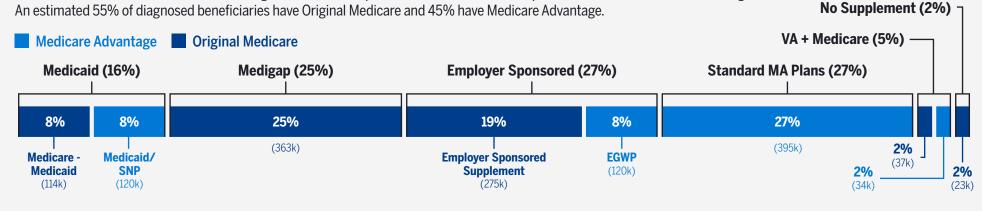
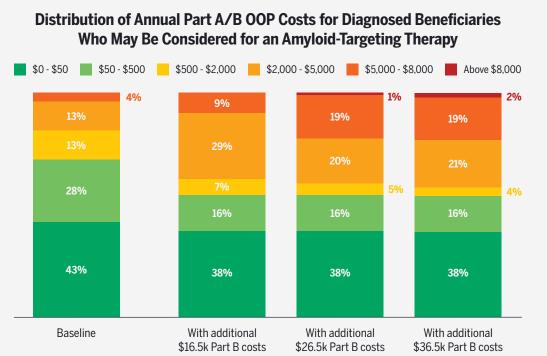
Alzheimer's disease: An analysis of the diagnosed population and out-of-pocket cost exposure

Estimated 2022 Medicare Coverage Distribution for Beneficiaries Who May be Considered for an Amyloid-Targeting Therapy

More than 98% of beneficiaries have coverage that limits or caps the amount of OOP cost exposure for Part A/B services and drugs.



Part A/B Annual OOP Estimates*



Average Increase to Annual OOP Costs Under Varying Costs Scenarios

Part B Amount Added to Baseline:	\$16.5k	\$26.5k	\$36.5k
Total		— \$1,245 —	— \$1,399
Original Medicare	\$217 —	— \$345 —	— \$472
Medicare Advantage	\$1,621 —	— \$2,124 —	- \$2,305

Across all three cost scenarios, **61% of Medicare** beneficiaries had incremental OOP costs of \$50 or less annually.

By coverage type, **86%** of Original Medicare beneficiaries and **37%** of Medicare Advantage beneficiaries had incremental OOP costs of \$50 or less annually.

*Employer sponsored supplement and EGWP plans are excluded from the OOP results due to lack of publicly available information about the plan benefit designs and cost sharing.

Results may not sum to 100% due to rounding. See accompanying Milliman White Paper for sources and methodology, 'Alzheimer's disease: An analysis of the diagnosed population and out-of-pocket cost exposure.'

These estimates do not intend to size the number of individuals who qualify for or would choose to be treated by one of the approved or pipeline monoclonal antibodies directed against amyloid.

EGWP: Employer Group Waiver Plans K: Thousands MA: Medicare Advantage OOP: Out-of-Pocket SNP: Special Needs Plans VA: Veterans Affairs Healthcare

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