pharmacy benefits coalition. Focused on true transparency, the Rx Collaborative introduced disclosure and clarity principles that added significant financial value to employers seeking a PBM relationship. Since we launched, the marketplace has continued to evolve and grow evermore complex, but one thing has stayed consistent: The Rx Collaborative has remained a leader in the space.

Our clients continue to benefit from a consultant-led coalition with oversight and experience from the largest pharmacy team in the industry and support from industry-leading PBM partners Express Scripts, CVS Health and OptumRx.

With over 100 clinical and financial pharmacy consultants, our team specializes in developing meaningful, custom approaches for each client that address their specific needs. We have created and negotiated many best-in-class offerings and solutions that provide true pricing disclosure, transparency and value on behalf of our employer clients.

Financial

As the largest pharmacy group purchasing organization in the country, the Willis Towers Watson Rx Collaborative is uniquely positioned to negotiate the lowest drug prices with the three largest PBMs on behalf of our members. Our membership includes more than 70 Fortune 500 companies, and due to our continuing growth and overall scale, we have been able to secure pricing that is between 2% to 10% better than other coalitions in the market.

Savings throughout the term

Annual price improvements and ongoing clinical and formulary management ensure that Rx Collaborative members enjoy significant savings opportunities throughout the life of their agreement. This oversight consistently produces significant savings for our members with minimal or no disruption.

We renegotiate our pricing offer annually to provide our clients a market-competitive offering with each of our PBM partners. Through our pharmacy team’s various audits and multiple procurements for clients of all sizes each year, we gather significant market intelligence. We are able to leverage these insights to identify and eliminate unfavorable PBM pricing tactics from our PBM contracts and to ensure our pricing stays market leading.

- Members have access to pricing available only through our Rx Collaborative.
- Our pre-negotiated contract template means an easier contracting process with best-in-class provisions.
- Annual market checks result in additional savings, ensuring the financial terms remain competitive throughout a client’s membership with no member-required action.
- Historically, employers who have joined the Rx Collaborative have seen an average savings of 9% to 12% over their previous arrangement.
- Effective January 1, 2020, over 250 existing clients were eligible for and received a midterm price improvement that will generate an estimated average 1% to 4% in savings.
- Our pharmacy consultants develop a custom approach for each client, leveraging our exclusive Rx Collaborative strategies along with our PBM partners’ existing programs.

Using a combination of existing PBM programs and exclusive Rx Collaborative strategies, our members have the knowledge and tools necessary to drive appropriate utilization, reduce waste and achieve significant savings.
Advocacy
Willis Towers Watson’s ongoing commitment to client advocacy is reflected in our strong service delivery model and high client satisfaction rates. The knowledge and expertise within our pharmacy team allows Willis Towers Watson to offer clients unparalleled guidance and direction through the complexities of pharmacy benefit management. Our custom service delivery model offers:

- Consulting and pharmacy management, including a Willis Towers Watson pharmacist and project manager
- A unique and custom service delivery model is formally documented in our account management playbook. The playbook is endorsed by all PBM partners with ongoing training and updates. The playbook defines the joint management approach for supporting Rx Collaborative clients, including best practices and custom processes. A joint review is held annually with the PBMs to identify process improvements.
- Implementation support to ensure PBMs understand and accurately implement client requirements and benefit plan attributes. Annual implementation debriefs provide Willis Towers Watson the opportunity to review lessons learned and pursue best-in-class service for our clients.
- Access to senior management at our PBM partners to address issue escalation and drive solutions which benefit all Rx Collaborative clients
- Custom performance guarantees to address PBM account team satisfaction, change management, annual enrollment and audits. The custom guarantees and high-dollar amounts at risk increase the PBM’s accountability to deliver on service.

Flexibility
Pharmacy benefits are complex, and no single strategy fits all employers. Willis Towers Watson recognizes that, in order to provide benefits that address the varying needs of an employee population and to attract and retain employees, it becomes increasingly important to have options. The Rx Collaborative allows clients the flexibility to choose plan design, utilization management, retail network and formulary based on what is right for their individual company and employees.

