Myasthenia Gravis Patient Payer Channel Distribution

Commissioned by UCB, Inc.

Prepared by:

Jake Klaisner, FSA, MAAA

Kali Schweitzer, PharmD

AJ Ally, MBA, RPH

FEBRUARY 2, 2022

Milliman

Caveats, Limitations, and Qualifications

This document has been provided for the exclusive use of UCB. UCB may share this information with external parties with Milliman's prior consent. We do not intend this information to benefit any third party, even if we permit the distribution of our work product to such third party. Any third-party recipient of this report desiring professional guidance should not rely upon Milliman's work product, but should engage qualified professionals for advice appropriate to its specific needs. Any releases of this report to a third party should be in its entirety.

The information is intended to summarize the myasthenia gravis payer mix analysis. It is not intended, and should not be used, for any other purpose.

Actual results may vary from the results presented due to potential differences in claims data. In preparing this information, we relied on methodology from UCB, internal claims datasets, and data from CMS. We accepted this information without audit but reviewed the information for general reasonableness. Our results and conclusions may not be appropriate if this information is not accurate.

This information is subject to the consulting services agreement between Milliman and UCB, effective October 12, 2016.

Jake Klaisner is an actuary for Milliman, a member of the American Academy of Actuaries, and meets the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of our knowledge and belief, this information is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

Milliman

Background, Methodology, and Assumptions

UCB, Inc (UCB) engaged Milliman to estimate the distribution of Myasthenia Gravis (MG) patients among the following payer channels: Medicare Fee for Service, Medicare Advantage, Commercial, and Medicaid.

We identified MG patients using an algorithm provided by UCB in conjunction with Milliman internal and Medicare 5% sample claims data. The identification algorithm is as follows:
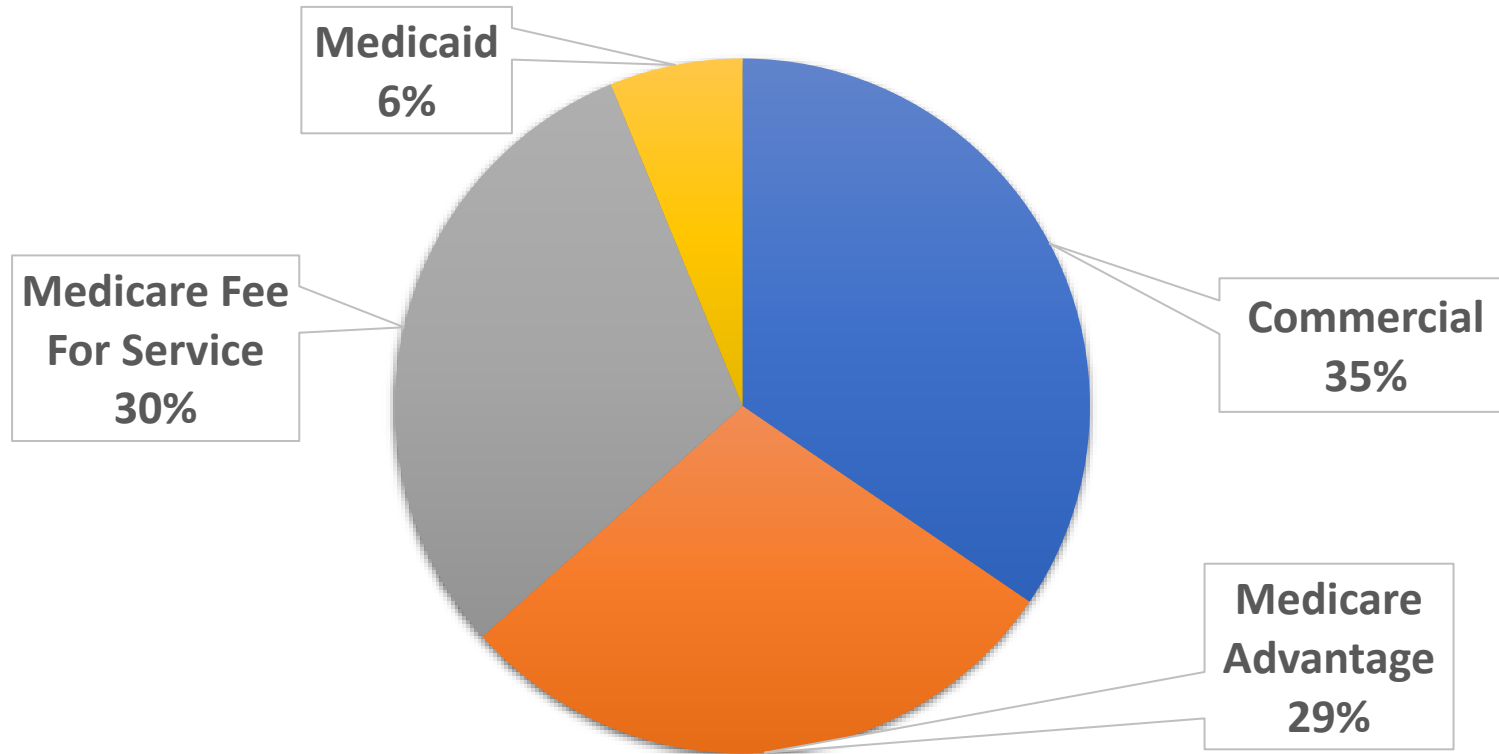
- Patients were identified as having MG if they:
  - Had two or more MG diagnosis codes within 24 months,
  - Were at least 18 years of age or more, and
  - Had at least 3 months between two of the MG diagnoses within the 24-month timespan.

The following ICD-9 and ICD-10 diagnosis codes were used to identify MG patients: 358.01, 358.00, G70.01, and G70.00.

Datasets used to summarize payer channel distributions include over 103 million members analyzed across 2018 and 2019.

Milliman

Myasthenia Gravis Patient Payer Channel Distribution
59% Medicare / 35% Commercial / 6% Medicaid

Medicaid
6%

Medicare Fee
For Service
30%

Commercial
35%

Medicare
Advantage
29%

- Overall prevalence **23/100,000**

- Patients within Tricare or using cash not included

Sources:

Milliman Consolidated Health Cost Guidelines Sources Database: Jan 2018 – Dec 2019

CMS Medicare 5% Sample: Jan 2018 – Dec 2019

Kaiser Family Foundation 2019 Health Insurance Coverage of the Total Population: https://www.kff.org/other/state-indicator/total-population/