

It's Time to Put the “e” in front of Specialty Prescribing, Benefit Verification and Prior Authorization

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POINT-OF-CARE PARTNERS

HIT Strategy & Management Consultants

Agenda

- ⦿ What are specialty medications?
- ⦿ What's the impact?
- ⦿ How are they processed today?
- ⦿ Where are we today?
 - ePA
 - Specialty ePrescribing
 - eBenefits Verification
 - REMS

What are Specialty Medications?



What are specialty medications?

- Usually injectable; ‘large molecule’ biological drugs (‘biotech drugs’)
- ‘High’ Cost (>\$600 per month)
- Require unusual or resource-intensive handling or dispensing processes (i.e. cold/frozen shipping; adjunct supplies like injection aids)
- Require focused clinical management

Top specialty products 2013

U.S. Specialty Market		Sales (\$MN)	Share	Growth
1	Humira*	95,136	100.0%	8.4%
2	Enbrel*	5,550	5.8%	23.9%
3	Remicade*	4,681	4.9%	11.4%
4	Copaxone*	4,098	4.3%	6.8%
5	Neulasta*	3,697	3.9%	5.3%
6	Rituxan*	3,581	3.8%	4.2%
7	Atripla*	3,289	3.5%	4.8%
8	Avastin*	2,857	3.0%	2.1%
9	Epogen*	2,688	2.8%	2.5%
10	Truvada*	2,281	2.4%	5.5%
Top 10		2,236	2.4%	-0.1%
		34,957	36.7%	7.8%

Source: IMS Health, National Sales Perspectives, Jan 2014

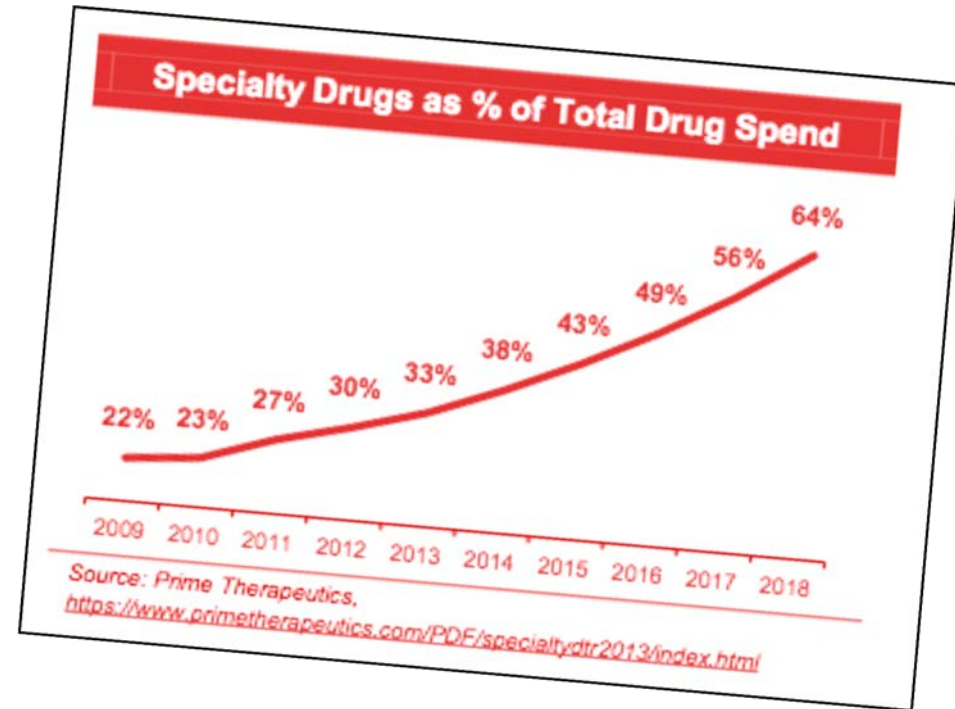
There is no commonly accepted definition.

What's the impact?



