



Inspired by patients.
Driven by science.



Accounting for Value

2023 UCB U.S. Sustainable Access
and Pricing Transparency Report

Letter from Our Leaders

At UCB, people are at the heart of all that we do. We consider the person, not just the disease, and the people who care for them. Our continued work embodies what UCB stands for – that we are inspired by patients, driven by science.

This commitment is why we continuously innovate and invest beyond medications to accelerate discoveries, help the value chain work better, and improve the patient journey to provide affordable and equitable access for all patients who need our medicines in a way that is viable for society, our investors, and UCB.

Now in its third year, the UCB U.S. Sustainable Access and Pricing Transparency Report comes after an exciting year delivering on innovation at UCB. We had three U.S. FDA approvals for novel medicines for the treatment of rare neurological diseases and immunological diseases, as part of numerous other approvals and launches from UCB around the world.

Delivering these solutions draws on our scientific expertise, our deep understanding of disease biology, and our consideration of people’s lived experience with severe diseases so we can provide differentiated treatments and solutions.

The U.S. healthcare ecosystem continues to evolve – stakeholder consolidation amongst pharmacy benefit managers, insurers, hospitals, and physicians is an ongoing trend while the policy landscape changes. The implementation of the Inflation Reduction Act and other proposed legislation present new potential barriers to access and threatens innovation. Finally, ongoing abuse of the 340B Program and tools to limit the patient support offered by manufacturers also presents challenges. These factors together mean the need for collaboration among UCB and our stakeholders, including patients, is more acute than ever. As such, we are committed to providing information to stakeholders about how we account for the value of our medicines as well as outlining the actions we have taken to build a more resilient system together.

This report includes:

- How we are leading efforts to achieve sustainable access, i.e., affordable and equitable access in the U.S. healthcare system
- How we deliver affordable access and account for value, including when pricing our medicines
- Policy reform opportunities to build a resilient system together

This Report by the Numbers



74 064

Number of patients served by UCB patient assistance programs in 2023

30%

of eligible UCB clinical studies implemented Decentralized Clinical Trial model or a remote element



0.4%

Change in net prices for 2023 (cross portfolio)

51.5%

Portion of UCB gross sales provided to payers as rebates, discounts, and fees in 2023

US\$ 2.8 billion

2023 rebates, discounts, and fees provided by UCB to supply chain stakeholders, including private and public payers



MARK MORGAN

President and Head of U.S. Operations and Payer Value Strategy



PATTY FRITZ

Vice President and Head of U.S. Corporate Affairs

Access Vision, Strategies, Goals, and Governance

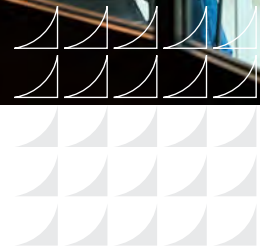
Leading Efforts to Achieve Sustainable Access in the U.S. Healthcare System

With three new U.S. FDA approvals this year for novel medicines for the treatment of rare neurological diseases and immunological diseases, UCB is poised to meet the individual needs of multiple patient communities in the U.S. through our unique portfolio of medicines and solutions. As we deliver these medicines to patients, we are committed to making our medicines as accessible as possible in ways that are viable for people impacted by severe diseases, for UCB, and for society.

UCB works with stakeholders throughout the value chain to promote affordable and equitable access to care. Despite ongoing efforts, barriers to sustainable access still exist within our current healthcare system:

- Patients are not always able to access or afford the best medicines available for their unique conditions.
- The system does not always recognize the value of innovative medicines for specific patients.

Systemic health inequities add barriers that significantly impact the health, social, and economic wellbeing of people and communities. At UCB, we believe we cannot achieve the best impact without improving health equity. We are working together with stakeholders throughout the healthcare system to address critical gaps in care caused by health inequities.



