Assessing & Overcoming Barriers to Real-time Benefit Check Adoption in the Real World

Richard Jennejahn
Director, Rx Innovation Programs
Excellus BCBS, Pharmacy Solutions

Michael Burger
Sr. Consultant
Point-of-Care Partners

Discussion Topics

What is Real-Time-Benefit Check (RTBC)

Marketplace Perception of RTBC

Spotlight on Health Plan Support of RTBC

Provider Engagement Initiative

Barriers and Strategies to Overcome

Real-Time-Benefit Check = RTBC

Learning Objectives

At the completion of this program, participants should be able to:

1. List at least one key barrier to real-time benefit check adoption.
2. Name at least one internal barrier payers face when offering real-time benefit check tools to providers.
3. Recognize effective value propositions for RTBC to providers.
4. Describe provider educational approaches for that positively impacted real-time benefit check tool adoption.

Pre-Test

LQ1: Identify a key barrier to real-time benefit check adoption

a) Providers are unaware that RTBC data is available in the EHR

b) Quality and quantity of the RTBC data is equal for all PBMs

c) It's easy to get a decision to activate new EHR functionality made at a health system

d) It's quick to get a new IT project done at a health system

LQ2: Identify an internal barrier that a payer might face when offering real-time-benefit check tools to providers

a) Lack of visibility into EHR RTBC functionality

b) Multiple EHR platforms are used across the plan's service area

c) Detailed data is readily available regarding the impact of real-time-benefit check information at the point-of-care

d) Reporting is limited to aggregated transaction counts

LQ3: Identify one provider value proposition for real-time benefit check adoption

a) Increase paperwork and administrative burden on staff

b) Increase the number of calls from pharmacies

c) Reduce the speed-to-therapy (get patients on meds quicker)

d) Increase friction between provider and payer

LQ4: Identify a provider educational approach that can positively impact adoption of real-time-benefit check

a) Spread myths about bad formulary information in the EHR

b) Send providers who don't use real-time benefit check more prior authorization requests

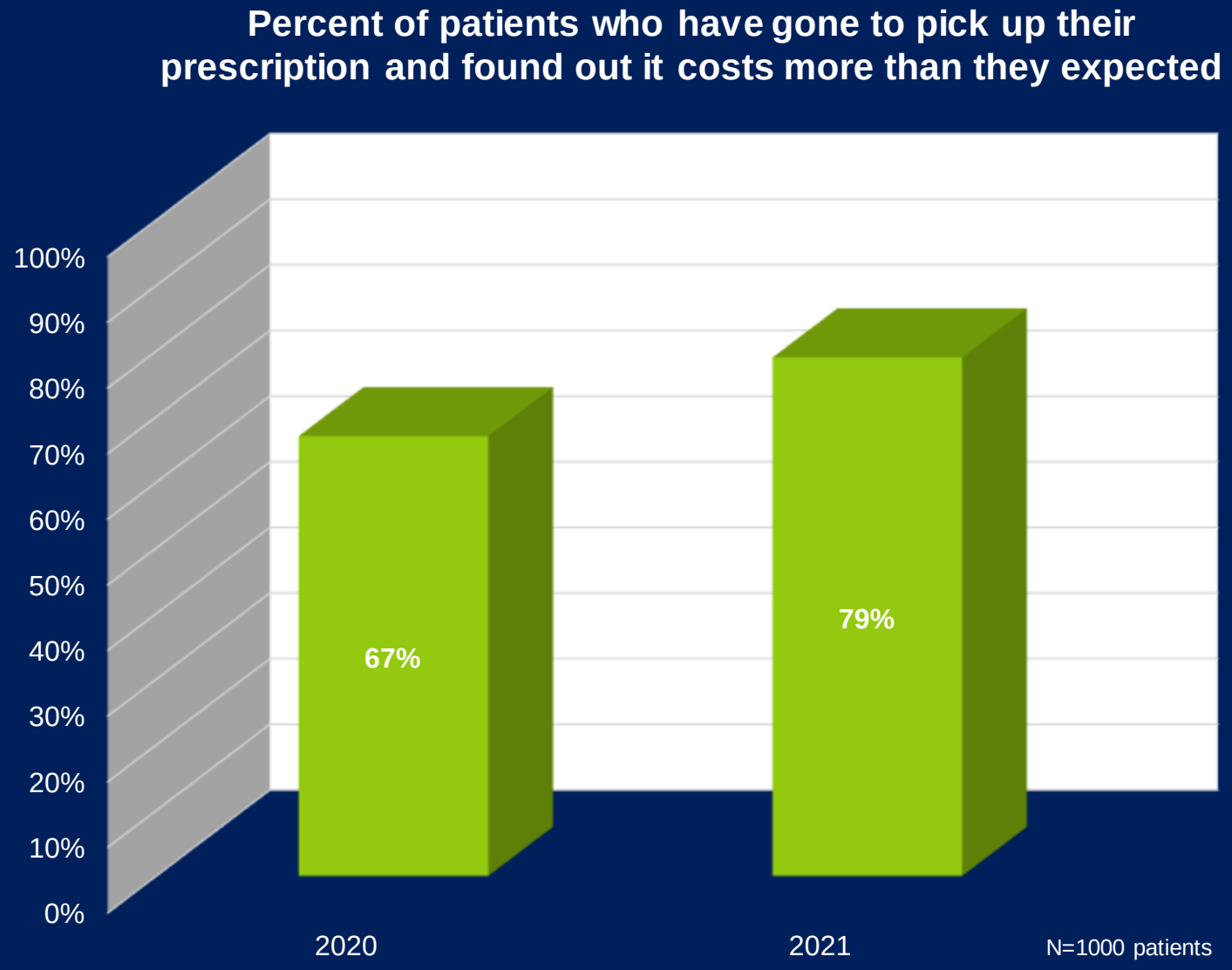
c) Advocate the benefits of real-time benefit check & help to mitigate technical uncertainty and challenges

d) Don't talk about RTBC and hope that adoption increases

RTBC is Important!

