



OBJECTIVES

- Understand what is medication assistance
- Discuss multi-disciplinary approach to optimizing a medication assistance program
- Review the advantages and disadvantages of insourcing/outsourcing services
- Describe medication assistance best practices



BAPTIST HEALTH SOUTH FLORIDA (BHSF)

- Non for profit organization
- 10 hospital system
 - Miami Cardiac and Vascular
 Institute
 - Miami Cancer Institute
 - 96 providers
 - 120 advanced practice providers
- In house specialty pharmacy
- Pharmacy lead medication assistance team





MEDICATION ASSISTANCE

- Designed to increase patient access to medications and reduce out-ofpocket expense
- Includes various components:
 - Manufacturer assistance
 - Copay assistance programs
 - Patient assistance programs
- Qualification depends on various factors



COPAY ASSISTANCE

- Includes copay, co-insurance and deductible support
- Copay cards
 - Pharmaceutical companies may cover a portion or all of the patient's out of pocket expense
 - Certain payers excluded
- Foundations and Grants
 - Patient Access Network Foundation (PAN)
 - HealthWell
 - Leukemia Lymphoma Society (LLS)



PATIENT ASSISTANCE PROGRAMS (PAP)

- Run and managed by pharmaceutical companies
- Provides free medications to patients based of certain criteria
- Available for oral and infused medications
- Retrospective vs. prospective programs
- Impacts both the patient and health system



DIFFERENT PAP PROGRAMS

Retrospective Programs:

- Medications dispensed prior to replacement
- **Examples**: rituximab, alteplase, pegfilgrastim, micafungin

Prospective Programs

- Medications to be approved for replacement and received in pharmacy before dispense
- **Examples**: tigecycline, filgastrim, blinatumomab, leuprolide, nivolumab

Live Signature Required

- Medications that require a live signature for approval (can be retrospective or prospective)
- **Examples**: pembrolizumab, aprepitant, pegfilgrastim, blinatumomab



WHO QUALIFIES?

- Patients may qualify based on various circumstances and case by case basis
 - o Charity
 - Self Pay
 - \circ Low income
 - o Indigent
 - o Patient setting

- o Insurance denials
- \circ Underinsured
- o Citizenship
- o Diagnosis
- Types of info needed for approval:
 - Financial and insurance information
 - o Diagnosis
 - Insurance denial (if applicable/appropriate)



APPLICATION REQUIREMENTS

- Patients demographics
- US resident / citizen status
- Number of household members
- Current annual gross household income
- Patient signature*
 - If patient representative signing, Advance Directive form in need to be submitted with application

*Some programs will allow to use health system patient consent forms in lieu of patient signature





AUTHORIZATION FORMS AND SUPPORT

- Providers office information
- Health care provider NPI #
- Practice/Facility name
- Practice DEA #, NPI #
- Provider signature*

*Some programs will health systems to use Provider Authorization Form in lieu of provider signature



HEALTH SYSTEM MEDICATION ASSISTANCE PROGRAMS

- Created to help patients navigate medication process
- Both outpatient and inpatient setting
- Multidisciplinary approach needed for success
- Generally part of the pharmacy department staffed with technicians



MEDICATION ASSISTANCE TEAM

- Commonly have pharmacy background
- Decentralized and centralized
- Goal to obtain drug for patient at the lowest possible cost
- Prior authorizations support:
 - Certain medications require approval from a health plan to be covered
 - Restrict access to costly medications
 - Ensures therapy is safe and appropriate for patients
 - Commonly seen with specialty medications



MULTIDISCIPLINARY APPROACH





AUTHORIZATION FORM

- Form completed by provider allowing medication assistance team to submit for patient assistance program or prior authorization on their behalf
- Vetted through health system legal department
- Signed by provider (opt in)
- Increases turn around time

