Background

- Rheumatoid arthritis (RA) was recently reported to have societal costs in the United States of $19.3 billion and $39.2 billion (2005 US $) without and with intangible costs, respectively.
- Comparative assessments of the burden of RA on work productivity versus more prevalent chronic diseases may help put RA in perspective for health care policy and reimbursement decision-making.

Objective

- To quantify incremental work absence and direct and indirect costs associated with RA compared with diabetes (DB) and depression (DP) among employed patients.

Methods

- Employee records from multiple large employers in the United States providing data about demographics, job-related information, and health care use in the HCMS database were assessed from 1/1/2001 to 6/30/2010.
- Patients with RA, DP, and DB were identified by ICD-9 codes.
- For the disease cohorts, the date when the employee had the first medical claim for the disease was considered the index date.
- Employees with >1 disease of interest were included in multiple disease cohorts accordingly.
- Controls, identified as employees without the disease, were chosen with an index date by employer similar to the corresponding disease cohort.
- Work absence and costs for the 12 months after each employee’s index date were measured separately for each pair of disease/control cohorts.

Results

- Of >340,000 employees in the HCMS database, ~340,000 employees with >1 year of health plan enrollment after the index date were included in each study:
  - 0.6% (N = 2705) had RA (mean age = 45.1, 61.4% female, Modifi ed Charlson Index = 0.477)
  - 6% (N = 20071) had DB (mean age = 46.1, 41.2% female, Modifi ed Charlson Index = 0.343).
  - 6% (N = 21022) had DP (mean age = 30.4, 60.1% female, Modifi ed Charlson Index = 0.249).
- Total incremental annual costs (icosts, Table 1):
  - Were greatest for RA ($5212): $1514 more than those for DB and $1197 more than those for DP.
  - Total: $5212 $3698 $4014 $1514 $1197 -$317.

Conclusions

- Although the burden of DB and DP are more widely recognized, RA imposes cost burdens greater than these diseases.
- Compared with employees without RA, there are signifi cant incremental burdens borne by employees with RA both in overall health care costs and in work productivity impairment.
- Despite the lesser prevalence of RA, the greater cost burden makes it important for employers and employees to plan health care policies that ensure their disease receive timely access to appropriate therapies.

Results (continued)

- Comparisons of Incremental Differences in Annual Health Benefit Costs per Employee Between Diseases (During the Year Following Each Person’s Index Date)

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