Medication Affordability

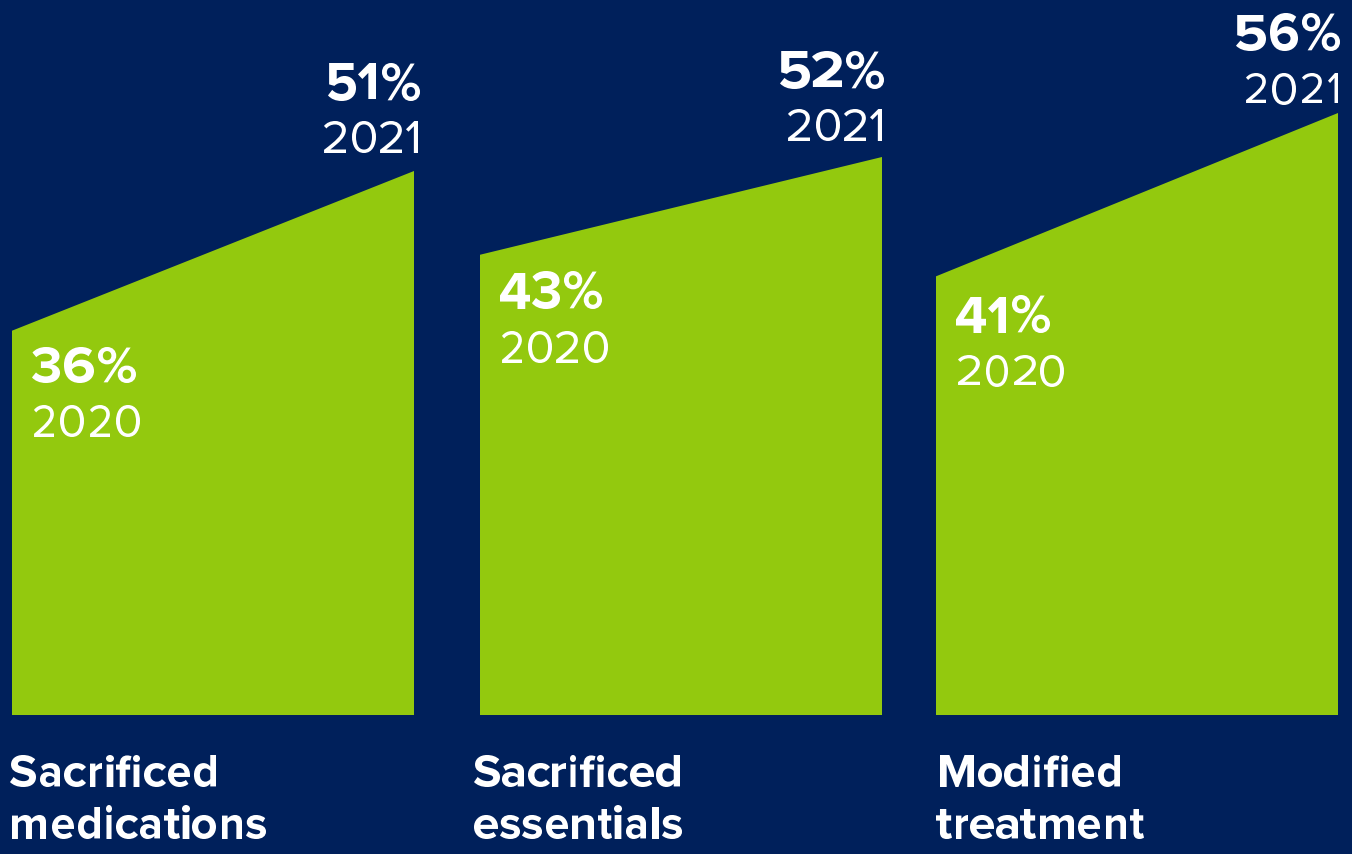
Nearly 80% of patients surveyed said they went to pick up their prescription and found out it cost more than they expected.



Source: CoverMyMeds, 2022 Medication Access Report

Affordability Impact on Adherence

- In 2021, more patients made sacrifices related to their medications and essential items
- Many patients made difficult decisions that may have affected their health and safety



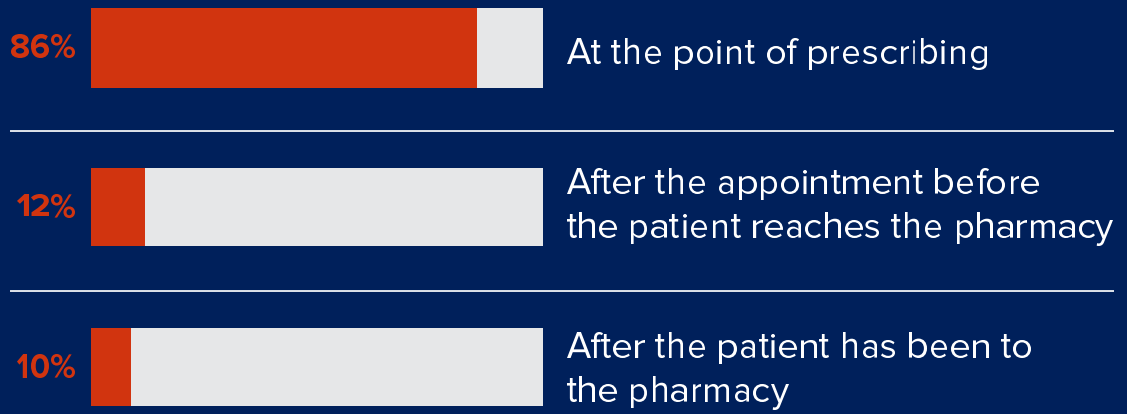
Source: CoverMyMeds, 2022 Medication Access Report

RTBC Encourages Consideration of Medication Cost

Having real-time access to prescription benefit and cost information enables providers to make informed decisions about their prescription choice, including if their patient can afford it.

