



Addendum to the 2023 Affordability Review Summary Report: Stelara

Drafted: June 13, 2025

Approved:

Overview of the Data Miscategorization

Prescription Drug Affordability Board (“PDAB”, “Board”) staff were notified of a data miscategorization during the course of data validation in preparation for the Upper Payment Limit (UPL) rulemaking for Enbrel. Specifically, there was a miscategorization in the All Payer Claims Database (APCD) when a pharmacy benefit manager (PBM) submitted data to the APCD administrator, the Center for Improving Value in Health Care (CIVHC). The payer types examined during the original affordability reviews are: Commercial, Medicaid, and Medicare Advantage. The PBM submitted claims in which they categorized Medicare claims as commercial and commercial claims as Medicare. Staff validated the corrected data and presented the updated information to the Board at its meeting on [April 11, 2025](#). This document focuses on the corrected data for Stelara.

Impacted Data Points

Due to the miscategorization of payer-type by the PBM, multiple data points were impacted. Staff presented the Board with corrected information for the following data points for Stelara:

- **Patient Count:** the number of patients utilizing the prescription drug in a year.
- **Average WAC per Course of Treatment:** the average wholesale acquisition (WAC) cost per course/period of treatment. This was presented as a range because the exact number is confidential.
- **Average Paid per Person (APPY):** the average amount paid for the drug by both (patients and payer) per person per year.
- **APPY - Plan Paid:** the average amount paid for the drug by the payer per person per year.
- **APPY - Out-of-Pocket (OOP):** the average amount paid for the drug by the patient per year.
- **Total Paid:** total amount paid by payers and patients for the drug within one year.
- **Total Patient Paid:** total amount paid by all patients for the drug within one year.

Corrected Tables and Figures

Following sections are the corrected tables and figures for Stelara. The table and figure numbers correspond to the original [affordability review summary report](#) (ARSR). The corrected tables and figures will not consider outdated data and therefore do not include data from 2018.



Table 3

Utilization of Stelara (All Lines of Business/Both Claim Types)

Drug Name	Corrected Data			
	2019	2020	2021	2022
Stelara	877	1,058	1,418	1,635

Table 3 shows the number of utilizers of Stelara by year from 2019 - 2022 for all lines of business and both claim types.

