

# 73rd Annual Roy A. Bowers Pharmaceutical Conference

Conference Summary Report

November 11, 2025 | Somerset, NJ

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# I. Opening Remarks

On November 11, 2025 the 73<sup>rd</sup> Annual Roy A. Bowers Pharmaceutical Conference was held in Somerset, NJ. The title of this year's conference was "Innovating In a Time of Uncertainty: Strategies for Resilience and Sustainability."

With a focus on health disparities, healthcare management, and innovative care delivery models the Bowers Conference connects an interprofessional audience of opinion leaders, learners and speakers to address key issues in order to bring about local and national practice change.

Key themes and learnings covered through the conference included:

- Adapting to evolving legislation: strategies from patients, payers, providers, and innovators
- Promoting growth and sustainability in Medicare, Medicaid & Exchange Markets
- Leveraging technology & Al to enhance patient outcomes and resource optimization
- Role of stakeholders in affordability and management of medical and pharmacy trends
- CAR-T cell therapy: current landscape and future outlook

Critical to the conference's organizer, Dr. Saira Jan (Professor Emerita at Rutgers and Vice President & Chief Pharmacy Officer at Horizon BCBSNJ), are the collaborations, sub-committees and action plans that are formed as a result of the day's discussions. Designed to break silos in New Jersey, the Bowers Conference is an interdisciplinary call to action where speakers and attendees alike are called upon to bring thoughtful solutions to the most pressing issues of the day.

This year's conference pulled from all aspects of the healthcare industry. The cost of health care has been rising for years and affordability is increasingly a challenge. Uncertainty from recent legislation remains an ongoing question. Healthcare inequities and social determinants of health remain especially impactful on health care access and patient outcomes. Using actionable data to invest in prevention and develop strategies to target interventions in stratified populations is critical. Partnerships, new models of care, member engagement and technology are the drivers which will help define sustainable solutions.

Prior to the keynote address, the recipients of this year's Roy A. Bowers Award, given to individuals every year that signifies lifelong leadership, innovation, and advancement, was presented to Dr. Louis Amorosa (Robert Wood Johnson University Hospital and Rutgers Robert Wood Johnson Medical School) and Dr. Brian Strom (Rutgers Biomedical and Health Sciences) in recognition of their achievements and vision in advancing the practice of medicine.

# II. Keynote Address

### Keynote Speaker

 <u>Ellen Lukens</u>, MPH, Former Deputy Director, Center for Medicare and Medicaid Innovation (CMMI)

Ellen opened the conference by highlighting key issues within the current U.S. healthcare system and detailing notable legislative changes. She provided statistics showing that the US spends more on healthcare per capita than peer nations but sees worse health outcomes. Looking forward, healthcare costs are expected to grow faster than GDP over the 2024-2033 time period.

Recent legislation that was highlighted to address affordability and access included:

- Inflation Reduction Act (IRA): passed in 2022 and has had impacts on cost share for Medicare enrollees and starting in 2026 will see impact of drug negotiations. Represents fundamental shift in how Medicare pays for drugs although the net impact of IRA remains to be completely seen
- One Big Beautiful Bill (OBBBA): Medicaid reform to tighten enrollment through eligibility changes. Also had impact of not extending enhanced premium tax credits which is expected to lead to an estimated 4.7 million people losing insurance.
- <u>TrumpRx</u>: federal website that connects consumers directly with manufacturers to buy at discounted prices. There are still many details to be worked out but manufacturers currently participating include Pfizer, AstraZeneca, Merck KGaA (EMD Serono), Eli Lilly, and Novo Nordisk
- Medicare Coverage of GLP-1 Medications: historically has not been a covered benefit for weight loss; however on 11/6, President Trump announced Most Favored Nation (MFN) agreements with Eli Lilly and Novo Nordisk for GLP1-s to be offered at a lower cost
- <u>GENEROUS "GENErating Cost Reductions for US Medicaid" Model</u>: announced by the CMS Innovation Center (CMMI) Authority in November to allow state Medicaid agencies to access MFN prices for covered outpatient drugs through supplemental rebate agreements. The model will begin January 1, 2026 and run through December 31, 2030

Ellen concluded with an optimistic view on the future of healthcare, focusing on the potential of technology and AI to transform the industry, the rise in consumer-driven care preferences, and the opportunities for improvement and collaboration despite the ongoing disruptions. For example, the CMS Innovation Center has a vision to build healthier lives through evidence-based prevention, patient empowerment, and greater choice and competition. And while the impact of AI has been relatively low to date, research suggests savings could be in the 5-10% range of healthcare spending.