Specialty drugs continue to grow

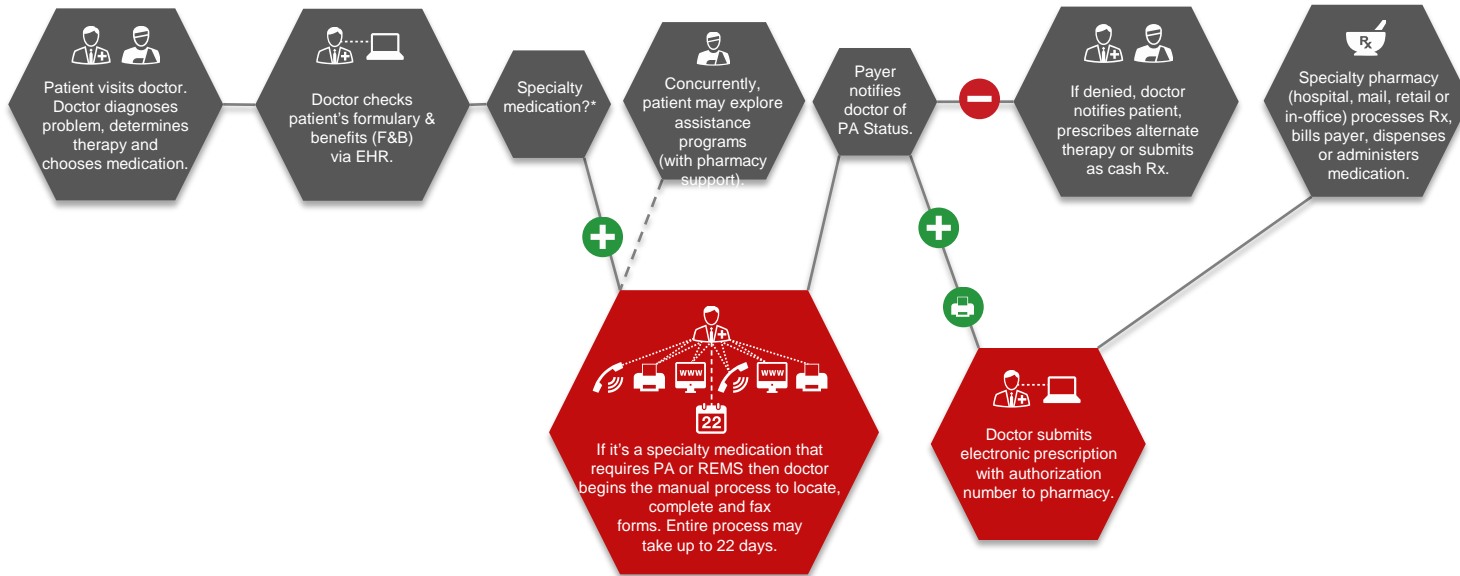
- ⦿ US spending on specialty drugs is projected to grow **67% by the end of 2015**
- ⦿ Specialty medications are the fastest-growing sector in the American healthcare system, expected to jump by two-thirds by 2015, and **account for half of all drug costs by 2018**
- ⦿ Specialty medications can run at \$2,000 per month per patient; **those at the high-end cost upwards of \$100,000 to \$750,000 per year**



How are they processed today?

