

eHEALTH INITIATIVE



The Future of Prescription Decision Support: Leveraging
Real-Time Data to Drive Value at the Point of Care
August 24, 2021

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Digital Health Equity Summit

Addressing Inequities & Building a
Modern Healthcare System

November 3rd-4th, 2021



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THANK YOU FOR JOINING US TODAY!



The background of the slide features a blue-tinted image of medical supplies, including a stethoscope and several pills, overlaid with abstract geometric shapes. The main title is centered in the upper half of the slide.

The Future of Prescription Decision Support: Leveraging Real-Time Data to Drive Value at the Point-of-Care

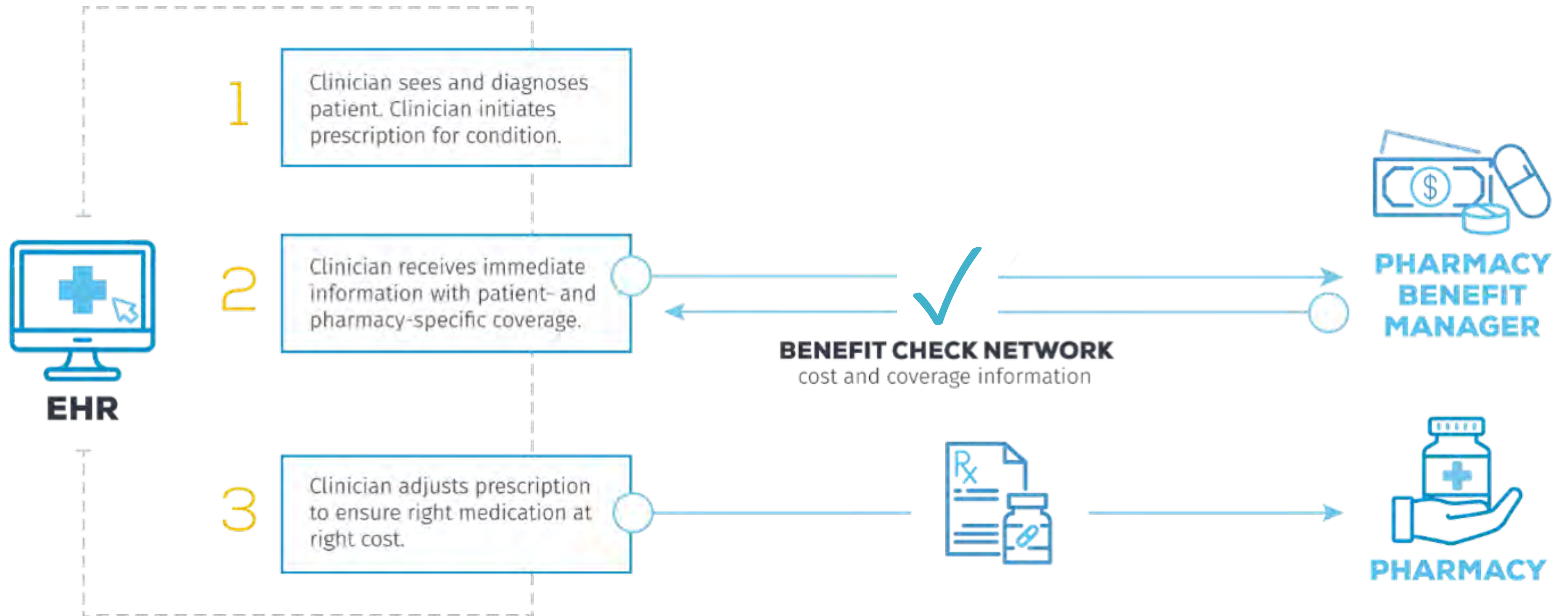
August 24, 2021

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Right Drug. Right Price. Real-Time.