Figure 1

Stelara Utilization by Payer Type¹

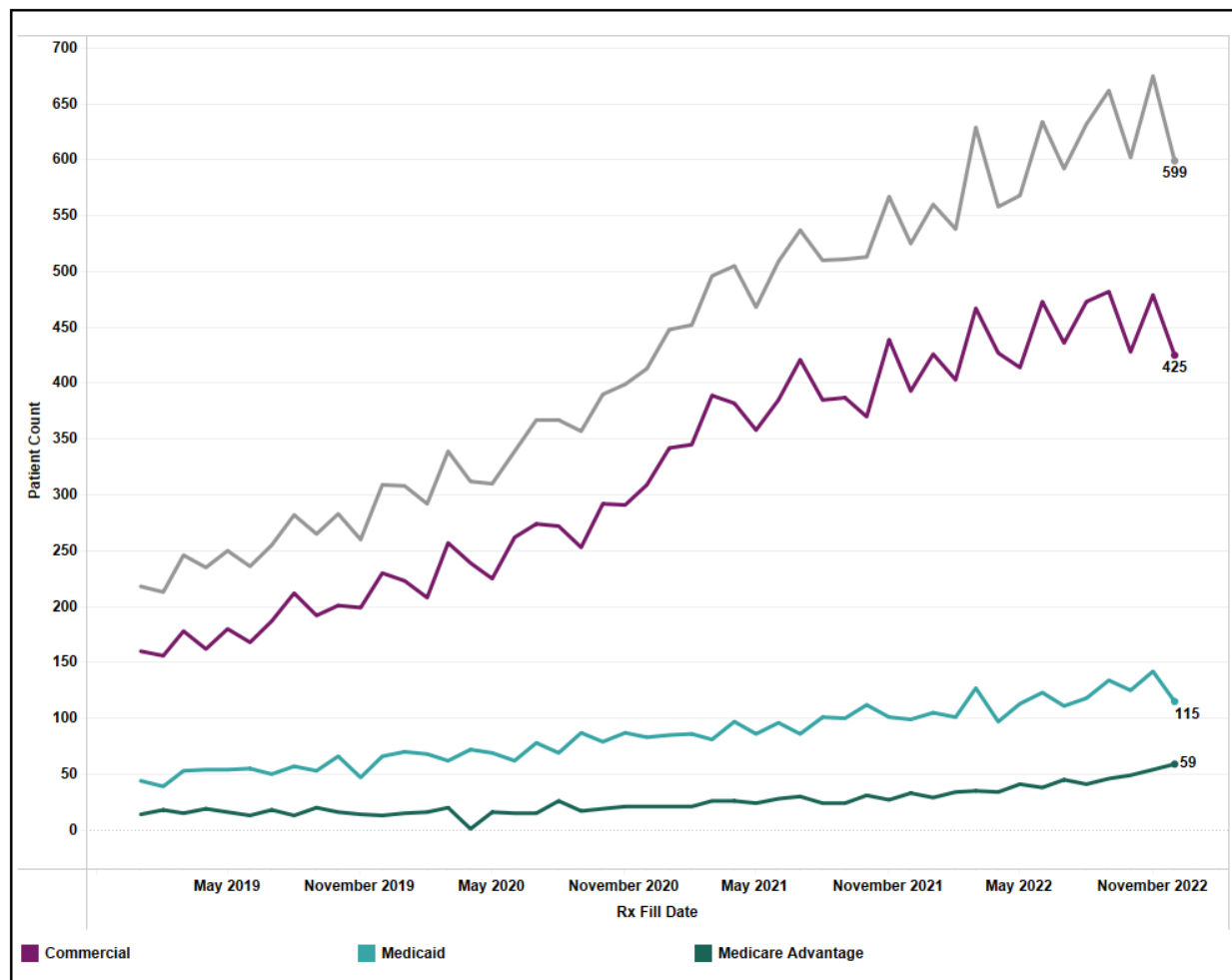


Figure 1 shows the number of patients who filled a prescription for Stelara each month between May 2019 and November 2022, where the purple line represents the number of commercially insured patients, the teal line shows the number of Medicaid patients, the green line shows the

¹ The numbers by payer type do not necessarily add up to the 'all' lines of business number as some individuals may have filled two prescriptions under two different payer types in one month.



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number of Medicare Advantage patients, and the gray line shows the total utilization in the Colorado APCD.