Deliver unique outcomes that help specific patients achieve their goals



Innovation

Provide patients the best individual experience



Value-Based Care

Ensure access to all those who need these solutions in a way which is viable for patients, society, and UCB



Affordable Access

Our Strategy

Patient Affordability and Transparency

UCB makes information on our pricing and affordability available to patients. We provide accurate information on list price or wholesale acquisition cost (WAC), expected out-of-pocket costs across a range of coverage channels, as well as patient assistance information on our website at: [UCB-USA.com/affordability](https://ucb-usa.com/affordability).

Through our actions, we are dedicated to the continued evolution of an **equitable** public policy environment that recognizes and rewards **innovation**, encourages **value-based care**, and promotes **affordable access** to medicines for patients.

Sustainable Performance

At UCB, we are defined by our purpose: we create value for patients now and into the future. We see sustainability as a core requirement to enable us to continue bringing differentiated solutions to people who need them. We are committed to improving access to these solutions for all patients who need them in a way that is viable for UCB, our shareholders, and society.

We work to ensure participants in UCB clinical trials are reflective of the populations who will ultimately benefit from our innovations. Our continued commitment to scientific innovation is why we reinvest around 30% of our revenue each year in research and development globally, building and strengthening a portfolio of solutions where our expertise can drive innovation to address the needs of the people we serve.

About UCB in the United States



1 784
U.S. employees in 2023



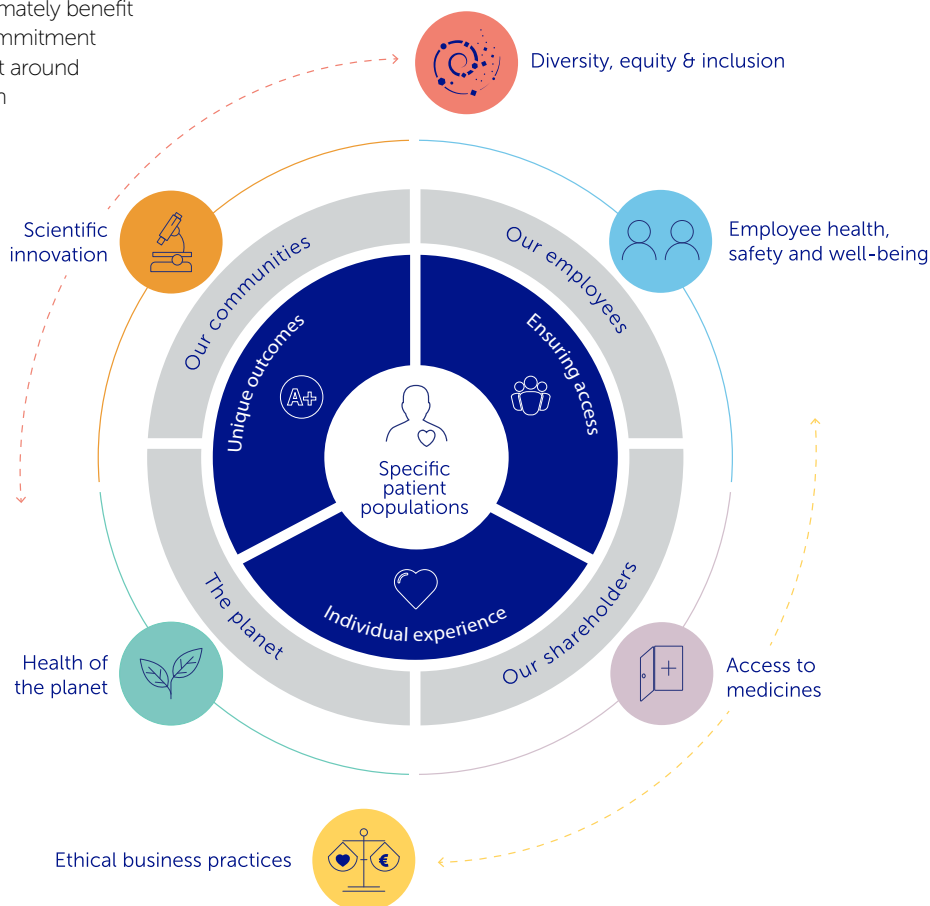
US\$ 1.1 billion
(2023 U.S. economic footprint¹)



More than 125
active clinical studies



7 UCB Offices
across 5 communities maintaining sites in Georgia, Massachusetts, North Carolina, Washington, and Washington, D.C.



