Individuals Had More Cardiovascular Events When PCSK9 Inhibitor Prescriptions Were Rejected or Unfilled

This study analyzed 139,036 adults at high risk for cardiovascular events, including those with familial hypercholesterolemia (FH) and atherosclerotic cardiovascular disease (ASCVD) prescribed a PCSK9 inhibitor from August 2015 to December 2017.

### Increased risk of a cardiovascular event within a year

- **Paid** - Individuals were approved and received 338 or more days of therapy within 12 months
- **Rejected** - Final prescription coverage status was rejected
- **Unfilled** - The prescription was approved but not filled

#### Paid vs. Rejected

16% increased risk of heart attacks and strokes if rejected

#### Paid vs. Unfilled

21% increased risk of heart attacks and strokes if unfilled

#### Women, minorities, and individuals with low incomes were more likely to have rejected or unfilled prescriptions

63% prescription rejected by payers for individuals with FH and ASCVD

### Average Copay

- Paid Prescription: $103.17
- Unfilled Prescription: $233.80

### Individuals with FH are at the highest risk

Real-world evidence highlights that individuals with FH prescribed PCSK9 inhibitors are at highest cardiovascular risk

- **US Population**: 0.5%
- **Study Population**: 3.5%
- **Study Population: ASCVD**: 6.3%
- **Study Population: FH**: 8.9%
- **Study Population: FH and ASCVD**: 11.8%