Figure 2

Insurance Information

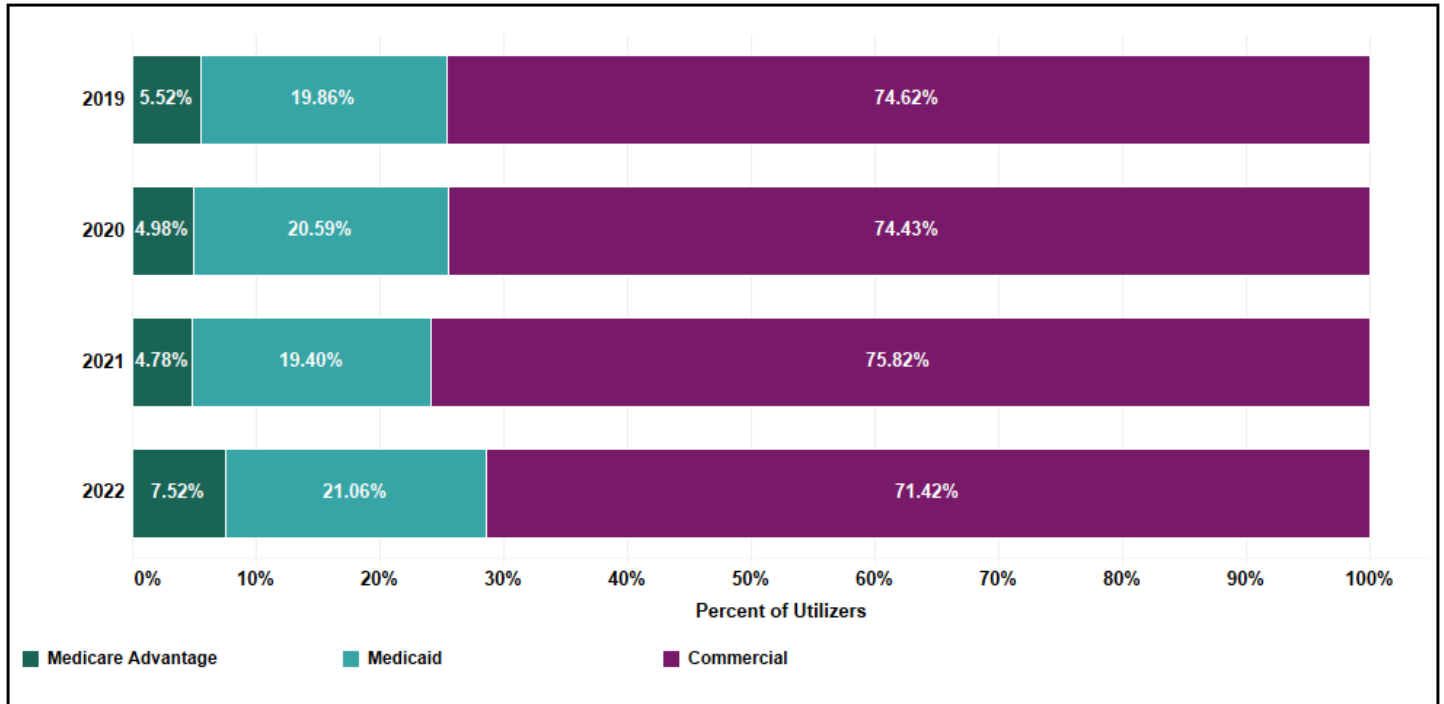


Figure 2 shows Stelara payer mix percentages from 2019 through 2022. This figure shows the percent of patients by payer type and year where green represents patients with Medicare Advantage, teal represents patients with Medicaid, and purple represents patients with commercial insurance. From 2019 through 2022, between 71.42% and 75.82% of Stelara utilizers were commercially insured.



Table 6

Utilization of Stelara and identified Therapeutic Alternatives (All Lines of Business/Both Claim Types)

Brand Name	Corrected Data			
	2019	2020	2021	2022
Stelara	877	1,058	1,418	1,635
Cosentyx	718	937	1,009	1,014
Ilumya	*	*	14	28
Taltz	224	319	888	1073
Tremfya	118	157	281	420
Skyrizi	88	253	530	961

Table 6 shows the number of utilizers of Stelara and therapeutic alternatives by year from 2019 - 2022 for both Medical and Pharmacy claims and all lines of business.²

Figure 4

Insurance Information for Therapeutic Alternatives (2022)