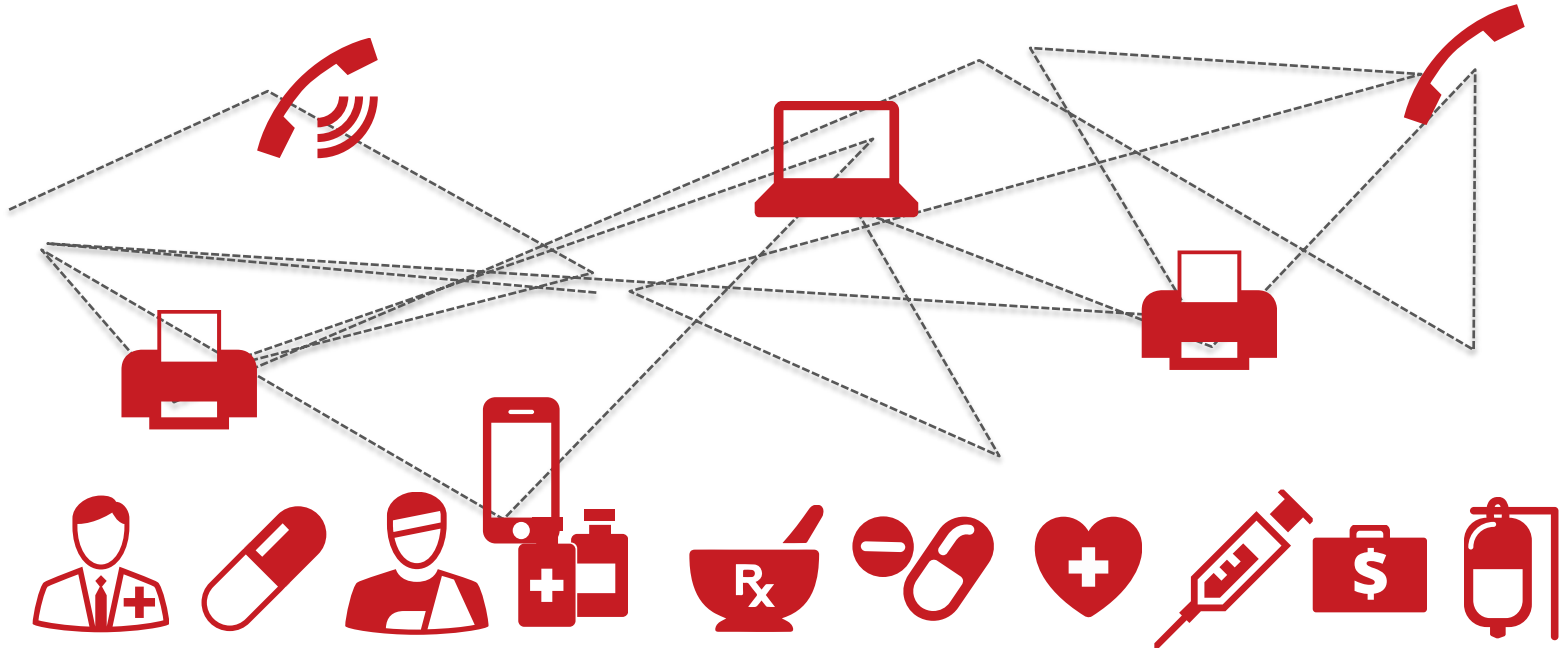


The current process



Today's prescribing process:

Obsolete. Inefficient.



Where are we?



ePrescribing



73%

**PHYSICIANS
TODAY**



90%

**PHYSICIANS
BY 2018**



100%

**RETAIL
PHARMACIES**



But ...



0%

of doctors know
the medication is
specialty

30%

of eRxs contain
diagnosis code

0%

of doctors know
where the specialty
Rx should be
dispensed

95%

of specialty Rxs
prescriber-
pharmacy are faxed

50%-95%

specialty Rxs require
Prior Authorization

95%

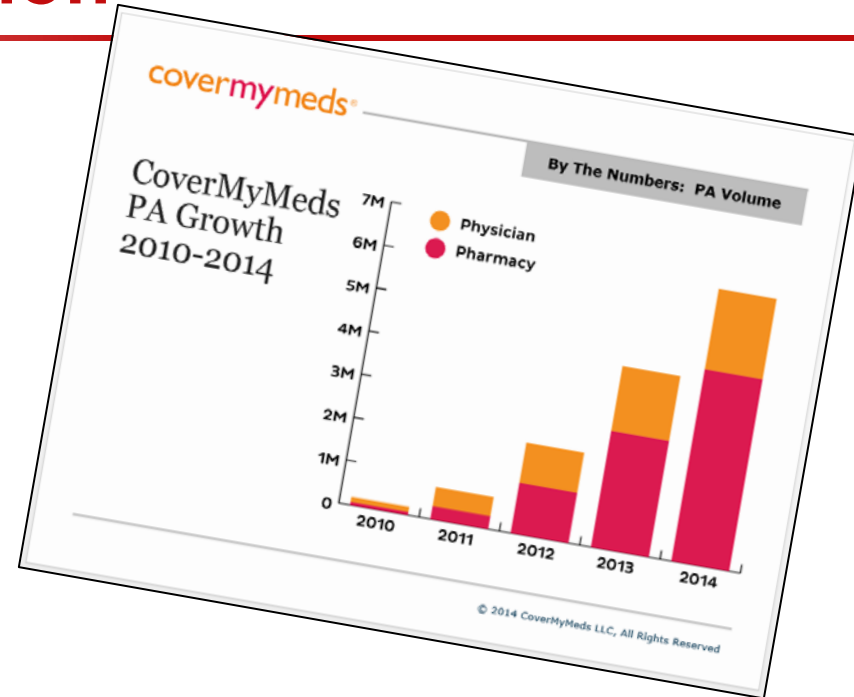
Opportunity for
financial assistance
for patients