Innovation
The Rx Collaborative has continually proved itself a marketplace and thought leader. We leverage our market intelligence and understanding of the PBM business to create innovative approaches and solutions that add real value. We encourage our PBM partners to pilot new programs that address the needs of our members. PBMs have often found such value in these solutions they have rolled them out to their broader book of business. Some of these innovations include:

- Oversight of PBM’s specialty drug list to save clients up to 2% on drug spend
- Increasing PBM credits and negotiating discounted fees for most PBM services
- Utilizing new pricing strategies on key specialty medications, ensuring members benefit from the aggressive terms negotiated by pharmacy and financial Rx Collaborative experts
- Specialty pharmacy recommendations that include preferred products, optimal distribution channels, utilization management and plan design
- Specialty medications and therapies are evolving at an ever-increasing rate. Rx Collaborative members have access to a team of clinicians that review the pipeline in real time.
Governance

The Rx Collaborative offers a comprehensive annual audit initiative to ensure the updated contract terms are met and that PBMs continue to be capable of providing a high level of service. The Rx Collaborative audit team consists of seasoned pharmacy and audit specialists who understand how prescription transactions should adjudicate and who have the expertise to address complex billing and clinical questions related to claims payment and how it impacts performance.

The annual audit initiative

The annual Rx Collaborative audit initiative includes a:

- Group-level claim audit to verify PBMs correctly apply the contract’s pricing terms, definitions and reconciliation logic
- Onsite rebate review to confirm the PBM complied with contract terms requiring full pass through of all manufacturers’ revenue and that the PBM correctly calculated the guaranteed rebate amounts as reported to employers
- Operational assessment to review PBM operations, including a site visit to a key facility to determine the PBM’s effectiveness in service delivery

The 2019 group-level claim audit and rebate review found that, overall, the PBMs adhered to contractual financial terms. Through the operational assessment we were able to confirm the PBMs’ operational capabilities met or exceeded industry standards. Willis Towers Watson monitors payments to clients impacted by audit findings and pushes its PBM partners for process improvements that will ensure processing accuracy and service excellence in the future.

The Rx Collaborative annual audit initiative becomes increasingly critical as pricing strategies change and clinical management programs become more complex. We leverage audit results in future contract negotiations, adding value through more targeted contract language. Additionally, Willis Towers Watson pharmacy consultants can provide other strategies to ensure the plan is functioning as expected. At least once per contract term, Rx Collaborative clients should consider additional plan-specific reviews targeting benefit rules, eligibility and accumulators.

In 2020 we will once again perform a comprehensive audit of our PBM partners.
**Value-added services**

Rx Collaborative members can stay current on marketplace developments through Willis Towers Watson’s intellectual capital and numerous communications, including timely industry updates, points of view and consulting recommendations.

- Monthly e-newsletters and quarterly calls feature clinical, legal and market updates from Willis Towers Watson experts.
- Rx Collaborative clients are engaged, and many attend our annual employer meeting. This event is an exclusive forum for members to hear about the latest trends in health care, including pharmacy, discuss strategies for emerging challenges, share ideas and interact with peers and Willis Towers Watson consultants.

**Clinical management**

In the past few years, we’ve seen a growing number of employers seeking to identify value amidst an often-chaotic landscape of tangible and intangible factors impacting pharmacy benefits. This trend continued throughout 2019, with many employers predicting market trends and adapting accordingly.

Throughout the past year, we found that employers expected specialty therapy costs to increase as some of the most innovative and high-cost products ever approved came to the market. There were expectations high prices would result in more political and public scrutiny, and value assessments would gain in prominence as a way to objectively pinpoint how much a drug should cost. Employers expected digital health solutions would continue to grow, as would the integration of digital and physical health therapies. Many of these expectations came to fruition.

Biosimilars entered the market at increasing numbers as the decade ended. In many ways 2019 provided a snapshot of the past and a look forward to the future.