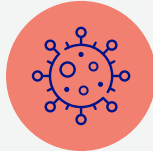
¹ Inclusive of the 2022 Zogenix, Inc. acquisition.

Our purpose is to create value for patients. Now and into the future.

Our Areas of Focus



Neurology



Immunology

Our People



36
Countries



9K
Employees



>3.2M Patients

use our medicines around the world



Sustainability as business approach

1928 90+ year scientific heritage

Our goal is to address the unmet needs of people living with a range of complex conditions, with a primary focus on neurological and immunological diseases, no matter how big or small the patient population. Receiving approvals for three new medicines in 2023 reflects a culmination of years of work and our commitment to continuously improving the standard of care across severe diseases:

- In **rare disease**, including **myasthenia gravis**, we aim to solve the challenge of lived experiences one individual patient at a time with tailored and unique approaches. We consider the person, not just the disease, and the people who care for them.
- In **immunology**, our ambition is to bring 'best-in-disease' treatment options to the community to enable more patients to achieve disease remission and to slow disease progression in people with moderate to severe diseases.

We continue to develop and deliver impactful solutions to support patient populations including those living with **psoriasis, psoriatic arthritis, axial spondylarthritis, rheumatoid arthritis, epilepsy, myasthenia gravis, rare syndromes like Lennox-Gastaut and Dravet, and osteoporosis** with continued research in gene therapy and development efforts in diseases such as **hidradenitis suppurativa, ultra-rare mitochondrial disease, juvenile idiopathic arthritis, and systemic lupus.**

For Additional Information on UCB, Visit:

[U.S. Public Policy Platform](#)

[UCBCares Patient and Provider Resources](#)

[Affordability Information](#)

[Sustainability as Our Business Approach](#)

[U.S. Innovation](#)

[Diversity, Equity, and Inclusion at UCB](#)

[UCB-USA.com](#)

“At UCB, we are committed to creating treatments that empower people living with severe disease to achieve their own goals and live their best possible lives. That’s why we create tailored patient support programs designed to help patients with access, affordability, and treatment support throughout their treatment journeys.”

Camille Lee,
Head of U.S. Immunology

Sustainable Access for Patients

Delivering Affordable and Equitable Access for Patients While Accounting for Value

We recognize that value comes in many forms, including those which cannot be measured in financial terms alone. We aim to apply a principled, evidence-based approach when pricing our medicines, consistent with the value our solutions create for society, patients, and the healthcare system.

Our goal is to enable affordable access to our medicines for all people who need them, in a way that is mutually viable for patients and their caregivers, society, and UCB. To respond to specific needs to optimize patients' experiences, we offer comprehensive support services to help patients and their caregivers who may face barriers to accessing or affording needed medicines.

“Every stakeholder within the value chain has a role to play in ensuring access. It is our responsibility as innovators to engage payers and decision makers early – where possible – to find ways to ensure that our innovative treatments, once discovered and developed, are delivered in a way that is accessible for the right patients and viable for people impacted by severe diseases, for UCB, and for society.”

Mark Morgan,
President and Head of U.S. Operations
and Payer Value Strategy

One way we do this is through our [commitment](#) to working with stakeholders throughout the value chain to promote affordable and equitable access to care for people living with severe diseases. As part of this commitment, we support the patient community in [advancing policies](#) designed to remove impediments to providers' ability to prescribe the most appropriate therapy and that preserve manufacturers' ability to provide assistance for patients who cannot afford needed medicines. We know we need to [listen and learn](#) from the patient community in order to best address their needs.

When it comes to the broader U.S. healthcare system, the policy environment plays a role in supporting innovation and value. Unfortunately, recent policies continue to create challenges for affordability and insurance benefit design, which can negatively impact patients and society. We believe the healthcare system needs to evolve further to serve patients better, including taking a closer look at how medicines make their way from researchers and manufacturers through the entire U.S. drug value chain to identify reforms that will improve access and affordability while allowing for continued innovation to bring improved treatments to people living with severe diseases.