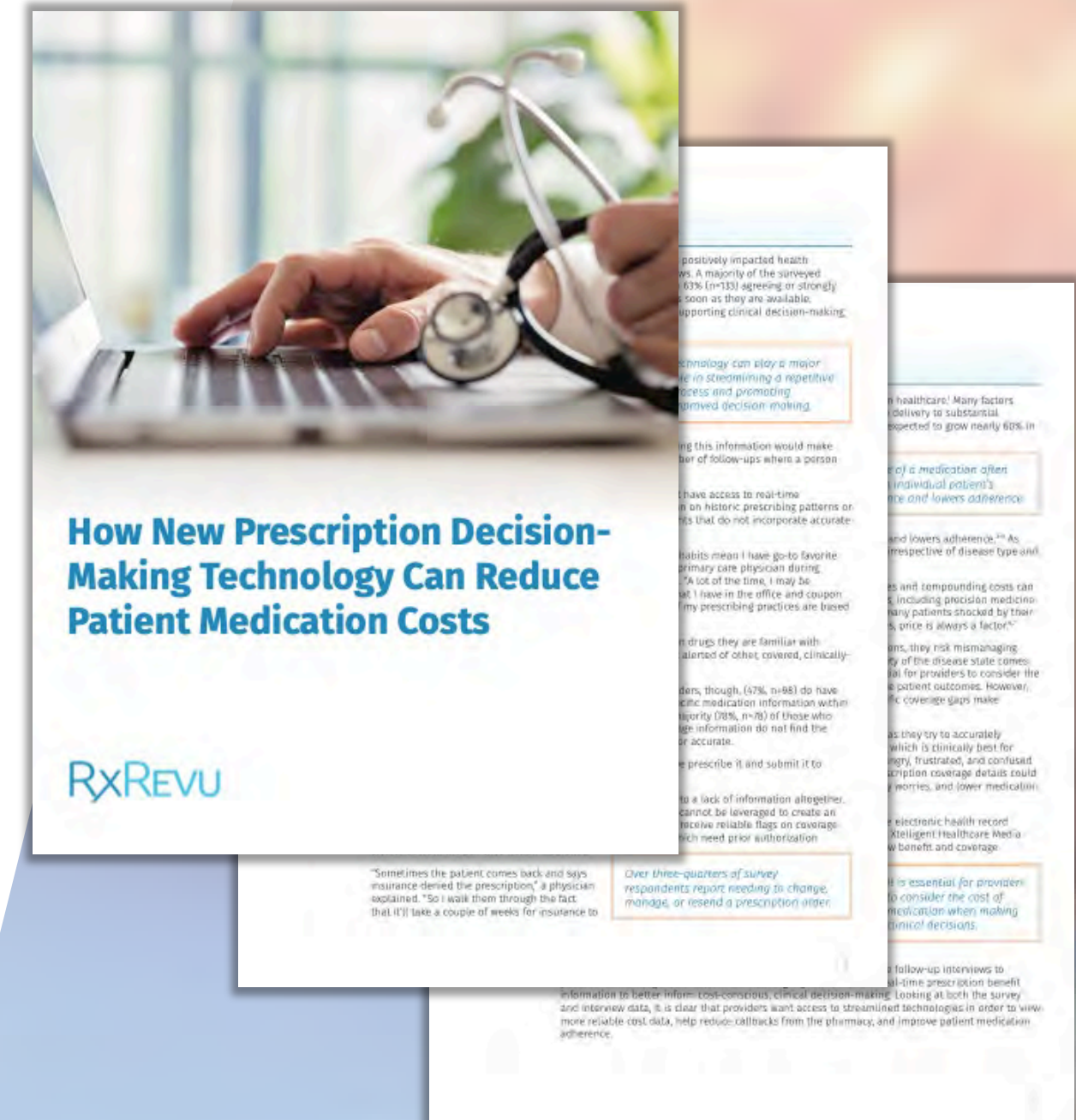
The Current State of **Prescription Decision Support**

REAL-TIME PRESCRIPTION BENEFIT BRINGS PATIENT DATA TO POINT-OF-CARE WORKFLOWS



UNRELIABLE OR MISSING DATA HAS HINDERED ADOPTION

- 77% of physicians say that they've had to **change, manage, or resend a prescription order** once it has been sent to the pharmacy¹
- 78% of providers who have access to coverage information **do not find the information reliable**¹
- 72% of providers **do not discuss medication prices** with their patients¹



Provider Survey
Available for Download

REGULATORY SHIFTS MANDATE PRICE TRANSPARENCY CAPABILITIES

Real-Time Benefit Tool Rules

- By 1/1/21, Part D plans must adopt at least one RTBT that can integrate with at least one ePrescribing system or EHR
- By 1/1/23, Part D plans must provide an *enrollee*-facing RTBT

Hospital Price Transparency Rule

- By 1/1/21, hospitals must publish 300+ shoppable, standard services in a consumer friendly and machine-readable format

Health Insurance Price Transparency Rule

- By 1/1/22, plans must disclose pricing, negotiated rates, and cost-sharing information via standardized, regularly updated, machine-readable files

No Surprises Act

- By 1/1/22, plans and providers can no longer bill patients for more than the in-network cost due under the patients' insurance

CMS Price Transparency Rule is Fast Approaching

PRICE TRANSPARENCY August 03, 2020

By Michelle Trombetta, Director of Product Innovation, Surescripts

In 2019, the Centers for Medicare & Medicaid Services (CMS) issued its [Medicare Advantage and Part D Drug Pricing Final Rule](#) requiring Medicare Part D health plans integrate a real time benefit tool with at least one prescriber's ePrescribing system. The rule also requires that plans send to patients and providers a list of drug alternatives once a month.