**Communications**

In an effort to get actionable and timely information to members in 2019, the Rx Collaborative clinical team communicated these dynamic events to clients with increased frequency. We released formal Willis Towers Watson points of view and rolled out new communication formats like the RxFlash and RxBlast. Examples of these communications included:

- Copay Accumulator Adjustment Programs, February 2019
- Managing Hyperinflation, February 2019
- Ongoing Controversy of Generic Drugs, September 2019

In addition to the market dynamics impacting pharmacy benefits, there was a flurry of policy proposals made at the state and federal levels. For example, the U.S. Department of Health & Human Services (HHS) grappled with whether copay accumulator adjustment programs many clients used would be permissible as-is or with modifications. There were also changes to preventive drug requirements,
including an expansion of the IRS-based preventive drugs and services that can bypass the deductible for High Deductible Health Plans (HDHP), and also a requirement to cover Pre-Exposure Prophylaxis (PrEP) drugs for HIV prevention as the Affordable Care Act mandated. The Rx Collaborative clinical team worked closely with Willis Towers Watson's senior attorneys and other professionals supporting North American Human Capital and Benefits to ensure we could track and advise our clients on their options as quickly as possible as these legislative changes took place.

These and other important topics, especially those that may have long-lasting ramifications for employers or that touch parts of the health care system beyond pharmacy benefits were also addressed in monthly Rx Collaborative e-newsletters. For example, we gave an overview of how brand and generic drug approval processes differ and the impact of an ongoing drug shortage across the nation. Other topics included medical tourism and a snapshot of current drug importation regulations, a biosimilar update, coverage of the e-cigarette and vaping epidemic and a primer on value-based clinical programs and payment models.

Remaining nimble
As we continue our year-over-year growth in size, we remain focused on innovation and what lies ahead through our various internal and external resources, including industry-leading employer surveys. For example, we know many employers want to take advantage of savings from biosimilar drugs: To address this we are utilizing employer survey data to guide efforts in developing pilot programs aimed at promoting their use where possible.

Biosimilars in focus
The FDA approved a new record high of 10 biosimilars in 2019, which outpaced the second and third-highest record setting years, with seven approved in 2018 and five in 2017. Most recently approved biosimilars have been for drugs that would be given in a hospital or infusion setting and covered under the medical benefit. However, there has been a noticeable 33% increase in the total number of prescriptions for biosimilars dispensed in 2019 versus 2018 across the Rx Collaborative.

Our efforts at fostering innovative pilots for clients extends beyond biosimilars. In 2019, we formalized an approach to identify pilot programs with our PBMs and other vendor partners to quickly communicate information to clients who may be potential candidates and interested in participating. We know employers want access to innovative clinical programs and need to understand what value they bring; they also want to know how best to execute contracts and audit the programs once they are in place.

In 2019, the Rx Collaborative clinical team vetted numerous vendors ranging from those meant to optimize the pharmacy benefit to those offering diabetes, hypertension, weight-loss, or behavioral health management solutions – and sometimes all of the above. We reviewed several key areas of importance, ranging from user experience to vendor readiness, such as how well a given organization can ensure member privacy and the security of patient-generated data. By collaborating cross-functionally within the organization, our consultants were – and are – able to bring employers well-balanced information from experts who meet with these types of vendors on a daily basis.
Behavioral health and the opioid epidemic in focus

Behavioral health has significant impact on a member’s overall health. Recent studies on loneliness, for example, show that loneliness and social isolation may be as damaging to health as smoking 15 cigarettes per day. Behavioral health treatments historically relied on drugs and went through the pharmacy benefit. Today, some of the new products processing through the pharmacy benefit are not drugs, but rather mobile phone apps and wearable devices. Digital health vendors are offering cognitive behavioral therapy (CBT) and other behavioral health-focused interventions as standalone offerings or in addition to their preexisting solution suite. The Willis Towers Watson pharmacy team is working to identify best-in-class vendors to partner with directly and also vetting those our PBM partners are adding to their own procured lists of preferred digital health vendors. The Rx Collaborative saw a 6.2% increase in mental health medication utilization and a 4.8% increase in total prescriptions. Although there is only a modest spike in mental health drug prescriptions and users, it remains a top concern among employers. According to the Willis Towers Watson 23rd Annual Best Practices in Health Care Employer Survey, 61% of clients intend to implement a companywide behavioral health strategy or action plan by 2021.