Prioritizing our commitment to ensuring patients can access needed medications in this environment while maintaining a pricing model that supports innovation, UCB developed and implemented a set of foundational pricing principles in 2019 that tie price to value.

As part of UCB's pricing principles, net prices generally do not increase each year by more than the Consumer Price Index for All Urban Consumers (CPI-U), a metric that represents the percent change over time of the price of specific goods and services in the U.S. Any increase in price is tied to the value UCB's products bring to patients and society. Exceptional net price increases above CPI-U are linked to meaningful increase in patient or societal value. The CPI-U baseline is determined by a combination of Bureau of Labor Statistics data and Federal Open Market Committee (FOMC) forecasts.

Patient Support

People are at the heart of all that we do. We offer assistance programs that aim to help patients achieve their best lives, beyond their disease needs.

For patients prescribed one of our medicines, we provide tailored patient support programs that offer a suite of tools, programs, and resources designed to help patients with access, affordability, and treatment support throughout their treatment journeys. Patients are paired with dedicated coordinators who offer additional support.

Our other key assistance programs include:


UCBCares: Patients should never feel alone or left with unanswered questions about medications they have been prescribed. UCBCares is a dedicated service providing support to patients, caregivers, and healthcare professionals throughout the treatment journey.

When contacting UCBCares, patients and their families interact with specialists who are caring, ready to listen, and prepared to help. The UCBCares team can be reached [online](#) or by phone at 1-844-599-CARE (2273) to help with questions about UCB products, clinical trials, or our assistance programs.

Patient Assistance: While UCB advocates for policy changes that will help to improve patient access and affordability, we understand patients need assistance to obtain their medications right now.


Through the UCB Patient Assistance program, we provide certain medications at no cost to eligible and qualified patients who are uninsured or underinsured who otherwise have no access to the UCB medications prescribed by their physician.

UCB Population Health Resources: Population health is an important aspect of understanding the needs of people living with severe diseases and seeking solutions to address those needs. Our population health teams work with a wide range of stakeholders to help address challenges facing groups of individuals and their health outcomes. View our [online resources](#) to learn more about UCB's initiatives.



“At UCB, we know our past breakthroughs are only a prologue to our future.

We will continue to reimagine the holistic care for those living with epilepsy and rare epilepsy syndromes, leveraging today’s expertise for a better tomorrow.”



Brad Chapman,
Head, U.S. Epilepsy and Rare Syndromes

Figure 1 – Patients Benefiting from UCB Assistance Programs¹

	2019	2020	2021	2022	2023
Patients Benefiting from UCB Assistance Programs (including PAP and Co-Pay)	72 803	84 754	100 214	95 583	74 064

UCB also works to ensure our medicines are accessible to those who need them by considering patient out-of-pocket costs when negotiating formulary access with payers and offering patient assistance programs for uninsured or underinsured patients. For future launches, we use an internal pricing framework to continue ensuring that our pricing reflects the value our medicines provide to specific populations with unmet needs.

“While we have delivered on our ambition to create a UCB Rare Disease Portfolio, we still continue the dialogue by asking a simple question — how do we create patient value? — because it is how we show up for patients that make up the moments that matter to them.”

Kimberly Moran,
Ph.D., Head of U.S. Rare Disease

UCB Portfolio Pricing for Sustainable Value – 2019-2023

We strive to promote a healthcare system that provides affordable, and equitable access for all patients who need our medicines.

Guided by our pricing principles, we follow a value-based pricing approach to support access to our medicines. As a reflection of our principles, our cross-portfolio net prices have decreased five years in a row.

Simultaneously, our average discount rate increased by 2.6 percentage points, with UCB's 2023 discounts hitting an all-time high of 51.5%. That means UCB decreased our cross-portfolio list prices by over half as part of negotiations with health insurers and statutorily required government discounts. We provided US\$ 2.8 billion in rebates, discounts, and fees to private payers and government programs as well as providers, distributors, and others.