Why providers bring up affordability with patients

When providers discuss affordability with patients



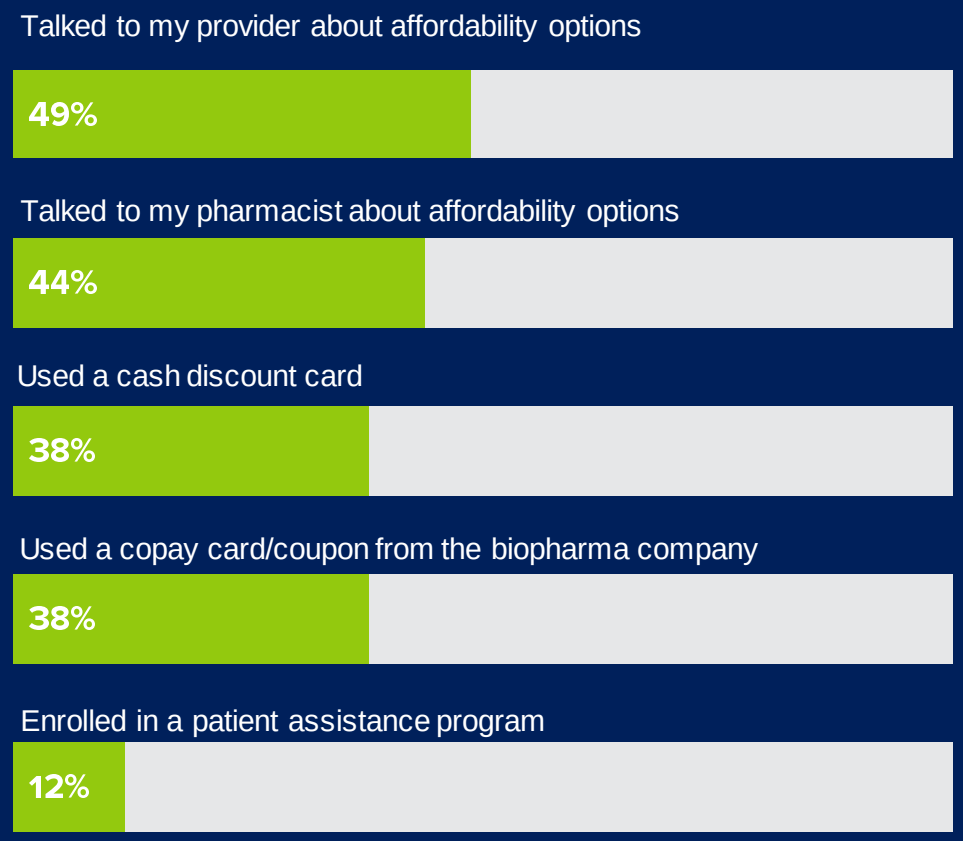
n = 1,000 I respondents could select all that applied

Most providers are willing to talk about medication affordability but not all bring it up with every patient

Source: CoverMyMeds, 2022 Medication Access Report

Patients Are Looking for Help

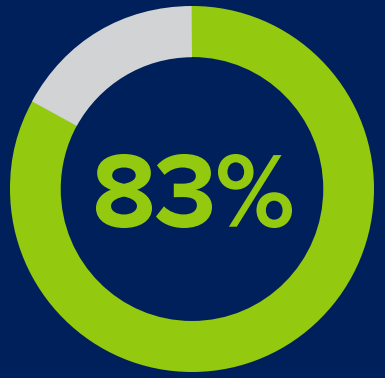
Patients are seeking out financial assistance so that they can afford their medications



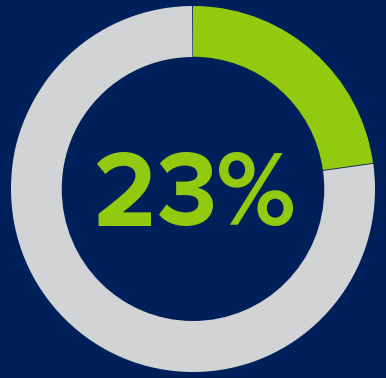
n = 1,000 Respondents could select multiple reasons

Source: CoverMyMeds, 2022 Medication Access Report

Perceived Access to Coverage Info



of providers have access to medication-specific information within their EHR



of providers can surface medication cash price information within their EHR

An Industry-Wide Challenge for Providers, Payers and Patients

Source: Point-of-Care Partners Real-Time Pharmacy Benefit Check: The Payer Value Proposition Report

RTBC: Provider & Patient Point of View

Patient-provider trust is a crucial element that can compound the effects of existing medication access barriers, yet more than **40% of providers said they didn't have enough time to discuss medications with their patients.**

Source: CoverMyMeds, 2022 Medication Access Report

Agreement Likert Scale

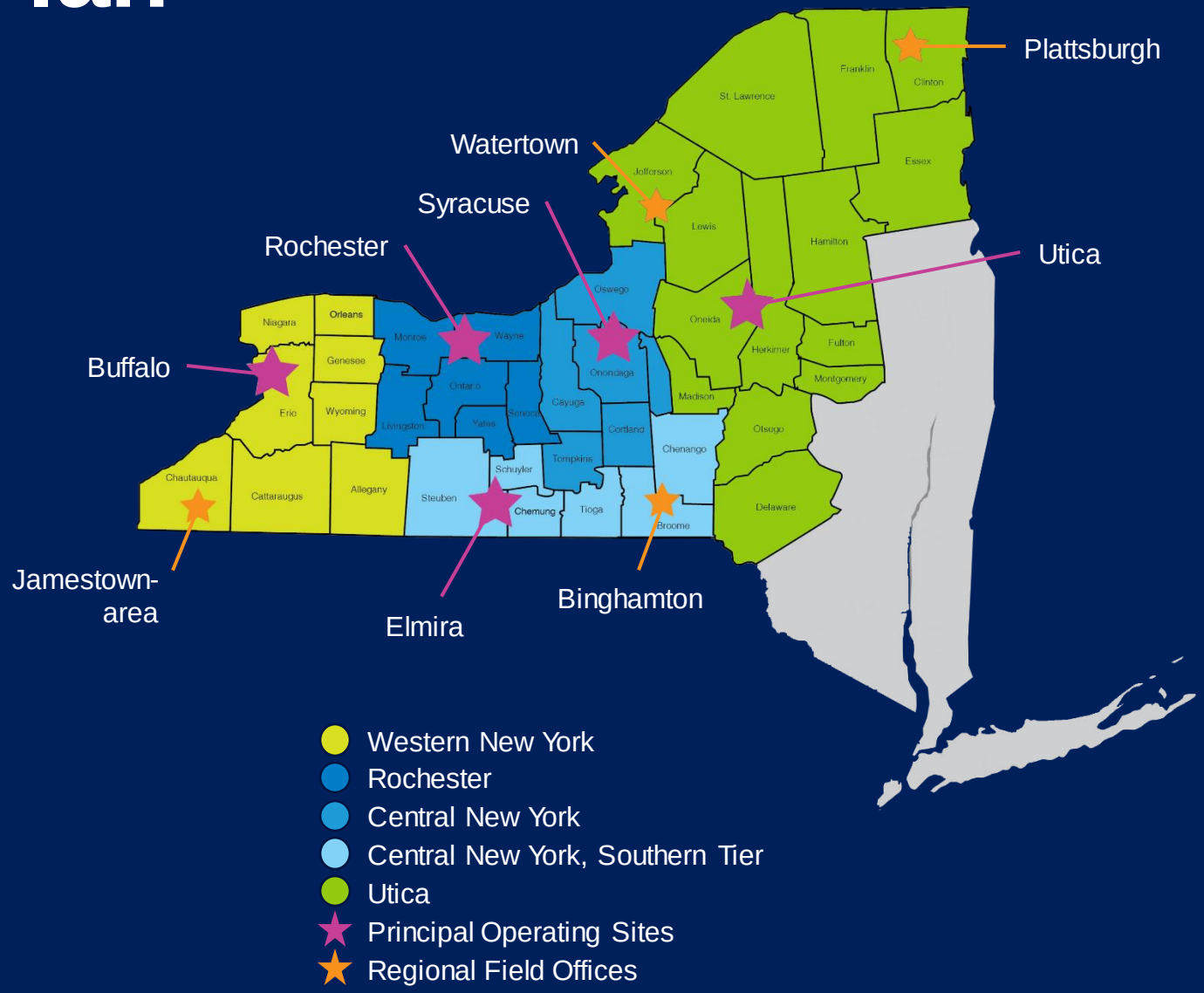
In your experience, providers frequently engage with patients regarding prescription cost.