The Rx Collaborative saw another year of favorable trend in opioids. Narcotics continued to decrease from 2018, with a 3.9% decline in prescriptions per user and 17% decrease in gross cost per prescription. This is positive news and demonstrates the progress our PBM partners and prescribers are making in reducing the opioid epidemic.

Balancing value and access

It would be remiss to discuss the 2019 pharmacy highlights without mentioning the approval and subsequent impact of the world’s most expensive drug, Zolgensma®. A gene therapy for a rare genetic condition which may affect about 500 infants per year in the United States, the $2.1 million therapy won’t be used by many patients but is requiring payers to rethink drug reimbursement options. Concepts being developed include pay-over-time, the use of stop-loss insurance offerings and value-based contracting. We expect the trend to continue in the coming years as more gene therapies enter the market.

We understand what high-cost claimants mean to our employer clients and continue to enhance our weekly high-cost claimant reporting tools to identify and review any single new claim over $15,000. We also monitor utilization for hyperinflation drugs and those that might be considered high-cost and low-value. We review such drugs on a quarterly basis with our internal Pharmacy & Therapeutics (P&T) Committee which is comprised of licensed pharmacists and medical doctors to make quick decisions as our PBM partners develop criteria to mitigate their use.
In 2019, value assessment frameworks gained prominence with the intention of identifying an objective price for what a drug or intervention should cost relative to its value. The Institute for Clinical and Economic Review (ICER) is the most popular and frequently referenced of such organizations in the U.S.

Willis Towers Watson reviews clinical solutions and strategies available to our employer clients through the support of our Clinical Innovation Hub, actuaries and a team of clinicians. The team met with ICER mid-year and has tracked numerous high-profile assessments the organization completed in 2019. These included new evidence on the long-term benefits of the injectable cholesterol-lowering drug Praluent®; cost-effectiveness thresholds for the first drugs to treat peanut allergy, including the recently approved drug Palforzia™; and ICER's first publication highlighting the costliest U.S. drug price hikes that were not supported by new clinical evidence. This organization plans to produce this report annually going forward.

Perhaps one of the biggest newsmakers was the value assessment of the world's most expensive and above-mentioned drug, Zolgensma. At $2.1 million, the drug manufacturer priced the drug very close to ICER's suggested cost-effectiveness benchmark. This brings forth a relatively new concept for employers and the health care system to grapple with: changing the discussion from value to access when a drug is considered high value and cost-effective but costs millions of dollars. Ways employers can ensure member access to these life-savings therapies will be an ongoing consideration in the coming years.

Diabetes in focus

The drug affordability and access challenge does not reside solely with ultra-high-cost drugs for rare diseases. It is also concerning for patients taking daily maintenance medications such as insulin for diabetes. Each of the PBM vendors partnered with the Rx Collaborative to offer comprehensive diabetes management programs. Some states have enacted laws that cap the out-of-pocket maximum a person would pay at the pharmacy counter for insulin, and some manufacturers have introduced lower list-price versions of insulins they already have on the market.

In 2019 we saw the gross insulin cost-per-prescription continue to increase, but at about half the rate it did in the prior year. The gross cost-per-insulin prescription increased by approximately 4% between 2017 and 2018, compared to about a 2% increase between 2018 and 2019. The dollar amounts can be seen in the below table.

<table>
<thead>
<tr>
<th>Insulin</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
<th>2018-19 % change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross cost per Rx</td>
<td>$903.10</td>
<td>$936.77</td>
<td>$953.39</td>
<td>2%</td>
</tr>
</tbody>
</table>
Managing drug spend is a key component to ensuring employees have access to new medicines (and that employers have the resources to pay for them). In 2019:

- Rx Collaborative membership increased 3.3% to a total of 4.8 million members.
- Per-member-per-month (PMPM) gross cost increased at a slower rate than the prior year, growing at 3.4% in 2019 vs 5.3% in 2018.
- Total plan cost (before rebates) increased by 7.7%, down from 12.6% in 2018.
- Member cost share continued to decline, decreasing by -5.8% in 2019 compared with a -4.0% decrease in 2018.
- Utilization remained mainly flat: The prevalence of patients using medication increased by about 1%.
- Price inflation continued to increase year over year with a 5.8% increase in 2019 drug price inflation compared to a 3.5% increase between 2017 and 2018.