5%-10%

Have REMS or
MedGuides

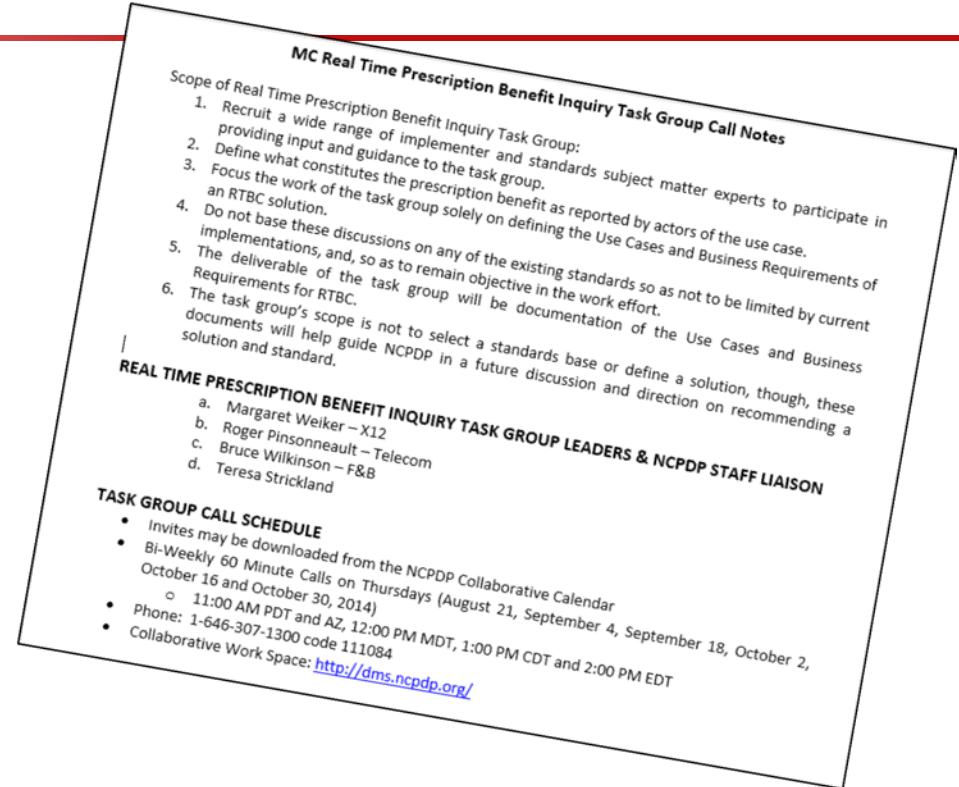
Electronic Prior Authorization

- ⦿ Retrospective and prospective models emerging in the marketplace
- ⦿ Retrospective being conducted in a proprietary manner
- ⦿ Industry movement toward prospective
- ⦿ Prospective ePA officially approved as part of the SCRIPT standard in July, 2013
- ⦿ Standardized retrospective process on-hold
- ⦿ Standardized questions being addressed
- ⦿ Need for standardization, evidence based PA criteria