HOSPITALS, PAYERS, POLICY

Court upholds new price transparency rules. What's next?

A district court judge ruled in favor of the Department of Health and Human Services' price transparency rule, which would require hospitals to disclose negotiated rates with insurers, among other things. The ruling is a significant victory for the government, but experts shared what it means for the future of price transparency.

Medicare Advantage and Part D Drug Pricing Final Rule (CMS-4180-F)


May 16, 2019 | Legislation, M

OCTOBER 2, 2020

Big Policy Shifts For Medicare On the Horizon

By Karen Blum

TYPES OF PRESCRIPTION DATA AVAILABLE

Formulary & Benefit	Real-Time Prescription Benefit
Multiple steps in the data transfer process	Direct connections to payer/PBM systems
Static data often updated weekly or monthly	Moment-in-time specific data
Plan-level data	Patient-specific data Formulary status, coverage alerts, fulfillment options, medication price, drug alternatives, deductible and accumulator status
Lack of reporting capabilities available	Robust reporting on prescribing behavior
 <div>Eligibility (270/271 Transactions)</div>	

CONFUSION AROUND WHAT REAL-TIME PRESCRIPTION BENEFIT IS

Patient = Type 2 diabetic, currently in the donut hole phase of coverage

Drug prescribed = Trulicity 0.75 MG/0.5 mL PEN

Price range = \$19 to \$873 in patient out-of-pocket costs

Benefit Check Process	Information Displayed at the Point-of-Care
Real-Time Prescription Benefit	\$348
	Alternatives Displayed
Formulary & Benefit Data	Tier 3 Drug – \$\$\$ / 😊 / ✓
	No Alternatives Displayed

Driving **Value** with Real-Time Prescription Benefit

BEST PRACTICES FOR IMPLEMENTATION AND SUCCESS

Empower Providers with Trustworthy Data to Reduce Point-of-Care Confusion



Actionable



Accurate

- Remove inaccurate cost and coverage information from ePrescribing workflow to establish RTPB trust
 - Formulary & Benefit
 - Historic Claims-Based Pricing
- Provide meaningful, clinically-viable medication and pharmacy alternatives
- Normalize data and display information consistently, for every patient
 - Multiple connection availability
 - Allow common provider inputs for pricing
 - NDC and PBM code translations for clarity and billing
 - Quantity translations for pricing

CASE STUDY: MEDIUM-SIZED HEALTH SYSTEM, JAN-JULY 2021
DRIVING MEANINGFUL BEHAVIOR CHANGE WITH RTPB

21%

**Physicians Made
a Switch to a Lower-
Cost Med**

\$110k

**Actual Patient
Savings**

22%

**Coverage Restriction
Avoidance**


'Prior Authorization' alert resulted in a behavior change 8% of the time

50+ hours of prior authorization avoided

'Refill too soon' alert resulted in order suspension 52% of the time

REAL-LIFE EXAMPLES OF THE PATIENT/PROVIDER EXPERIENCE


Chronic Brand Med: Prior Auth Avoidance Opportunity

Patient Out-of-Pocket Cost Estimate	
 Prescriptions	
Pending Prescription	
<input type="radio"/> Januvia 50 mg tablet	\$250
90 tablets, 90 days	\$2.78/day
Prior Authorization Required	
Payer-Suggested Alternatives	
<input checked="" type="radio"/> Tradjenta 5 mg tablet	\$125
90 tablets, 90 days	\$1.39/day
<input type="radio"/> Nesina 12.5 mg tablet	\$125
90 tablets, 90 days	\$1.39/day
<input type="radio"/> Onglyza 5 mg tablet	\$125
90 tablets, 90 days	\$1.39/day
Total Cost: \$125	

Patient savings by switching
to covered drug = **\$125**

Time savings by avoiding
prior authorization = **25+ mins**


Acute Generic Med: One-Time Saving Opportunity

Patient Out-of-Pocket Cost Estimate	
 Prescriptions	
Pending Prescription	
<input type="radio"/> etodolac 400 mg tablet	\$57.38
Preferred Pharmacy #5334, 60 tablets, 30 days	\$1.91/day
Payer-Suggested Alternatives	
<input checked="" type="radio"/> etodolac 400 mg tablet	\$41.90
Health System Pharmacy, 60 tablets, 30 days	\$1.40/day
<input type="radio"/> ibuprofen 800 mg tablet	\$8.60
Preferred Pharmacy #5334, 90 tablets, 30 days	\$0.29/day
Total Cost: \$41.90	