Plan costs increased less sharply than last year, and member costs continued to decrease year over year. Member costs are likely decreasing from a combination of plan sponsor benefit design, state-based out-of-pocket caps for certain drugs and couponing from manufacturers and third-party vendors.

Overall, the cost trend continues to increase as we’ve experienced through most of the decade (Figure 2). Although non-specialty drug spend has decreased, the increase in specialty spend has offset it. The total gross cost for the top 10 drugs was $14 billion (roughly 22%) of the overall Rx Collaborative spend. This represents only 1% of total prescriptions which were used by roughly 3% of all active patients (medication utilizers).
Looking ahead: 2020 and beyond

Many of the trends that formed throughout the latter half of the past decade will continue in the coming years. Some new paradigms impacting employers’ drug spend in 2020 and beyond will include the continuous growth of digital solutions and an entrance into an era of multi-million dollar one-time treatments or “cures”. In 2020, specifically, the price of pharmaceuticals will receive heightened media and political attention.

Multi-million dollar drug approvals

Gene therapy drug approvals are changing the concept of what defines a “drug” and how access can be granted to those who need it when the costs are so high. Gene therapies constitute just one branch of biologic specialty drugs.

As we know, specialty drugs are high-cost prescription medications used to treat complex, chronic conditions like cancer, rheumatoid arthritis and multiple sclerosis. Many specialty drugs are biologics which are drugs that resemble natural products in the body. They work better than small molecule drugs (i.e. tablets or capsules) for certain diseases and have foundationally changed how many illnesses are treated.

Biologics are more complicated to make and give to patients. They are often very expensive and represent the fastest-growing class of therapeutic products in the United States. A biologic could replace a missing enzyme for a patient with a childhood metabolic disorder, replace a protein-like insulin for people with diabetes, or treat a specific type of cancer, for example. The biologic drug could also be a copy of a gene that gets injected into a patient so their body makes its own missing proteins, such as with gene therapies like Zolgensma. Alternately, it could be similar to upcoming gene therapies being studied for treating hemophilia which would allow a single-time gene injection to help the patient’s body create blood clotting factors on its own, rather than requiring blood factor injections multiple times each week.

Rare diseases are often treated with biologic drugs, and of the more than 7,000 known rare diseases, only about 5% have currently approved, available drug therapies. Due in part to FDA incentive programs, drugs that treat rare diseases are being approved faster than ever, raising some concern as to whether they are being approved with less evidence of safety and efficacy than has been historically required. For example, a 2019 study found that among 93 cancer drugs that received accelerated approval from the FDA between 1992 and 2017 using certain endpoints, only one-fifth ended up improving overall survival in later trials. Insurers need to constantly confirm medications are working for their members, as FDA approval alone cannot ensure clinical response.
The current landscape raises numerous questions for employers:

- How can employers be sure the drugs are working?
- Gene therapies are priced at a point for which they should replace existing treatment (i.e. the cost of a one-time gene therapy that offsets annual cost of current treatment could be quite high). But what if the “cure” does not last as long as intended?
- Is there a money-back guarantee, and how can a member be monitored over many years while potentially changing their insurer or employer?

Employers will need to consider multi-pronged solutions to protect themselves from exorbitant one-time costs and to know the medications they’re paying for are working as intended.

Topics of focus in the upcoming years are stop-loss insurance, pay-over-time initiatives, subscription or licensed payments, center of excellence management, and value-based or clinical outcome-based contracts with pharmaceutical manufacturers. In the coming year, employers will focus more energy on ensuring the drugs work as desired. A collective marketplace effort will result in a responsive change from pharmaceutical manufacturers. Willis Towers Watson is eager to work with employers on this.

Vendor management

Aligning employers with the right digital health vendors will be one of our key initiatives in the coming years. The importance of this and the impact from these vendors is only beginning to gain steam, as the digital health industry is growing rapidly. These organizations are run by industry insiders who promise significant savings on drugs, but the solutions often fall short. As the system seems to grow in complexity with no trend in the opposite direction, we see this situation continuing. In 2020 we will put additional resources into vendor assessments and focus on developing tools for objective review and cataloguing digital health vendors.