Excellus Health Plan

Excellus Health Plan

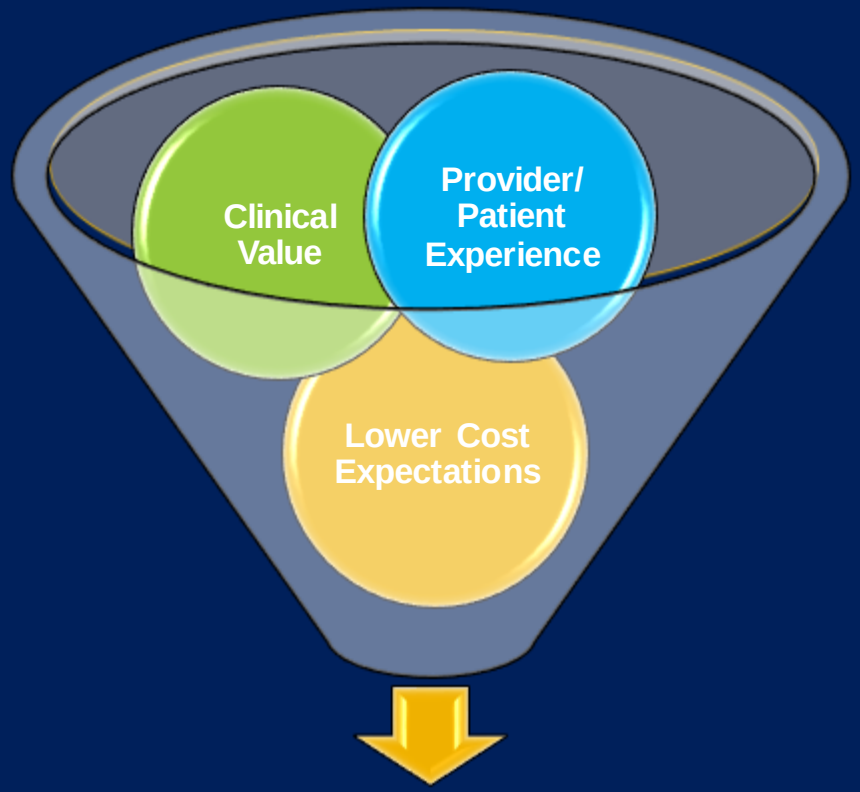
- 39 counties – Upstate New York
- 1.4M covered pharmacy benefit members
  - Medicare
  - Medicaid
  - Exchange
  - Commercial/Employer Group
- 70K – 100K Rx prescriptions filled daily
- > 37K provider network

Mission: To help people in our communities live healthier and more secure lives through access to high-quality, affordable health care.



Why RTBC?

- Clinical value of e-prescribing workflow
- Provider satisfaction
- Patient/member experience
- Stakeholder expectations for lower costs
- Regulatory landscape



Affordable Access to Care

The promise and potential of 'interoperability'...

Excellus RTBC Timeline

What happened?

2019	2020	2021/2022
- Initial Capability - Q4 Soft Launch	- Limited Reporting - Provider Complaints - Pandemic	- Focused Effort - Multi-stakeholder Assessment

What next?

2019	2020	2021/2022
Monitor?	Gaps?	Plan?

Interactive Question

AMCP

Word Cloud

What word describes the feedback providers articulate about RTBC?

**Please note the word cloud will form as the attendees respond.

Provider Feedback

Complexity

- Multiple systems, networks, portals and apps
- Slow response times & data lags

Knowledge

- Prescriber awareness of tools and how to use them
- Office staff training needs - time and resources