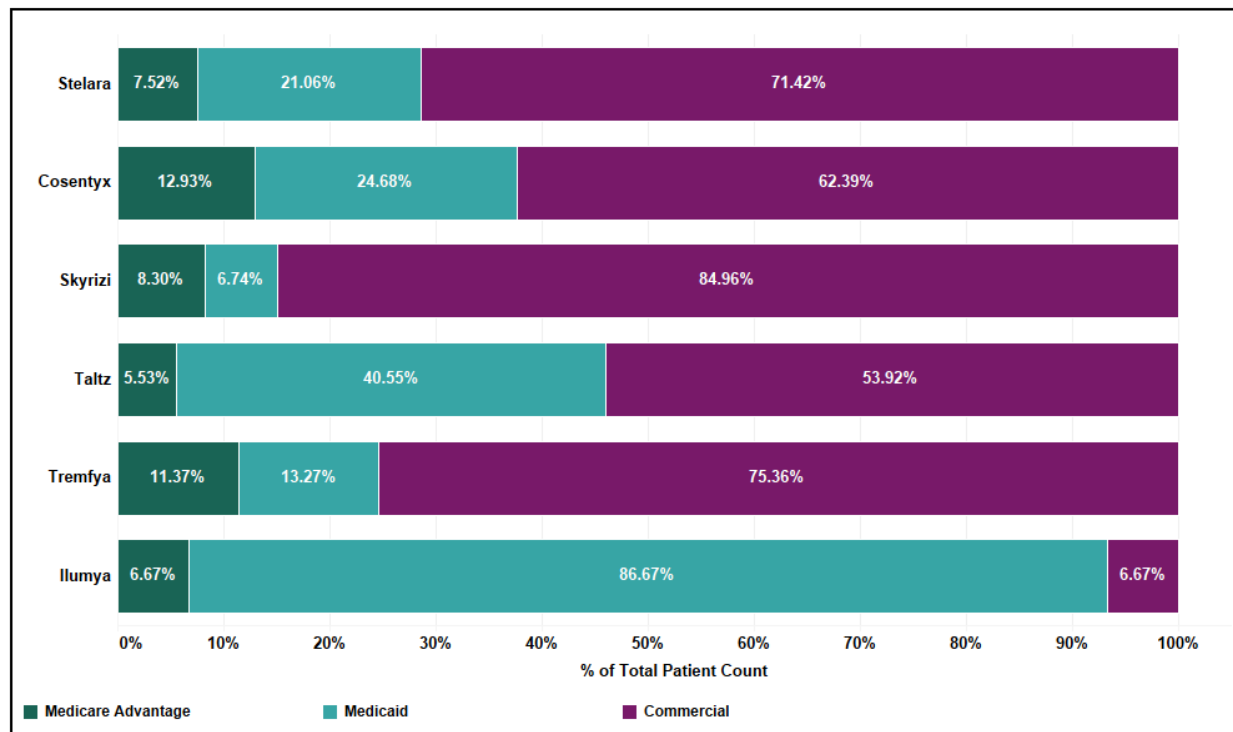


Figure 4 shows the 2022 payer mix for Stelara and its identified therapeutic alternatives. This figure shows the percent of patients by payer type and year where green represents patients

² An * indicates 12 or fewer patients using that drug in that year.

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with Medicare Advantage, teal represents patients with medicaid, and purple represents patients with commercial insurance. Stelara had 71.42% of patients covered by commercial insurance, which was lower than Skyrizi and Tremfya, but higher than the other identified therapeutic alternatives.

Table 7*Stelara's 2022 Price & Cost Per Person Statistics (All Lines of Business/Both Claim Types)*

Price & Cost Per Person Statistics	Corrected Data
	Amount
Average WAC per Course of Treatment Per Person	\$140k - \$150k
Average Paid per Person	\$117,318
APPY - Plan Paid	\$112,808
APPY - Out-of-Pocket	\$5,291

Table 8*Stelara's 2022 Statewide Price & Cost Statistics (All Lines of Business/Both Claim Types)*

Statewide Price & Cost Statistics	Corrected Data
	Amount
Total Paid Amount	\$177,384,299
Total Plan Paid	\$170,565,378
Total Medicaid Paid	\$23,610,531
Total Patient Paid	\$6,223,197



Figure 6

Average Commercial Out-of-Pocket Cost Comparison (Pharmacy Claims)

