

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.

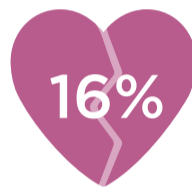
Increased risk of a cardiovascular event within a year

Paid - Individuals were approved and received 338 or more days of therapy within 12 months

Rejected - Final prescription coverage status was rejected

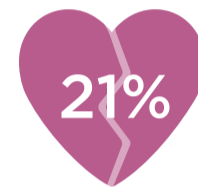
Unfilled - The prescription was approved but not filled

Paid vs. Rejected



increased risk of **heart attacks and strokes** if rejected

Paid vs. Unfilled



increased risk of **heart attacks and strokes** if unfilled

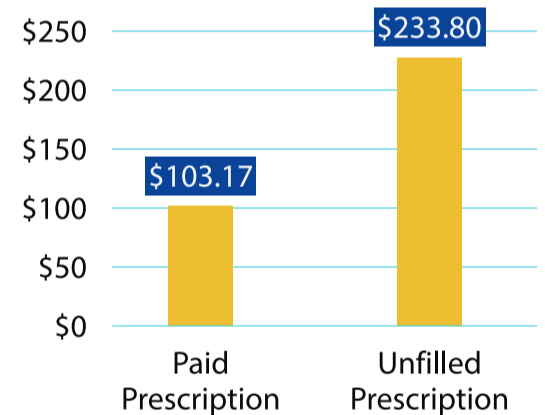


63%
prescription rejected by payers for individuals with FH and ASCVD



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

Average Copay



Individuals with FH are at the highest risk

Real-world evidence highlights that individuals with FH prescribed PCSK9 inhibitors are at highest cardiovascular risk (recalculated study data)