Quality of Information

- Alerts (fatigue) – messages not actionable
- Accuracy of formulary information

Health Plan Limitations

Complexity

- Multiple EHR platforms in use across health plan service area

Knowledge

- Limited visibility into EHR RTBC functionality

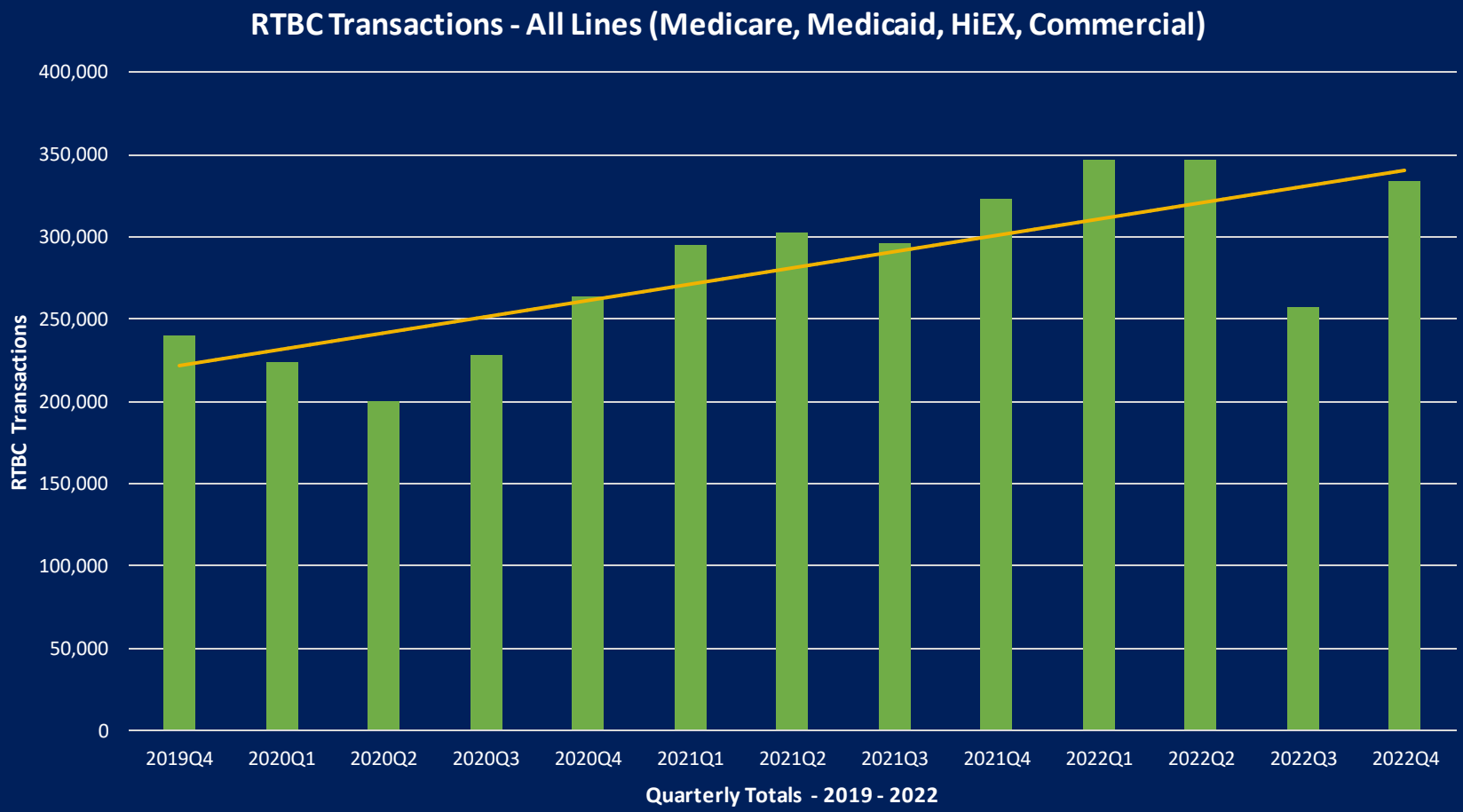
Quality of Information

- Reporting limited to aggregated transaction counts

Our Situation

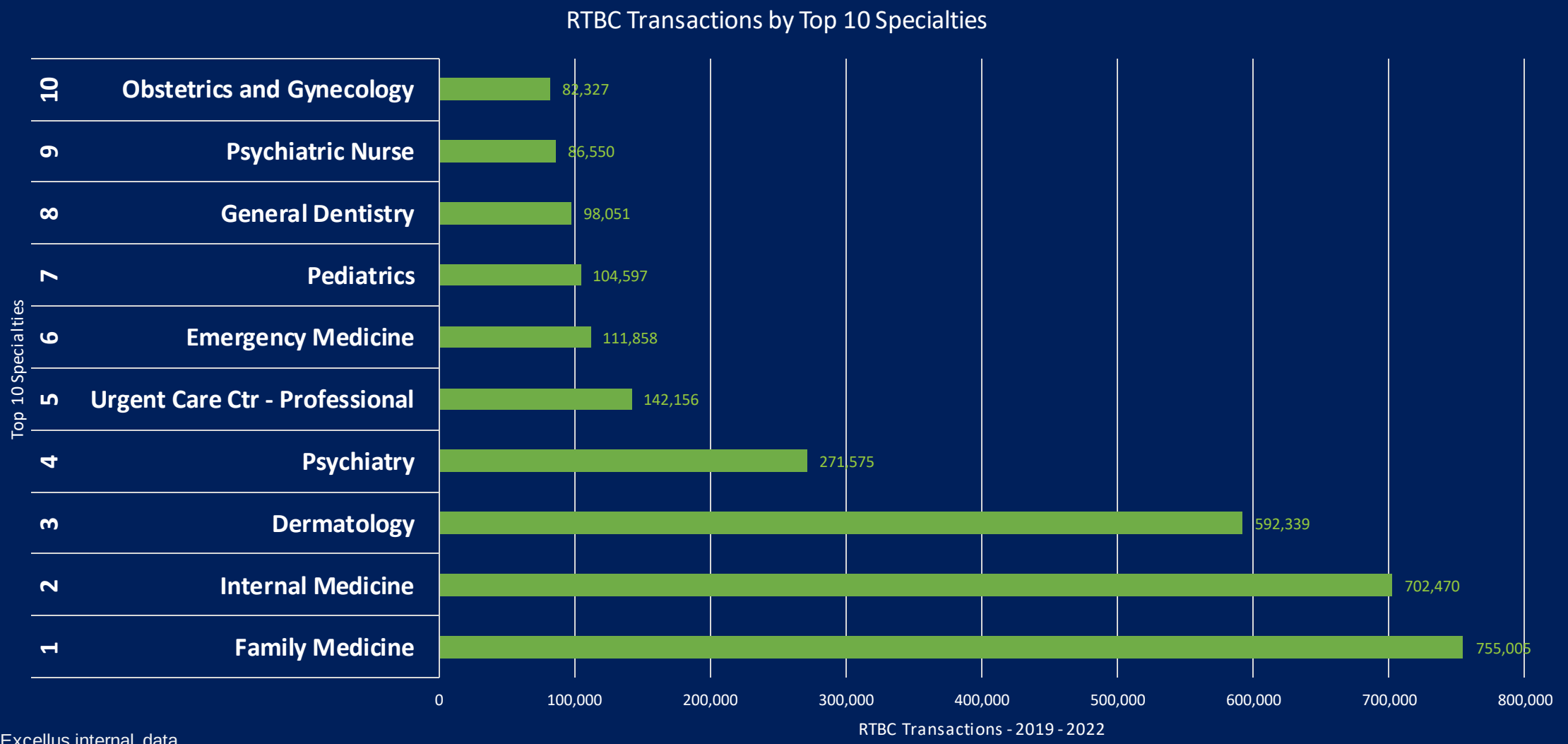
Excellus RTBC Landscape

- 37,342 in-network providers (39 counties)
- 8,725 of in-network providers with at least 1 RTBC transaction
- Roughly 23% of network using RTBC
- Average 44 RTBC transactions per month



