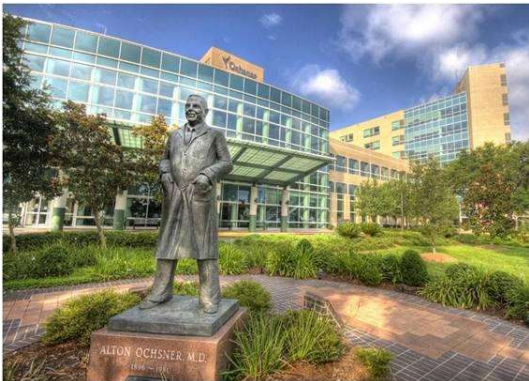


# NAIIS Presentation From ACIP to Immunized Arms

May 2025



## Ochsner Health & Ochsner Health Network



- Not-for-Profit Integrated Healthcare System & Accountable Care Organization (ACO)
- Located in the Gulf South
- One of the top 3 ACOs in the country by Quality Measures
- 47 hospitals and more than 300 health and urgent care centers
- 16 Retail and 2 Specialty Pharmacies
- 38,000 employees and over 4,600 employed and affiliated physicians in over 90 medical specialties and subspecialties
- 2.4M patient visits per year
- 70% of Primary Care visits in Value Based Contract arrangement
- #1 Employee spend= Prevention and Wellness

## Introductions

- Employer (38,000 \$ for \$ risk)
- Accountable Care Organization (ACO)
  - Function as Payer
  - Value Based Care arrangements
  - CMS Payment Models
  - Shared Savings Contracts
  - MSSP arrangements
- Healthcare Provider (Ochsner Health)
  - Clinical and Operational care delivery
  - Value based vs. Fee for Service reimbursement
  - Acute Care, ER, Urgent Care, Specialist Care, Primary Care, Digital Medicine, Retail pharmacy...



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## Cowboys and Pit Crews

- Atul Gawande
  - May 26<sup>th</sup>, 2011



- The problems of making health care work are large. The complexities are overwhelming governments, economies, and societies around the world.
- We have every indication, however, that where people in medicine combine their talents and efforts to design organized service to patients and local communities, extraordinary change can result.

## Design Principles & Mission



“Inspiring healthier lives and stronger communities.”

Humor as an antidote to stress and anxiety

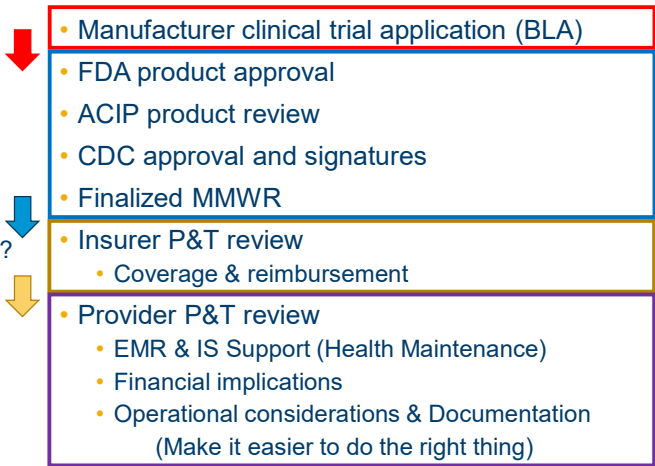


Vaccine P&T Subcommittee Chair Feb. 2020

“Transactions don’t heal people.  
Relationships do.”

## Product Review

- Comparable products?
- Place in therapy? Population served?
- Efficacy and Safety? Benefit vs. Risk?
- Recommendation or Shared Clinical Decision?
- Coverage and reimbursement? Part B vs. Part D?
- Compile and analyze all above information
- Contract pricing (GPO)?
- Vaccine preventable disease risk & cost?
- Storage, handling, look alike/Sound alike?
- Consensus guidelines from Specialists?
- Operational Complexity? Documentation?



## Coverage and Site of Administration

- Part B (Medical benefit)
  - Influenza
  - Pneumococcal
  - Hepatitis B
  - Vaccines to treat an injury/disease
- Part D (Pharmacy benefit)
  - Shingles
  - RSV
  - Tdap Booster
  - Measles

Pediatric patients  
(under 7 years)

Medicare patients



## Valuing RSV Prevention (2023)

### Vaccine Efficacy:

- GSK LRTD VE Sever: 94.1%, ARI VE 71.7%.
- Pfizer LRTI VE: 82.6%, ARI VE: 62.1%.

### Vaccine Cost:

- GSK Arexvy: \$300
- Pfizer Abrysvo: \$300

### Utilization:

- Enhanced Influenza historic use of ~50K doses
- Expect 30,000 patients would wish to become immunized.

- Expected Reimbursement: \$330

- 30,000 patients
- Plan Cost= 30,000\*\$330 = \$9.9M
- Drug cost: 30k x \$300 = \$9M
- Operational income = \$0.9M

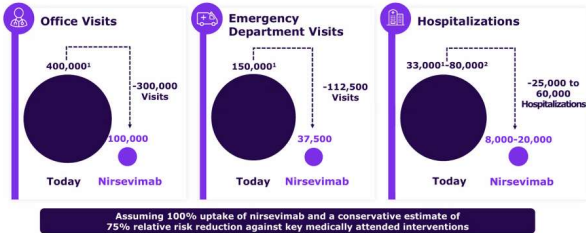
- Prevent 600 hospitalizations

### Nirsevimab

- Drug Cost
- ~8,000 infants
- Total Preventative Cost RSV: patients \* cost
- Cost per Hospitalization: \$15,000.00 per hospitalization

Break Even: Prevention of X# hospitalizations

Nirsevimab in All Infants Could Prevent 500,000 Medical Interventions due to RSV in the US Annually



# Appendix

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