The rebates, discounts, and fees paid by UCB reflect the misaligned incentives in our current U.S. value chain that prioritize robust concessions from manufacturers to payers. However, we provide these discounts or rebates to payers and pharmacy benefit managers (PBMs) to support and improve access for patients who need and would benefit from our medicines. The portion of discounts UCB pays to Medicaid (16%) reflects the supplemental rebates that states negotiate directly with manufacturers. Medicaid discounts along with discounts from Medicare programs (19%), and other public insurance programs, results in 36% of all discounts going towards programs critical to many older and low-income Americans.

¹ UCB's assistance programs – including the patient assistance program and co-pay assistance – have helped over 74 000 patients in 2023.

In the current U.S. healthcare system, rebates and discounts should translate to **lower cost-sharing** and **greater affordability** for patients. Unfortunately, discounts and rebates are not always used by payers to decrease out-of-pocket costs for patients. More can be done to ensure these discounts are passed to patients at the pharmacy counter. Despite the constraints of the current system, we aim to create value for patients by providing them with access to medicines that help them take back control in their lives, whatever that means for them.

UCB works within the current system, providing robust negotiated rebates and discounts, to ensure that patients have access to needed medications, while simultaneously endeavoring to positively change that system to improve patient affordability of all medicines.

Figure 2 – UCB U.S. Product Portfolio Pricing % Change, 2019-2023

	2019	2020	2021	2022	2023
U.S. Product Portfolio % Change vs. Prior Year²					
List Price Change ³ (WAC)	6.4%	4.9%	4.0%	6.3%	5.7%
Net Price Change ⁴	3.6%	-2.5%	-2.3%	-3.3%	0.4%
U.S. Product Portfolio					
Avg. Discount ⁵ (%)	39.4%	42.2%	45.2%	48.9%	51.5%

Figure 3 – Patients Benefiting from UCB Products in the U.S.

	2019	2020	2021	2022	2023
U.S. Patients Served by UCB Products ⁷	321 986	334 942	417 834	312 403	297 450

² Annual percent change vs. prior year was calculated at a product level and weighted across the company's U.S. Product Portfolio

³ Represents the year-over-year change in the average list price or wholesale acquisition cost (WAC)

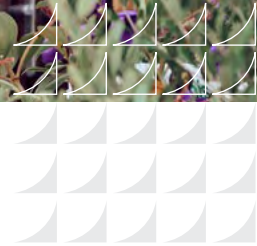
⁴ Represents the year-over-year change in average net price, which is WAC less rebates, discounts and returns, as provided by UCB Finance

⁵ Weighted average annual discount is calculated by dividing the sum of annual rebates, discounts and returns by annual gross sales

Data Note: Rebates, discounts, and returns are estimated by the company and methodologies used may differ from those used by other companies. This data is not audited and should be read in conjunction with the company's filings with the Financial Services and Markets Authority (FSMA). UCB implemented its pricing principles and the realization took place between 2019 and 2020, which is reflected in the data.

⁶ Based on December monthly data aggregated for U.S. marketed products (BRIVIACT™ (brivaracetam), CIMZIA™ (certolizumab), FINTEPLA™ (fenfluramine), NAYZILAM™ (midazolam), NEUPRO® (rotigotine), and VIMPAT® (acosamide)). NAYZILAM's first full year on the market was 2020.

⁷ In 2023, UCB switched to an external source for patient numbers to facilitate auditability. 2023 patient numbers and year-over-year comparisons in this document are calculated using the Moving Annual Total (MAT) patients (Estimated Actual Treated) at the end of Q3/2023 as provided by IQVIA.



UCB Perspectives

Discovering new solutions propels patient care forward. At UCB, we work every day to discover and deliver differentiated solutions to give people impacted by severe diseases more options that help them live the best life they can, whatever that means for them. We strive to undertake initiatives beyond medicines to accelerate discoveries, help the value chain work better, and improve the patient journey.

“Innovation in healthcare is not just about developing new treatments or technologies, but also about understanding patients’ needs. When we promote a healthcare system that supports value-based care, we are recognizing and responding to a person’s unique needs so they can enjoy the moments that matter most.”