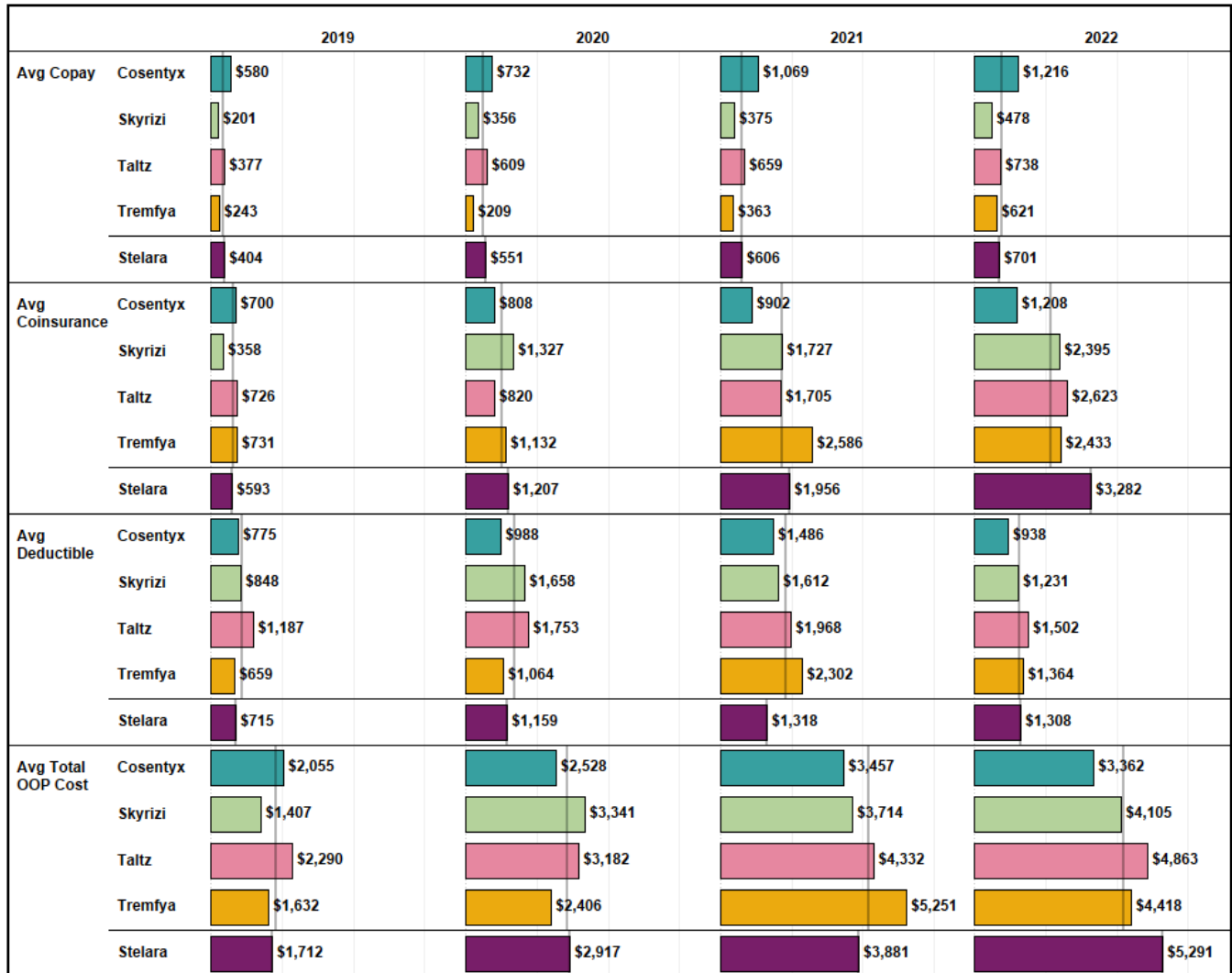


Figure 6 shows each out-of-pocket cost type for commercially insured individuals with Stelara in dark purple and its therapeutic alternatives by year. There is a light gray line that shows the average of the therapeutic alternatives as a comparison to determine if Stelara is more or less expensive than the average of its therapeutic alternatives. For example, the bottom right corner shows the average total out-of-pocket cost in 2022: Stelara was \$5,291, which is higher than all of the identified therapeutic alternatives, while the average across all therapeutic alternatives is \$4,187.