Patient savings by switching
location = **\$15.48**

Increased convenience by
switching to an in-house
pharmacy option

Chronic Brand Med: Recurring Savings Opportunity

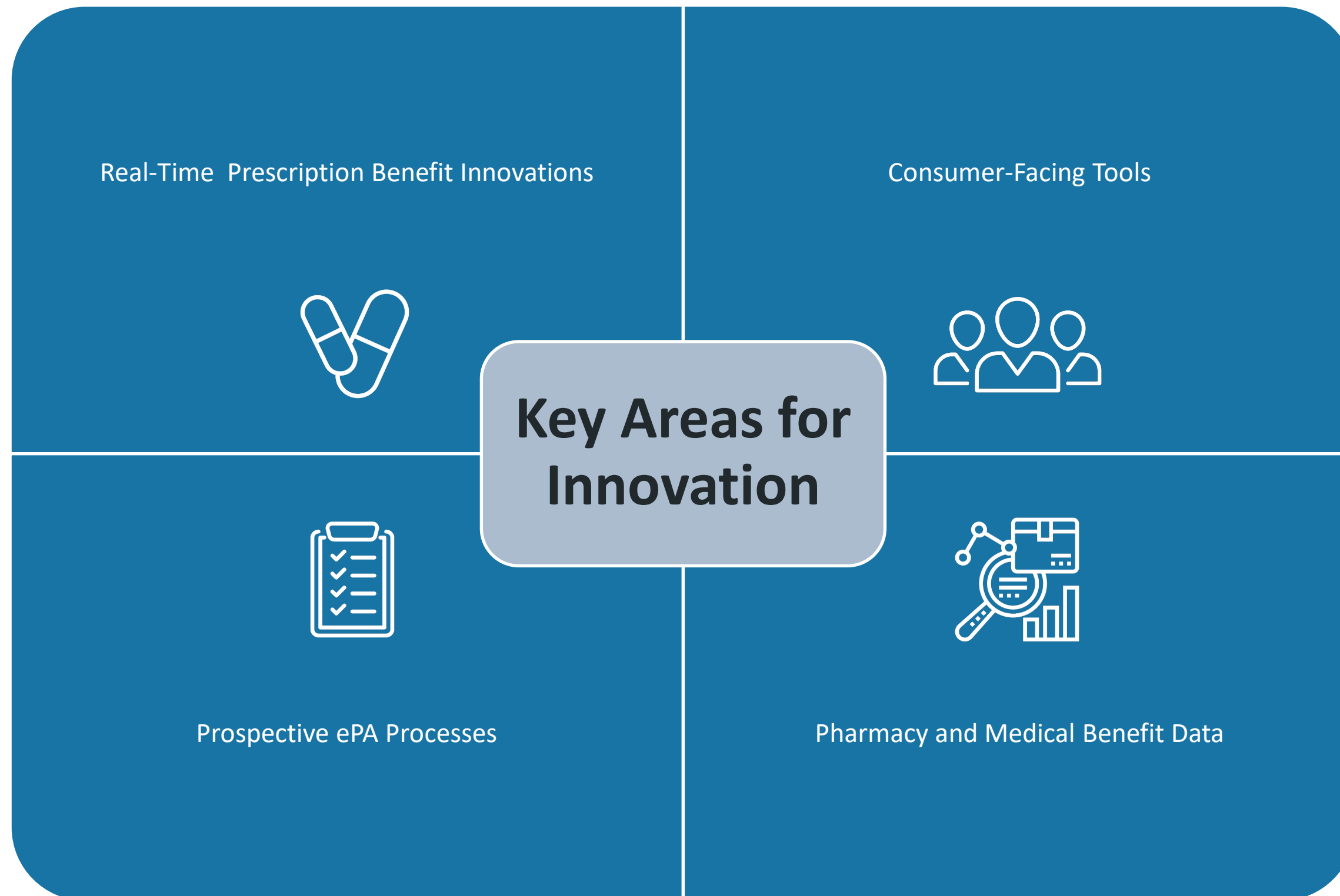
Patient Out-of-Pocket Cost Estimate	
 Prescriptions	
Pending Prescription	
<input type="radio"/> Flovent HFA 44 mcg/actuation	\$145
1 inhaler, 30 days	\$4.85/day
Payer-Suggested Alternatives	
<input type="radio"/> Asmanex HFA 100 mcg/actuation	\$15
1 inhaler, 30 days	\$0.50/day
<input checked="" type="radio"/> Qvar Redihaler HFA 40 mcg/actuation	\$15
1 inhaler, 30 days	\$0.50/day
Total Cost: \$15	

One-time patient
savings: **\$130.37**

Annualized patient
savings: **\$1,564.44**

The Future of **Prescription Decision Support**

WHAT'S NEXT FOR PRESCRIPTION DECISION SUPPORT?





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Questions and Discussion

Please submit your questions via the panel on the webinar platform.

THANK YOU FOR JOINING.

Please fill out the post-webinar survey.
