OBJECTIVES: To determine 1-year direct medical costs of treating patients with Chronic Lymphocytic Leukemia (CLL) from the Brazilian Private Health Care perspective.

METHODS: The Orizon database, an administrative database containing inpatient and outpatient claims to a pool of 102 HMOs representing 34% of the total Private Health System, was reviewed from Jan/2009 to Dec/2012. Eligibility criteria and claims made during the period were included in the analysis, the last two years (2011-2012). Outcome was direct medical costs (DMC) per patient-year, calculated as the sum of the medical claims for each patient included in the analysis, for a maximum of 12 months of health care. When the patient was hospitalized more than once in the same year, the first DMC was categorized in chemotherapy, hospitalizations, and other outpatient costs. Further analysis was conducted for chemotherapy and hospitalizations.

RESULTS: From 735 patients with CLL identified in the database, 164 met eligibility criteria and claims were included in the analysis, a total of 100 patients-years. Total DMC in this population was R$ 16,555,421 (mean cost of R$ 165,827 per patient-year), from which R$ 9,451,124 (57%) are related to chemotherapy, 1,655,371 (9.4%) were associated to a high cost of treatment under the BPS perspective, 1,376,335 (8.2%) were related to clinic and other outpatient costs. Outpatient laboratory exams accounted for only a small fraction (R$ 176,545, 1%) of DMC, and only one patient had a record of radiotherapy (<1% of DMC). A total of 326 hospitalizations were identified in 79 (48%) patients, with an average cost of R$ 102,450 per hospitalization and R$ 262,051 (16%) related to other outpatient costs.

CONCLUSIONS: Patients with CLL represent a significant economic burden to private payers. Chemotherapy and hospitalization costs account for almost 90% of the total costs.