Source: Excellus internal data

Top 10 Specialties



Source: Excellus internal data

Excellus Data

Comparison of Allowed $/Claim to RTBC Transactions of Six High Volume Prescribers

Source: Excellus internal data

Average Patient Savings by Therapeutic Category

Average Savings Per Prescription When a Lower-Cost Alternative Is Chosen

	2021
Anti-Depressants	**$51**
Anti-Hypertensives	**$27**
Anti-Cholesterol	**$32**
Diabetic Therapy	**$116**
Peptic-Ulcer Therapy	**$26**

Ranked by Prescription Volume

Source: Surescripts National Progress Report, 2021

Average Patient Savings by Provider Specialty

Average Savings Per Prescription When a Lower-Cost Alternative Is Chosen

2021	
Internal Medicine	**$25**
Family Practice	**$22**
Family Practice	**$81**
Cardiology	**$29**
Ophthalmology	**$40**

Ranked by Prescription Volume

Source: Surescripts National Progress Report, 2020 and 2021

The Challenge

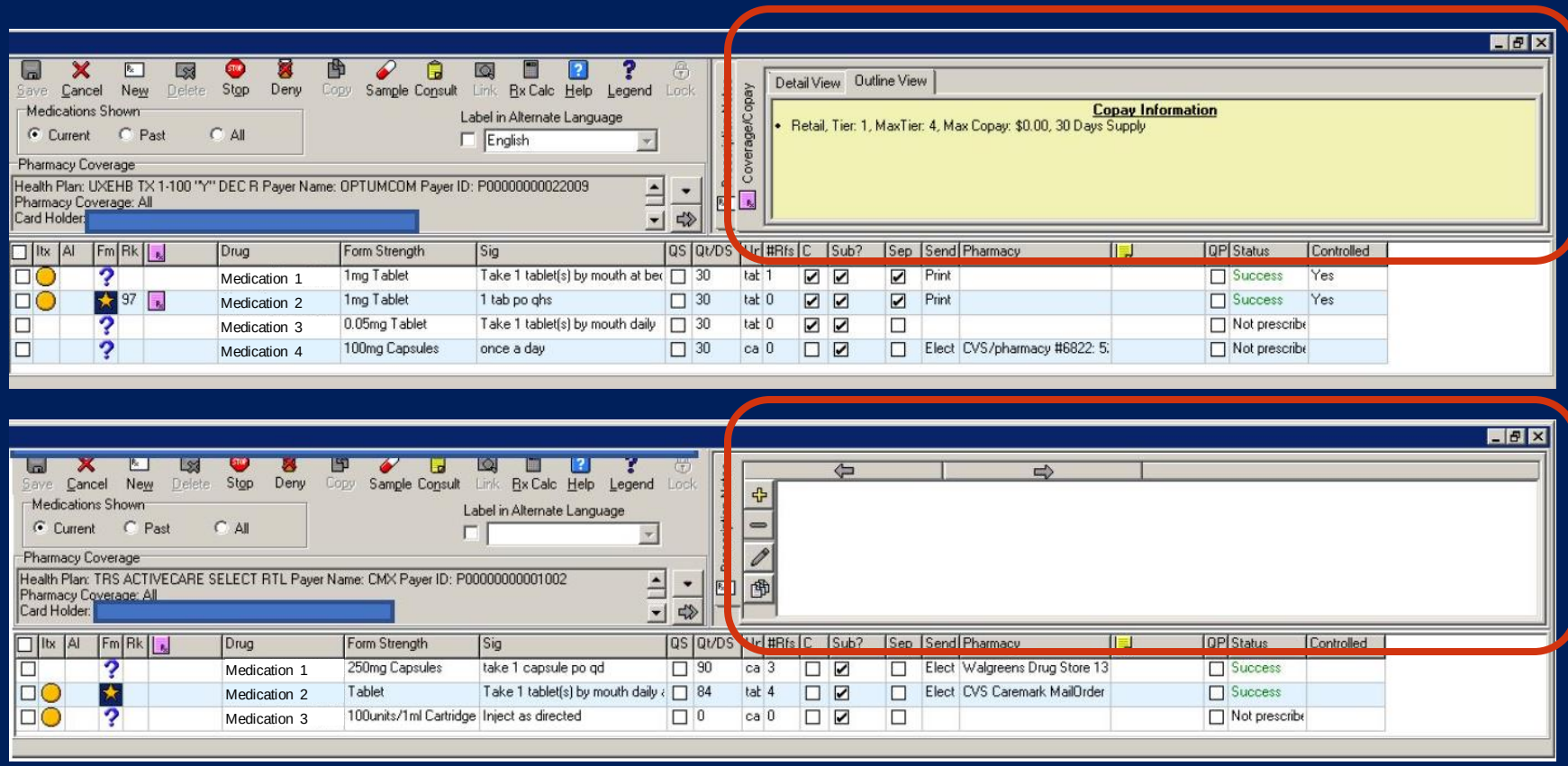
Formulary Data in the EHR – The Traditional Formulary & Benefit (F&B) File

Providers have not been enthusiastic about the F&B-based formulary data available in the EHR.