Table 9

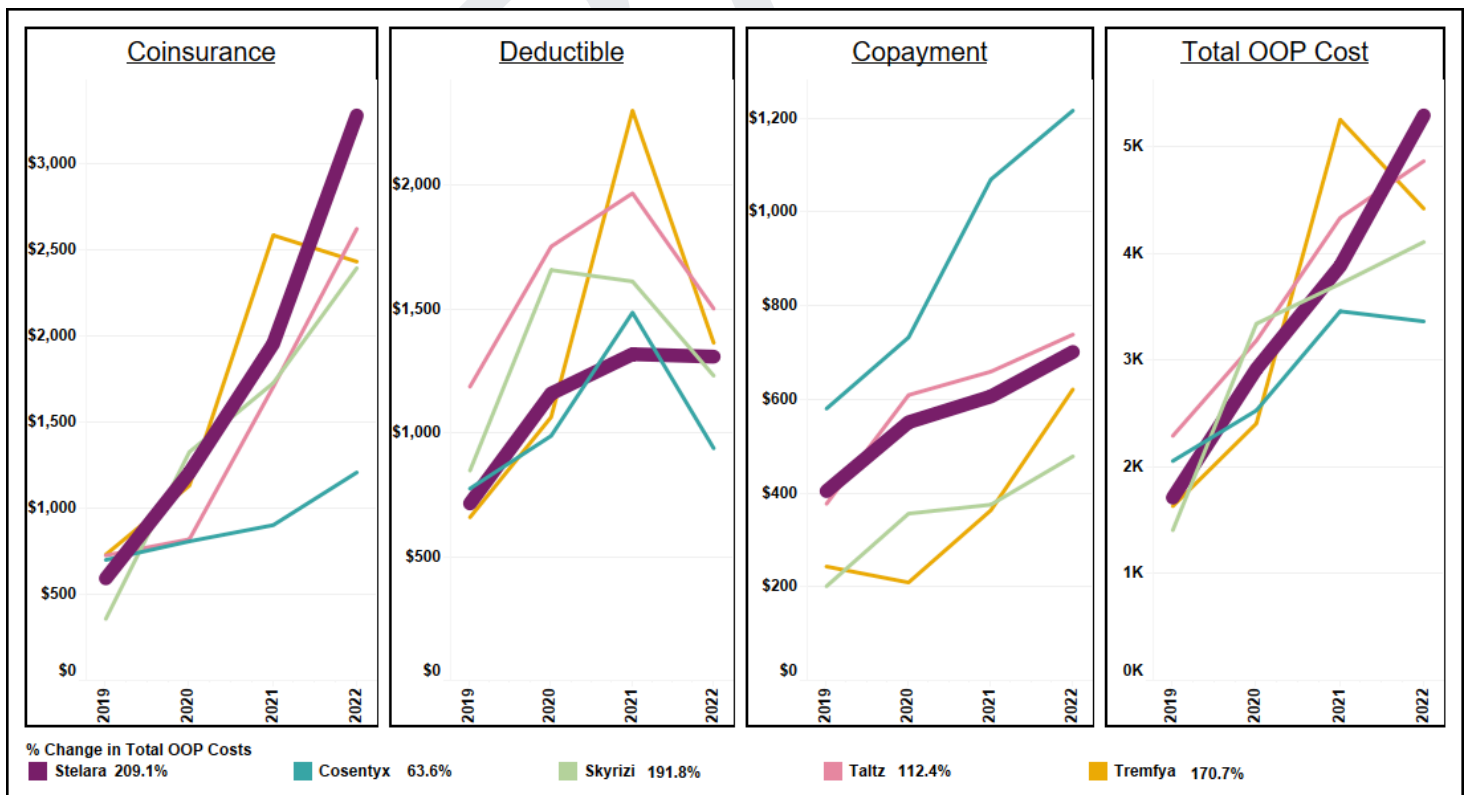
Average Monthly Commercial Out-of-Pocket Cost Information in 2022 (Pharmacy Claims)

	Corrected Data					
	Stelara	Cosentyx	Ilumya	Skyrizi	Taltz	Tremfya
Average Total OOP Cost	\$919	\$421	\$390	\$1,023	\$581	\$889
Average Coinsurance Amount	\$572	\$150	\$0	\$591	\$318	\$486
Average Copay Amount	\$122	\$151	\$390	\$116	\$89	\$121
Average Deductible Amount	\$225	\$120	\$0	\$315	\$174	\$282
Days Supply	49	27	84	56	28	44

Table 9 shows average monthly out of pocket expenditures for individuals who are commercially insured.

Figure 7

Changes in Copay Amounts by Year and Drug 2019-2022 (Pharmacy Claims)



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Figure 7 shows the annual change in the annual average OOP amounts comparing Stelara (dark purple) to its therapeutic alternatives. Below the graph, the percent change in total out-of-pocket costs from January 2019 - December 2022 for each drug is indicated. Stelara has the largest total out-of-pocket cost, which is largely driven by the increase in coinsurance and deductibles. It has the highest total out-of-pocket cost, with an increase of 209.1%.

Table 10*Annual Utilization and Expenditures (All Lines of Business/Pharmacy Claims)*

	Corrected data			
	2019	2020	2021	2022
Patient Count	799	974	1,284	1,533
Total Paid	\$58,986,250	\$89,361,290	\$138,362,339	\$177,384,299
Average Paid Per Person	\$75,199	\$87,854	\$105,776	\$102,950
	\$1,082,914	\$2,274,472	\$4,123,617	\$6,223,197
Total Patient Paid				
Average OOP	\$1,642	\$2,834	\$3,768	\$5,008

Table 10 shows the number of patients using Stelara, the total amount paid for Stelara, the average paid per person, the total amount that patients paid, and the average amount that each patient paid.

