# O Senior Health Care Executive Consensus on Transforming Retinal Disease Management through Diabetes Care



Jeffrey Dunn, PharmD, MBA\*, Cate Lockhart, PharmD, PhD†, Terry Richardson, PharmD, BCACP‡, Mark R. Barakat, MD§

#### **BACKGROUND**

An AMCP Market Insights program, in partnership with Impact Education, LLC, was held virtually in September 2024. Chief medical and pharmacy officers and other health care executives attended to discuss the management of retinal diseases in patients with diabetes.

## **OBJECTIVE**

To gain insights on how current health plan policies affect access to anti-VEGF treatments and the total cost of care; identify best practices in coverage policies for anti-VEGF agents; examine opportunities for innovative management of patients at higher risk of blindness; and understand the role of more durable treatment approaches in addressing social determinants of health (SDOH).

#### **METHODS**

The 11 senior health care executives from across the US, representing approximately 18.4 million covered lives, were polled during the program to understand agreement on statements regarding the management of retinal diseases in patients with diabetes. Consensus was defined as either a mean response of at least 3.3 or 100% of polling responses stating "agree" or "strongly agree" on a 4-item Likert scale (1 = strongly disagree, 4 = strongly agree). Moderated panel discussions followed each poll to gather insights and contextualize the responses.



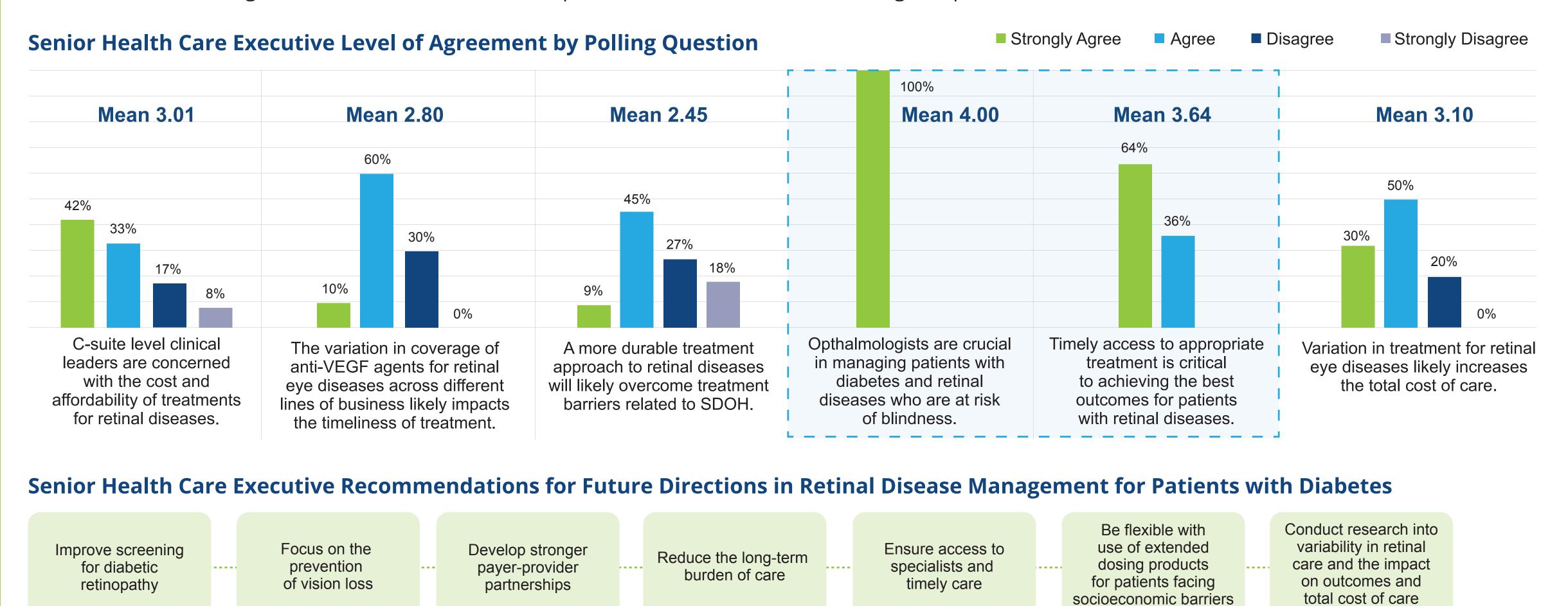




Health care executives specializing in clinical strategy, population health, and health plan management

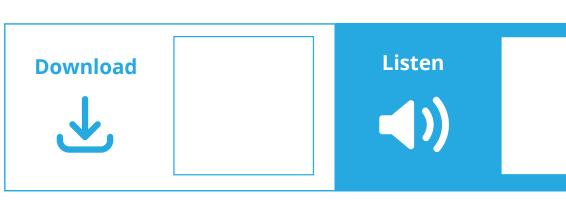
#### RESULTS

Consensus was reached on the importance of the ophthalmologist in managing patients with diabetes and retinal diseases who are at risk of blindness (mean 4.00) and timely access to treatment (mean 3.64). There was no consensus reached around treatment variation increasing the total cost of care (mean 3.10), anti-VEGF treatment cost concerns (mean 3.01), impact of coverage variation on treatment timeliness (mean 2.80), or more durable treatments addressing SDOH (mean 2.45). The executives shared a range of perspectives on the impact of current policies for anti-VEGF agents, reasons for not reaching consensus, and stressed the importance of shared decision making and patient education.



### CONCLUSIONS

The discussions for this AMCP Market Insights program underscored the need for a multifaceted approach that balances clinical efficacy, cost-effectiveness, and timely access to treatment for patients with diabetes at risk for blindness due to retinal diseases, particularly considering the variability in current prescribing practices within the anti-VEGF therapeutic class. There was consensus from health care executives on the important role of ophthalmologists in managing patients at risk of blindness and the importance of timely access to appropriate treatments to prevent vision loss.



Supported through an independent educational grant from Regeneron Pharmaceuticals, Inc.