Patty Fritz,
Head of U.S. Corporate Affairs

Value-Driven Care

Collaborating with Patient Communities

UCB understands regular engagement with the people who benefit from our medicines, healthcare professionals, advocacy, and professional organizations is an important aspect of our work to advance policies that support value-driven care and help people living with severe diseases. Our ambition is to continuously innovate to develop unique solutions that create the best individual experience for patients. This also means ensuring access for all who need these solutions, in a way which is viable for UCB, for patients, for communities, and for society. Our work to [build a coalition](#) with patient advocates and healthcare professionals to [transform](#) the policy and access landscape for patients with hidradenitis suppurativa and partnering with the [myasthenia gravis \(MG\) community](#) to listen and elevate the voices of those impacted fuels innovation and programs that make a tangible difference for patient and their families.

Health Equity

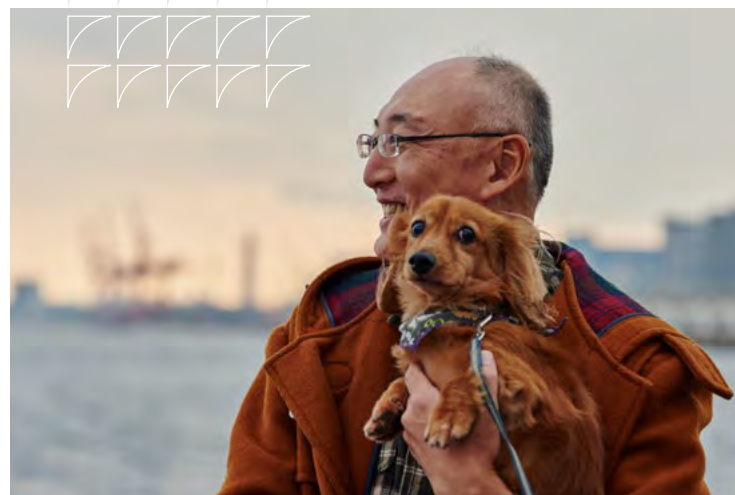
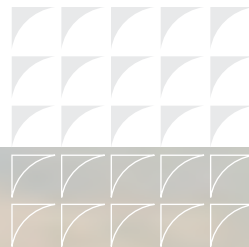
At UCB, we understand we have an important role to play in helping to close care gaps impacting historically excluded and disenfranchised populations. We believe that health equity is achieved when every person can attain their best health potential, and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances.

One place where we see a critical gap is in dermatology diagnosis, treatment, and general care. Specifically, the prevalence of psoriasis may actually be higher in people of color. Not only does this impact diagnosis, but it also affects the types of treatments offered, access to those treatments, and most importantly, the patient's quality of life. We are [partnering with key stakeholders](#) in the dermatology community to build a clinical trial infrastructure that addresses health disparities and closes the gap in clinical trial diversity to better reflect the intended treatment population.

Women living with chronic diseases may encounter challenges related to the management of their disease and their medication — including whether to continue or stop treatment during their reproductive health journey. UCB [launched](#) a global commission named BRIDGE (Better Research, Information and Data Generation for Empowerment) to advance practical and action-oriented solutions to overcome information gaps that affect women's health. BRIDGE is a voluntary, multidisciplinary group of physicians, researchers, patients, and women's health advocates working to empower women with chronic diseases with evidence-based, accessible information to make shared decisions about their treatment during their reproductive health journey.

“To achieve health equity, we must understand the care journey, including social determinants of health that exacerbate health inequity and prevent people from achieving the best possible health outcomes. A healthcare system that supports sustainable, affordable, and equitable access is one that tackles the important issues impacting health equity.”

Patty Fritz,
Head of U.S. Corporate Affairs



Health System and Societal Value

Building a Sustainable, Value-Driven System Together

The U.S. health system is highly complex, and achieving broad, systemic change is hard. When our public policy environment supports innovation and value-based care, patients, and the entire healthcare system benefit.