Figure 10

Monthly Utilizers for Stelara and Therapeutic Alternatives (Both Claim Types)

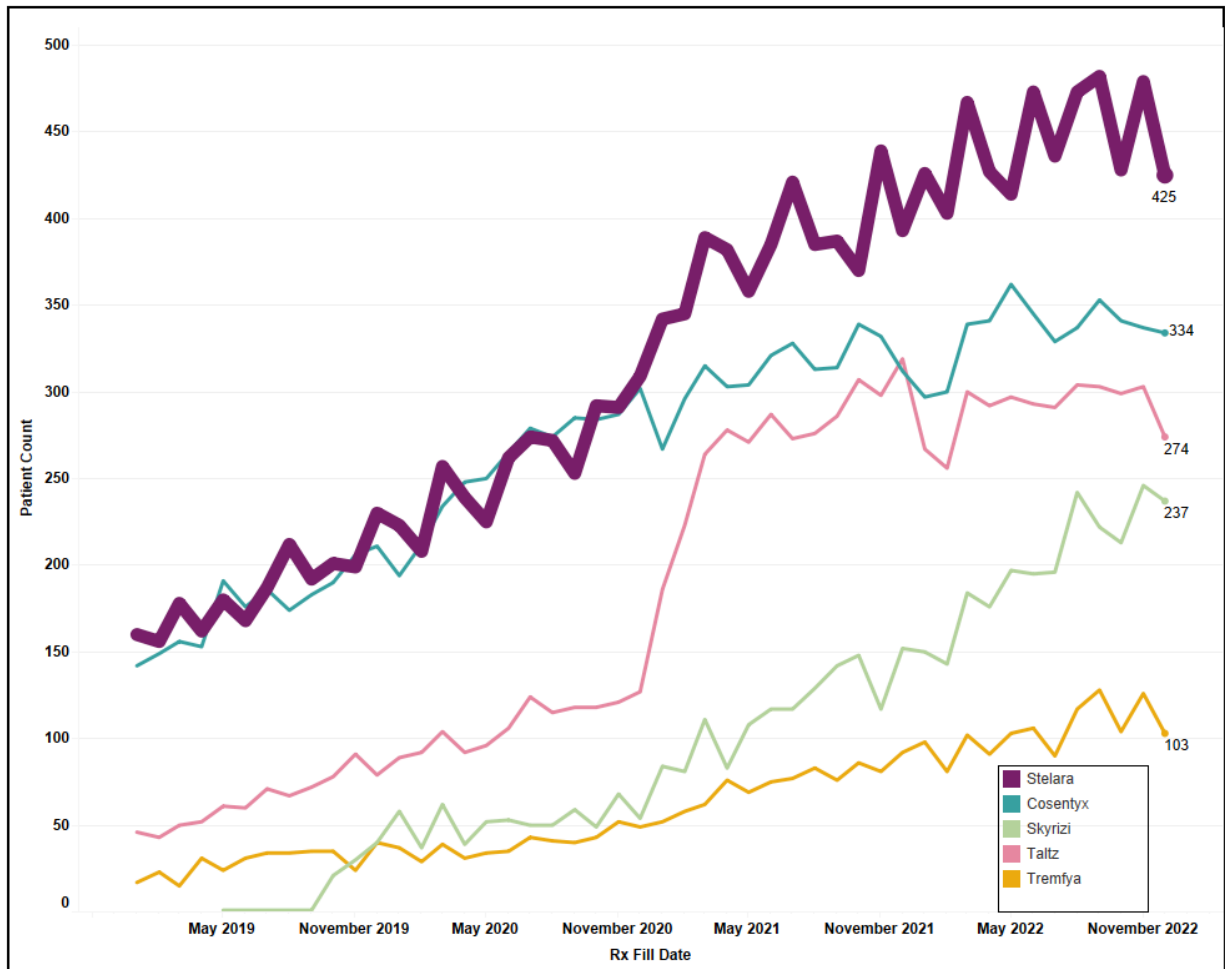


Figure 10 shows the monthly number of commercially insured utilizers of Stelara and therapeutic alternatives. Utilization of Stelara has increased from May 2019 to November 2022 and it is the highest utilized drug when compared to its therapeutic alternatives.