# III. CEO Panel: Perspectives on Disease Burden and Future Outlooks

### Moderator:

Heather Staples, MBA, Executive Vice President, Enterprise Operations, Business
 Technology Solutions & Chief Information Officer, Horizon Blue Cross Blue
 Shield of New Jersey

### Panelists:

- Jubril Oyeyemi, MD, FHELA, Founder and CEO, Cherry Hill Free Clinic; Chief
   Medical Officer, Camden Coalition; Medical Director, Community Health Institute
   at Virtua Health
- o William Shrank, MD, MSHS, Co-Founder & Chief Executive Officer, Aradigm
- Brian Strom, MD, MPH, Chancellor, Rutgers Biomedical and Health Sciences,
   Executive Vice President for Health Affairs, Rutgers University

Heather Staples opened the session asking panelists on their definitions of disease burden and future outlooks over the next 3 years on affordability, access, and prevention. Dr. Oyeyemi explained that disease burden is not only limited to pathology but has an important intersection with social determinants like housing, transportation, and food insecurity. He outlined his journey towards establishing the Cherry Hill Free Clinic, which caters to those in acute need, emphasizing the critical role social factors play in health outcomes. Dr. Strom discussed disease burden from an epidemiologist's viewpoint, focusing on the prevalence and prognosis of diseases, complicating factors related to incidence and treatment success. Dr. Shrank articulated the financial implications associated with chronic illnesses, discussing potential transformative therapies and their significant costs. He stressed the need for systemic changes to ensure these therapies are accessible and affordable.

There was consensus among the panelists about the unsustainability of current healthcare costs, especially with potential changes in Medicaid and ACA subsidies posing additional strain on access to care. Dr. Oyeyemi highlighted how pathology is not largely changing but rather the biggest impacts are with social challenges in the community. Dr. Strom predicted the biggest impacts from vaccine preventable diseases as vaccination rates continue to trend downward from increasing distrust in science.

The discussion turned to the promise of AI and technology in healthcare, where panelists shared their perspectives and the potential benefits and risks. While AI could potentially enhance efficiencies by automating administrative work and allowing clinicians to focus on complex care, there were concerns about AI's accuracy and potential to introduce new errors. Drs. Strom and Shrank noted that technology generally increases costs (using the example of GLP-1s and gene therapy) and that there needs to be a balance with the technology that improves lives and our willingness to pay.

Education and interprofessional care emerged as another focal area, with Dr. Strom advocating for the training of healthcare providers from diverse disciplines under one roof to improve care delivery. Dr. Shrank emphasized a comprehensive approach involving all stakeholders to manage and distribute the costs of high-value therapies through new payment models. Finally, Dr. Oyeyemi shared profound stories of dedication and community spirit from his clinic, highlighting how volunteer efforts and collaborations can significantly improve healthcare access and outcomes for underserved populations.

# IV. Medicare and Medicaid: Trends, Challenges, and the Impact of **Legislation and Mandates**

### **Moderator:**

 Valerie Harr, MA, Interim Vice President, Medicaid, Horizon Blue Cross Blue Shield of New Jersey

### Panelists:

- Ellen Lukens, MPH, Former Deputy Director, Center for Medicare and Medicaid Innovation (CMMI)
- Mary Campagnolo, MD, MBA, Medical Director, Virtua Medical Group Value **Based Programs and Payer Contracts**
- o Laurence Clark, MD, FACP, Former CMS MAC Medical Director
- o Coy Stout, DSW, Executive Director, US Patient Support, AstraZeneca

In this session, moderated by Valerie Harr, the panelists engaged in a comprehensive discussion about the challenges and opportunities within Medicare and Medicaid, particularly focusing on how to better serve the most vulnerable populations.