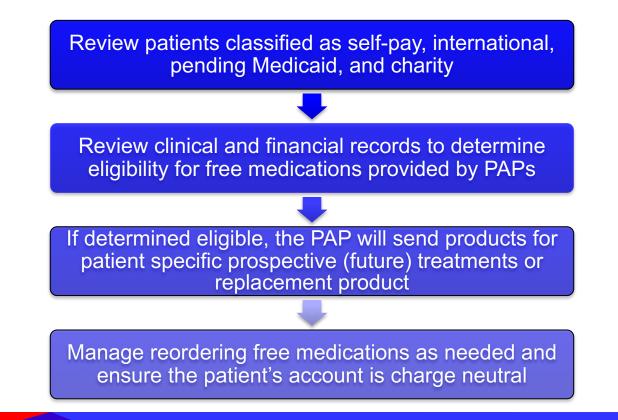


OUTPATIENT PHARMACY WORKFLOW





PAP WORKFLOW





PAP WORKFLOW

Replacement

Patient <u>already</u> treated

Place medication to general inventory

Prospective

Patient <u>will be</u> treated Isolate medication from other products Place medication in a zip lock bag with patient name and FIN# Log in medication for Prospective Treatments

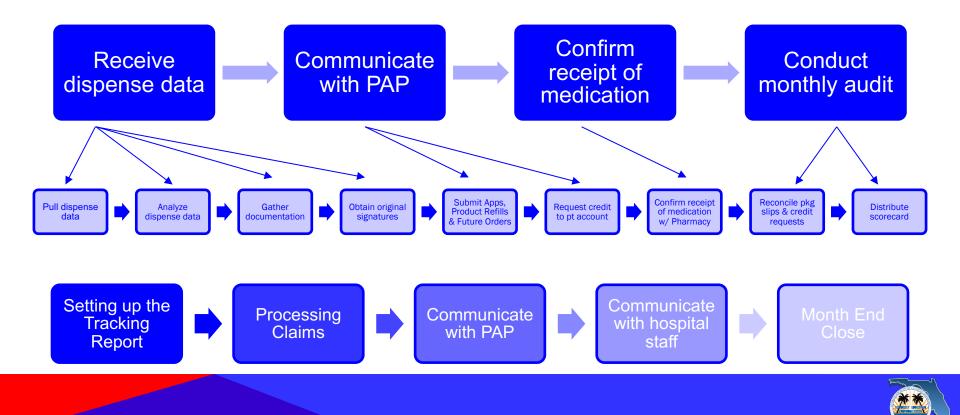


PROSPECTIVE DRUG FORM

Medication Assistance Program			Facility: Miami Cancer Institute		
received for Prospective Treat	ment Patients)				
Patients Name	FIN	Medication	Size	NDC	Qty
Jane Doe	123456	Emend 150mg	1 ml vial	12345-12-4567	6
	received for <u>Prospective Treat</u> Patients Name	received for Prospective Treatment Patients) Patients Name FIN	Patients Name FIN Medication	Patients Name FIN Medication Size	Patients Name FIN Medication Size NDC

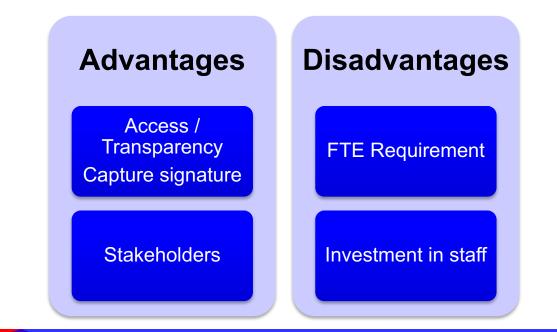


OUTSOURCED VENDOR WORKFLOW



INSOURCE MEDICATION ASSISTANCE PROGRAM

• Several external solutions to assist with medication assistance





MEDICATION ASSISTANCE PROGRAM CHALLENGES

- 1. Medication cost
- 2. High deductible health plans
- 1. Value based care
- 2. Provider consolidation
- 3. Uninsured rates



MEDICATION ASSISTANCE BEST PRACTICES

- Research
 - Understand program requirements relevant to your practice
- Identify stakeholders
- Prepare
 - $\circ~$ Identify criteria to capture patients
- Implement tracking system and technology
- Educate your team and patients
 - Ensure continual feedback and auditing