Figure 11

Monthly Total Paid and Average Total Paid (All Lines of Business / Both Claim Types)

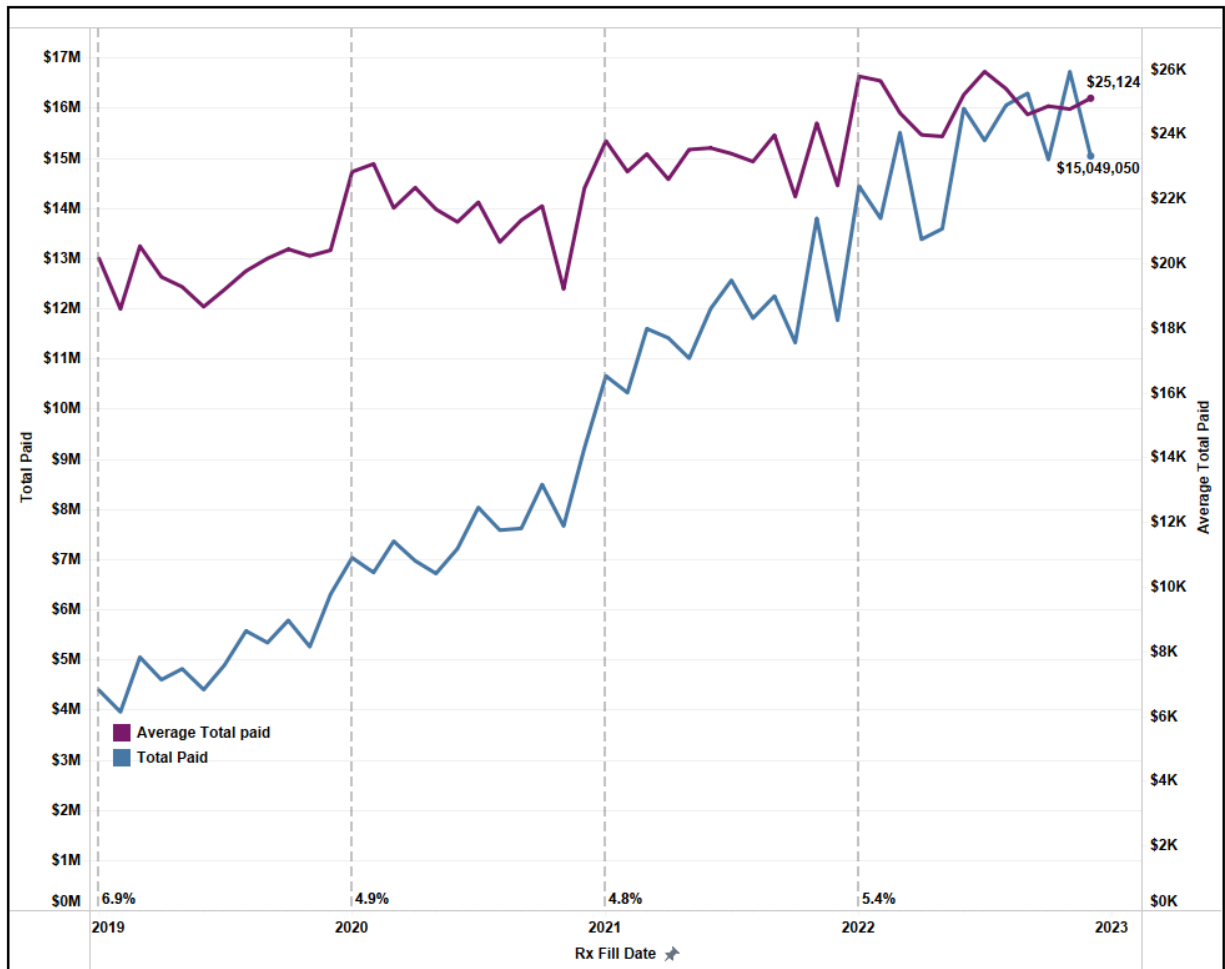


Figure 11 shows the monthly total paid with the blue line (left axis) and the monthly average paid per person with the purple line (right axis) with vertical dotted lines representing when there were increases in WAC with the magnitude of the increase written to the right of the line. There is no visible correlation between the WAC change and the corresponding change in the APCD paid amounts. During this time frame, the number of patients using Stelara increased from 877 in 2019 to 1,635 in 2022.