Dr. Laurence Clark underscored his experiences with Medicaid patients, identifying critical issues such as lack of transportation and medication follow-up, which hinder effective care. He emphasized that organizational improvements, even without significant investment, can bring meaningful changes. From AstraZeneca, Coy highlighted how innovative methods and patient support programs can help manage Medicaid coverage loss and disease management. He discussed AstraZeneca's initiatives, including direct-to-consumer pharmacy programs that connect patients to support services, potentially reducing out-of-pocket costs. He reiterated the importance of engaging patients through as many modes of communication as possible and explained opportunities for use of AI through telephonic prompts.

Dr. Campagnolo emphasized the foundation of trust in science and healthcare. She described primary care medicine as being foundational, with increased support needed of primary care physicians in advanced primary care teams due to the increasing gap in the states' primary care workforce. She described Virtua's implementation of the IHI Age Friendly Health System model, which is focused around the 4 M's (what matters, mentation, mobility, medications). Additionally, she discussed their new systems for identifying cognitive impairment in Medicare

patients during their annual wellness visits and relayed the importance of reducing readmission rates through effective care coordination services as one mechanism to sustain the Medicaid program.

Ellen reiterated legislative impacts on Medicare and Medicaid and discussed the importance of health literacy. Dr. Clark highlighted data from KODIAK which estimate that Medicaid disenrollments expected under the One Big Beautiful Bill Act could wipe out more than 70% of an average hospital's net income.

Other topics covered throughout the session included impacts on caregiver burdens, pharmacy closures, and working with community advocacy organizations which will be important in helping individuals with keeping their Medicaid benefits with the new eligibility requirements.

# V. Healthcare Trends and Management Opportunities

### • Presenter and Moderator:

o Jayson Slotnik, JD, MPH, Partner, Health Policy Strategies, Inc.

### Panelists:

- <u>Dinesh Kandanchatha</u>, MBA, Chief Information and Technology Officer, Prime Therapeutics
- Niall Brennan, Chief Data & Analytics Officer, Horizon Blue Cross Blue Shield of New Jersey
- Suhas Gondi, MD, MBA, Chief Medical Officer, Health Strategy; Physician, Massachusetts General Hospital; Instructor, Harvard Medical School
- Mona Chitre, PharmD, President of Pharmacy Solutions & Chief Pharmacy
   Officer, Excellus, BlueCross BlueShield; Founder & President, Candesa Pharmacy
   Solutions; Chief Pharmacy Officer, Lifetime Healthcare Companies

Jayson kicked off the afternoon session reiterating the theme of the conference in remaining focused and calm in a rapidly changing environment. He started by providing an overview of the healthcare landscape noting inflationary pressures from hospital costs, hospital revenue cycle management, prescription drugs (including rising specialty and GLP-1 spend), and utilization of behavioral health services. Deflationary factors include both biosimilar and existing clinical management programs. He added that the rise in serious and chronic conditions among the younger population combined with the growing senior group is contributing to the continued increase in medical cost we've seen over the last several years.

In the panel session, Niall highlighted the inflationary pressures on healthcare spending, specifically mentioning challenges in handling hospital costs and increases in coding intensity. He reflected on his experience at CMS, stressing the complexities in containing healthcare costs and noted the potential beneficial role of AI if utilized correctly.

Mona detailed the diverse needs of employers, from large organizations to dairy farmers, underscoring the financial strains imposed by high-cost claimants. She expressed the critical need for empathy and practical communication in helping those employers manage healthcare costs who are increasing voicing concerns over affordability while also maintaining care for employees.

Dr. Gondi, drawing from his dual role as a physician and a consultant, emphasized the increasing need for well-informed clinical guidance and better communication around formulary management, driven by rapidly escalating drug costs, particularly GLP-1s which could see even expanded use in years ahead with new indications.