Not unlike the value assessments being undertaken for drugs such as those described with ICER, the Rx Collaborative will assess digital vendors’ value. However, proactively defining value is only part of the process. Whether focused on a drug or a digital app, it will be imperative to monitor ongoing effectiveness once the intervention begins.

Willis Towers Watson will work closely with all our vendor partners to push for the most robust reporting available, identifying opportunities for performance guarantees and ensuring value and price alignment. We will also work with our vendors to ensure real-world evidence is assessed, and our team can audit processes and outcomes to ensure relevant interventions are worth their costs and that they improve employees’ health.

A divisive political election year

There are many proposals currently working through the U.S. Congress with varying levels of support and at different stages in the process. Three of the most notable are:

- The Elijah E. Cummings Lower Drug Costs Now Act (H.R.3)
- The Prescription Drug Pricing Reduction Act (S.2543)
- The Lower Health Care Costs Act (S.1895).

Themes found in the legislation include direct government price negotiation on pharmaceuticals for federal health care programs, transparency around rebates, cost capping and other measures to limit and/or monitor price increases. There are also state policies that limit the out-of-pocket insulin costs for individuals, and others that propose allowing drug importation from Canada.

With an election year underway, the various federal and state bills will likely be referenced as ways to address prescription drug pricing and access issues in the U.S., though large policy changes are unlikely to occur before the fall election cycle commences.
A changing health care landscape

While the House and Senate consider drug pricing legislation, they are also faced with keeping tabs on a very rapidly changing health care delivery system. Some groups feel the federal government is falling short on this task and that major laws require an overhaul. For example, in November 2019, an article exposed a data-sharing agreement between Google and a large health system in which the medical records of 50 million people were shared with the technology giant without requiring HIPAA oversight.7

Telehealth and telemedicine practices are evolving along with the types of medications that can be prescribed; the impact on mental health services and medication-assisted therapy for opioid addiction may be significant.

Continuing on the theme of mobility, medications are being delivered the same day as their receipts or even carried to members’ homes via drones in pilot programs across the nation. These disparate changes to health care delivery will impact how employees access their medications and may shape how well traditional PBMs and industry incumbents are poised to compete with disruptive technologies that are shaking up the status quo.

Summary

Personalized medicine will both decrease and raise health costs at the same time. Some members will avoid drug therapy that is not likely to work based on their specific genetic makeup, while others will be prescribed a very high-cost drug for an ultra-rare disease. Learning how to take advantage of these potential cost savings to subsidize health expenses elsewhere will be imperative for employers in 2020 and beyond.

The volume of high-cost gene therapies coming to market makes this a reality not in the future, but now. The FDA’s prior commissioner, Scott Gottlieb, stated that at the start of 2019, there were already more than 800 cell-based or gene therapy drugs in development, and by 2025, the FDA anticipates approving 10 to 20 cell and gene therapy products per year.6

The Rx Collaborative clinical team is working cross-functionally with our vast Health and Benefits colleagues to identify best paths forward for ensuring access to these medications in a judicious and predictable manner. We will apply the same level of rigor to vendor assessments across the spectrum of health care technologies, delivery solutions and digital products. We are actively monitoring progress of policies impacting employers’ pharmacy benefits as they are proposed and are poised to help plan for the future.

Assessing value has been a central focus the past few years. A key theme of the coming years includes gaining proof that drug therapies and digital solutions are delivering on their promised value. Additionally, we will focus on access by aligning spending with truly valuable therapies to preserve resources that fund innovation and ensure access to life-changing products that have yet to reach the market.
Sources


About Willis Towers Watson

Willis Towers Watson (NASDAQ: WLTW) is a leading global advisory, broking and solutions company that helps clients around the world turn risk into a path for growth. With roots dating to 1828, Willis Towers Watson has 45,000 employees serving more than 140 countries and markets. We design and deliver solutions that manage risk, optimize benefits, cultivate talent, and expand the power of capital to protect and strengthen institutions and individuals. Our unique perspective allows us to see the critical intersections between talent, assets and ideas — the dynamic formula that drives business performance. Together, we unlock potential. Learn more at willistowerswatson.com.