- Information is at the plan level
  - Not group or patient-specific
- Quantity and quality of the data varies widely from one PBM to the next
- The data can be outdated
- Sometimes the data are incorrect

Questions About Data Integrity Have Led to Mistrust of the Traditional F&B Data

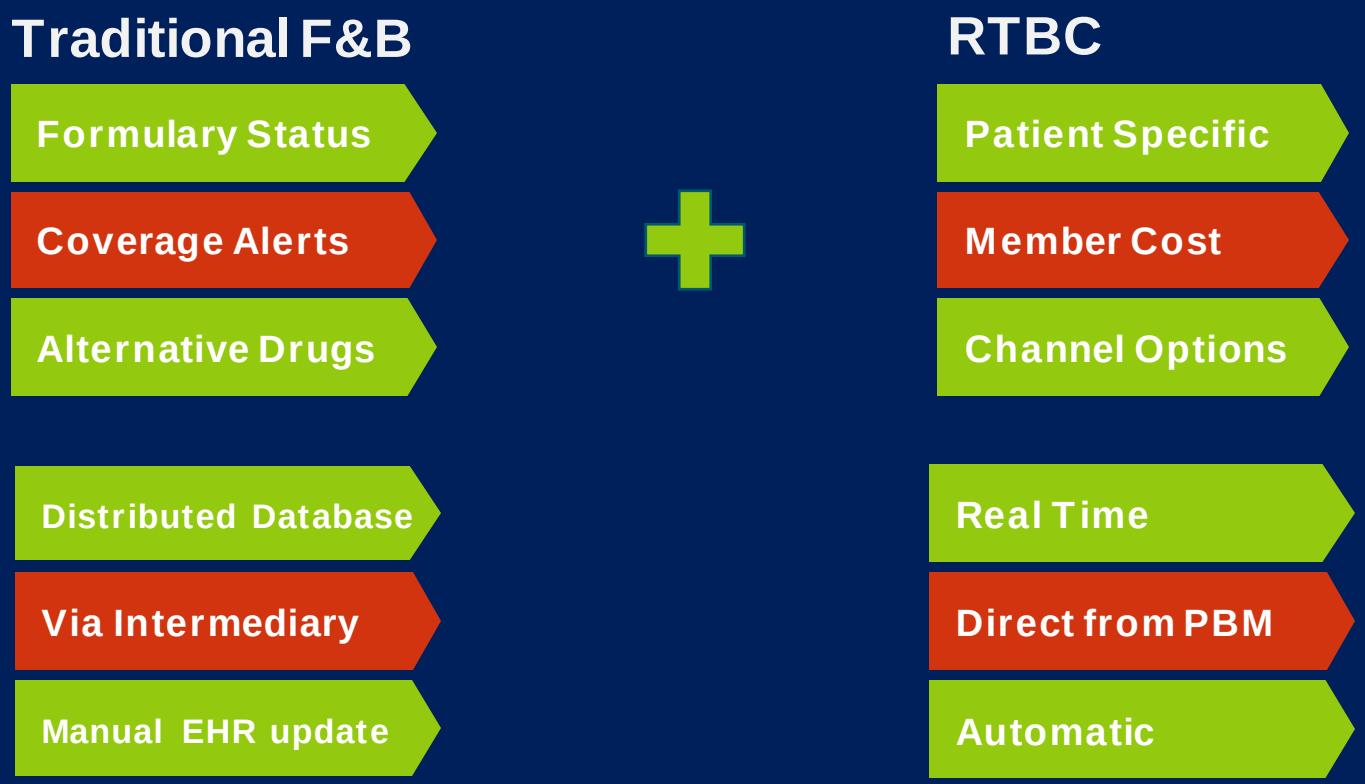
Are there really no plan restrictions, or is that data simply missing?



The patient arrives at the pharmacy counter and learns that the drug has prior authorization

Result: Frustrated providers turn off formulary validation or don't review formulary data while ePrescribing

Traditional F&B Is Enhanced by RTBC



EHR vendors have made RTBC integration seamless.

Practices may not realize that RTBC information is in the EHR.

Our Solution

Provider Engagement Program

Goal:

Satisfy In-Network provider desire for decision support tools, available within their workflow

- Social Determinants of Health (SDOH)
- Prior Authorization (PA)
- Real Time Prescription Benefit Check (RTBC)
- Quality Measures (QM)

Excellus' Motivation

Strengthen Excellus Relationship With Provider Network

Increase Satisfaction

Patients

Providers

Improve Outcomes

Increase fill rate

Speed to therapy

Manage Costs

Excellus Tactical Approach

- Engage health systems and practices who are not using RTBC
  - Provider Relations outreach
- Training curriculum for Provider Relations team
- Reference material for top EHRs
  - How to activate RTBC
  - How RTBC looks in the EHR
- Resources
  - Help Desk to mitigate both technical and content questions

Actions:

- Dispel the myths
- Advocate the benefits
- Help to mitigate technical uncertainty and challenges
- Feedback loop via reporting and analytics