Dinesh talked in length about the roles of technology and AI as a means to provide agency and insight to consumers, thereby helping them make informed healthcare decisions. At the same time, AI must be used in an efficient and responsible manner which can be accomplished through targeted use cases. Collectively, the panel agreed that improving the patient experience and education around healthcare could lead to better outcomes and cost management. However, while transparency was noted as being generally positive, all the dynamics in healthcare can make interpretation difficult for consumers. Nial explained that evidence suggests that initiatives around price transparency, while good intentioned, have not actually bent the cost curve in any meaningful way.

Other topics covered throughout the panel included increased cost shifting to employees, consequences of vertical integration (which can provide incentives to patients), and impacts of drug rebates on both employers and consumers.

# VI. CAR T-Cell Therapy: Current and Future Models of Care

### Moderator:

 <u>Timothy O'Shea</u>, MS, PharmD, Director, Specialty Pharmacy, Horizon Blue Cross Blue Shield of New Jersey

### Panelists:

- Steven Libutti, MD, FACS, William N. Hait Director, Rutgers Cancer Institute;, Vice Chancellor for Cancer Programs, Rutgers Biomedical and Health Sciences; Distinguished Professor of Surgery, Rutgers Robert Wood Johnson, Medical School; Affiliated Distinguished Professor in Genetics, Rutgers, School of Arts and Sciences; Senior Vice President, Oncology Services,, RWJ Barnabas Health
- <u>Christian Hinrichs</u>, MD, Co-Director of the Duncan and Nancy MacMillan Cancer Immunology and Metabolism Center of Excellence (CIMCoE); Chief of the Section of Cancer Immunotherapy; Co-Leader of the Cancer Metabolism and Immunology Program.
- Andrew Evens, DO, MBA, MSc, Deputy Director for Clinical Services and Chief Physician Officer, Rutgers Cancer Institute and the Jack & Sheryl Morris Cancer Center Associate Vice Chancellor, Clinical Innovation & Data Analytics, Rutgers Health; Oncology Lead for RWJBarnabas Health Medical Group, and System, Director of Medical Oncology, RWJBarnabas Health, Professor of Medicine, Rutgers Robert Wood Johnson Medical School
- <u>Eric Bleickardt</u>, MD, VP, Late Clinical Development Cell Therapy; Global Drug Development, Bristol Myers Squibb

Timothy began the final session on the topic of cell therapy. He provided an overview on cell therapy, sources of cells used and differentiated between CAR-T therapy, TCR therapy, and TIL therapy. Efficacy data was reviewed showing that CAR-Ts have been shown to be highly effective for hematological malignancies. Despite over 35,000 patients having been treated with CAR-T since 2017, barriers to broader expansion were reviewed with data showing that as few as 15-20% of eligible CAR-T patients actually receive treatment.

Throughout the session, the panel focused on four key areas of cell therapy: access, pipeline and innovation, affordability, and solutions/collaborations.

Dr. Libutti started the discussion on the topic of access by noting that while CAR-T has historically been done in the inpatient setting, there has been movement into the outpatient setting which aligns to where most of cancer care is normally received. Dr. Evens added to the discussion by described their journey at RWJBH over the past 12 months in starting to move therapy outpatient. Dr. Bleickardt touched on barriers to uptake from referring provider perceptions and REMs requirements and cautioned that due to slow uptake, some manufacturers have started exiting in cell and gene therapy development. The group then touched on recent action by the FDA to remove REMS requirement on CAR-T therapies which has had benefit in shortening patient proximity to treatment center as well as driving restrictions. It was noted that although it is early to see the true impact of this change, initial data is showing promising CAR-T uptake over the past few months.

On the topic of pipeline and innovation, Dr. Hinrichs emphasized the complexity of translating laboratory discoveries into clinical therapies and talked about current innovation in the field of cell therapy including treatments for solid tumors and potential uses outside of oncology.

Affordability of cell therapy was addressed throughout noting the importance of financial models that support long-term healthcare savings from potentially curative single treatments and the impact of regulatory challenges, which can increase costs and delay innovation. Finally, the panelists agreed on the transformative potential of AI and collaborative efforts among healthcare systems, academic institutions, biopharma, and payers to expedite innovation and accessibility in cell therapy.