At the same time, policies, like some of those included in the Inflation Reduction Act, fall short on improving affordability and protecting innovation. We won't stop innovating, but stifling competition that fosters more choices and lowers costs for patients is a harmful policy approach. While some changes will improve affordability – like an annual cap on what seniors pay for medicines – there are more changes that would help improve both affordability and access we would like to see. This includes sharing rebates at the pharmacy counter and eliminating the deductible in Part D.

To build a resilient health system for the future, we need solutions that span the system and stakeholders. UCB is helping to drive that kind of change through transparency on current access and affordability challenges to facilitate critical conversations to move our healthcare system forward in ways that serve people living with severe diseases better.

Improving Patient Affordability

We are committed to working across the healthcare ecosystem – with patients, payers, providers, caregivers, and policymakers – to explore a broad range of value-driven contracting and financing approaches that more **clearly connect price to value** and support smarter spending in the healthcare ecosystem, while ensuring that patients can access and afford the next generation of transformative medicines.

We are encouraged by the redesign of the Medicare Part D cost-sharing structure contained in the Inflation Reduction Act. We hope that the changes will lower Medicare beneficiaries' out-of-pocket costs, and the option allowing patients to "smooth" large costs over the benefit year will **assist patients in affording their medicines**. This change is the first step toward helping patients manage out-of-pocket costs and may improve access to necessary treatments. UCB is hopeful that additional changes are on the horizon:

- Oftentimes, medicines are valued by PBMs based on the discounts offered by manufacturers rather than the potential benefits a medicine provides. However, patients still do not benefit from negotiated discounts for prescription drugs. Often, patients' cost-sharing at the pharmacy counter is based on the full list price, rather than the negotiated, or net, price insurers pay. Basing patient cost on **negotiated, rather than list, prices would meaningfully lower patient out-of-pocket costs**.
- Patients should have access to a range of **affordable, quality health plan options** that permit patient assistance from manufacturers and offer robust patient protections. To that end, UCB supports policy reforms that require co-pay assistance from manufacturers to count toward a patient's deductible and out-of-pocket maximum (e.g., co-pay accumulator and maximizer bans), or at least limit the use of those programs. We also want to ensure patient health plans provide formulary access to innovative, specialty medicines. We have come so far – developing treatments that have **transformed the standard of care** for patients with rare conditions and diseases. However, excluding specialty medicines from covered benefits can be detrimental to patients.



Preserving the Provider-Patient Relationship

UCB supports healthcare providers' ability to choose the best medicine for an individual patient's treatment needs and goals while minimizing unnecessary administrative burdens or treatment restrictions (such as prior authorization procedures). As part of this commitment, we actively advocate to advance policies designed to remove impediments to providers' ability to prescribe the most appropriate therapy and that preserve manufacturers' ability to provide assistance for patients who cannot afford needed medicines.

Of particular concern is step therapy, a mechanism used by payers to require patients to "step through" or "try and fail" on one or more treatments before getting access to the most appropriate treatment, as determined by the patient and their healthcare provider. We join with patient communities in actively supporting policy reforms to address step therapy, including the federal and state-level step therapy override legislation. Within individual states, UCB has also piloted a program to create resources to educate and assist providers when navigating step therapy override processes to help enable patient access to the most appropriate therapy.

We also oppose policies that penalize eligible patients for accessing manufacturer assistance in affording their medicines and join with the community in advocating for the elimination of or limitations on co-pay accumulator and maximizer policies. UCB is engaged at both the state and federal levels to advocate for policies that curb the use of both co-pay accumulator and maximizer programs in federally-regulated health plans.

At UCB, we remain dedicated to the continued evolution of a public policy environment that preserves patient-provider shared decision-making and simultaneously recognizes and rewards innovation and encourages value-based care while promoting affordable access to medicines for patients.



“There’s a lot going on around the country and in Congress to try to address some of these issues. And it’s great that the patient community is working together to make sure this is happening, and it’s also great to have the support of pharmaceutical companies.”

Carl Schmid,
Executive Director,
HIV+Hepatitis Policy Institute



Inspired by **patients.**
Driven by **science.**

ucb.com