EHR Reference

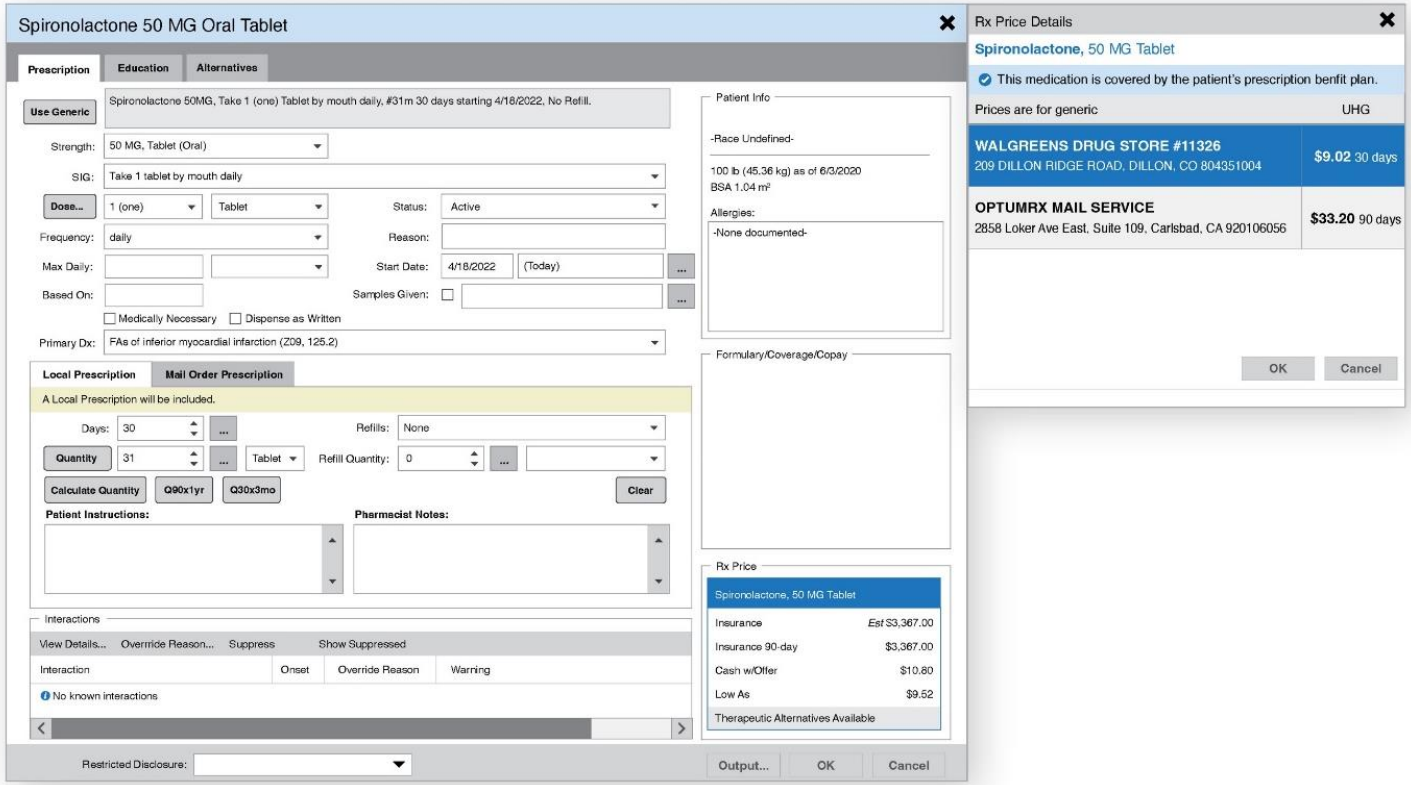
Allscripts Professional (cont.)

SECTION 2

RTBC Integration in the Prescribing Workflow

Once the medication quantity and SIG are entered and the pharmacy has been selected, the Allscripts Rx Price feature displays the RTBC information. Up to five therapeutic alternatives and their prices are provided. With a quantity entered, the Rx Price supplies RTBC pricing details.

Therapeutic Alternatives may also be displayed.



Example of the medication details

EHR Reference

Allscripts Professional (cont.)

SECTION 3
Activating RTBC

Activation of RTBC is simple for providers who currently ePrescribe and are enrolled in eAuth.

CATEGORY	YES/NO	NOTES
Software/License/Enrollment Prerequisites	Yes	Provider must be enrolled for eAuth and Surescripts with standard ePrescribing credentials
Separate license for RTBC	No	
Separate cost for RTBC	No	
Separate RTBC Enrollment	No	Once Allscripts implements the eAuth solution, caregivers who currently use ePrescribe are automatically granted eAuth service level
Software Setup/Configuration	Yes	Each eAuth-enabled prescriber must have read/write access for Prior Authorization requests
Who to Contact		Allscripts Inside Sales (formerly Veradigm). Implementation done by Allscripts

Messaging

A successful engagement plan with practices involves understanding the pain points and offering solutions that complement workflow and reduce clinical and/or administrative burden. In other words, ***"What's In It For Me"***

Providers

- Can make the best treatment choice for patients after weighing all factors
- Improve patient trust, rapport & satisfaction
- Speed to therapy
- Reduce risk of abandonment
- Increase patient adherence
- Decrease paperwork and administrative burden for staff
- Reduce the number of calls from pharmacies and/or patients
- Encourage payer partnership

Patients

- Speed to therapy by reducing downstream delays for prior authorization or physician clarifications
- Fully informed of implications of treatment choice including possible alternatives
- Understand financial and payer requirements, increasing adherence
- Decrease pharmacy-counter surprises
- Illuminate pharmacy options that balance cost and convenience
- Increased satisfaction with payer and provider

Scale of 1 to 10

Would a tool like an EHR reference be beneficial in your effort to encourage adoption of real-time-benefit check?
1 – not very helpful – 10 very helpful

1 - 10

Lesson Learned and What's Next

Observations to Date

Provider Perceptions Are Hard to Change

Perception Is Often Focused on the Lowest Common Denominator

Not Us!

Some EHR Workflows Are Not Optimized for RTBC

Decision-making At Large Health Systems Moves Slowly

IT's "To Do" List Is Long

When Providers Are Bought-in They Love It

What's Next?

Persistent Follow-up After Initial Conversations

Expand Discussions to a Wider Number of Practices

FOCUSED ANALYSIS TO DETERMINE:

Provider satisfaction for providers using RTBC or not using RTBC

Patient satisfaction where primary provider uses RTBC or does not use RTBC

Detailed financial analysis of Rx cost before/after RTBC adoption

Post-Test

LQ1: Identify a key barrier to real-time benefit check adoption

a) Providers are unaware that RTBC data is available in the EHR

b) Quality and quantity of the RTBC data is equal for all PBMs

c) It's easy to get a decision to activate new EHR functionality made at a health system

d) It's quick to get a new IT project done at a health system

LQ2: Identify an internal barrier that a payer might face when offering real-time-benefit check tools to providers

a) Lack of visibility into EHR RTBC functionality

b) Every provider across the plan's service area uses the same EHR

c) Detailed data is readily available regarding the impact of real-time-benefit check information at the point-of-care

LQ3: Identify one provider value proposition for real-time benefit check adoption

a) Increase paperwork and administrative burden on staff

b) Increase the number of calls from pharmacies

c) Reduce the speed-to-therapy (get patients on meds quicker)

d) Increase friction between provider and payer

LQ4: Identify provider educational approach that can positively impact adoption of real-time-benefit check

a) Spread myths about bad formulary information in the EHR

b) Send providers who don't use real-time benefit check more prior authorization requests

c) Advocate the benefits of real-time benefit check & help to mitigate technical uncertainty and challenges

d) Don't talk about RTBC and hope that adoption increases

Disclaimer

All Faculty in this education session have obtained the appropriate permission to use copyright materials.

Sources of all images are provided in citations.