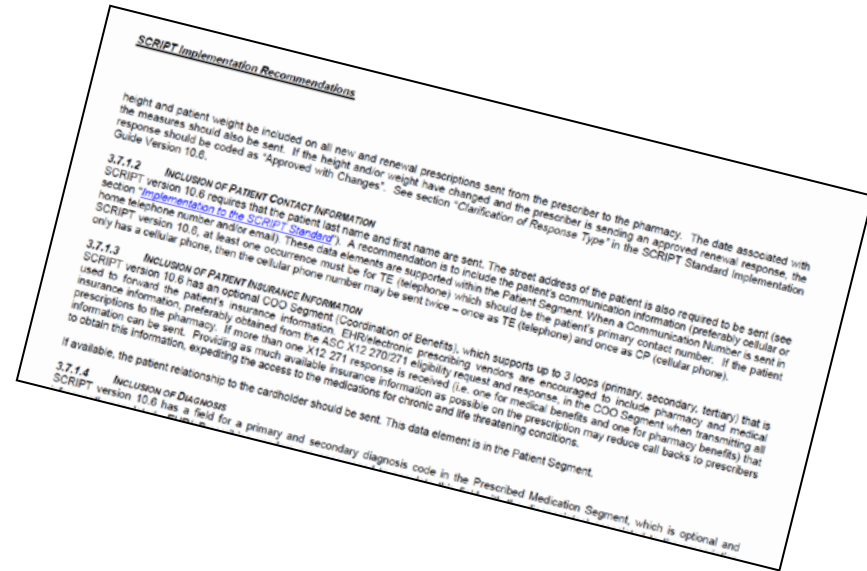
Benefits Verification

- ⊙ Today still done via phone/fax
- ⊙ Effort to bring a standardized electronic benefit verification to the market via the Real-Time Benefit Inquiry
- ⊙ Options include using:
 - NCPDP Telecommunications D.0 Standard
 - X12 270/271 Eligibility Request
 - NCPDP SCRIPT Standard



Specialty ePrescribing

- Task Group formed during fall 2013 Workgroup Meeting
- Co-lead by Laura Topor and Tony Schueth
- Goal is to include data elements needed by specialty pharmacy in the original prescription
- Accomplishments include recommendations for:
 - Diagnosis Code
 - Patient Contact Information
 - Height/Weight
 - Inclusion of Patient Insurance Information
- Working on identifying other data elements that can be included in the transaction and means of transmittal



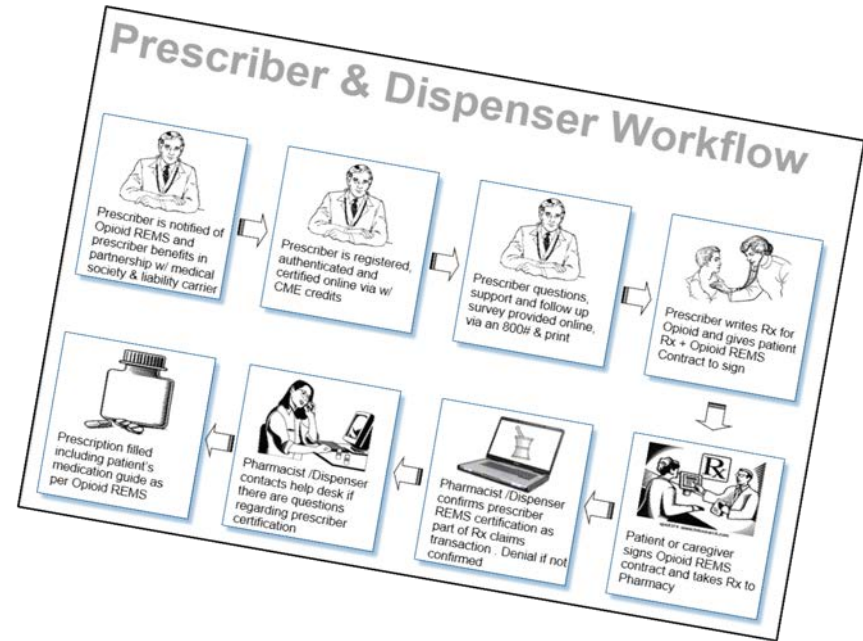
REMS

WG 1 – Telecommunications D.0

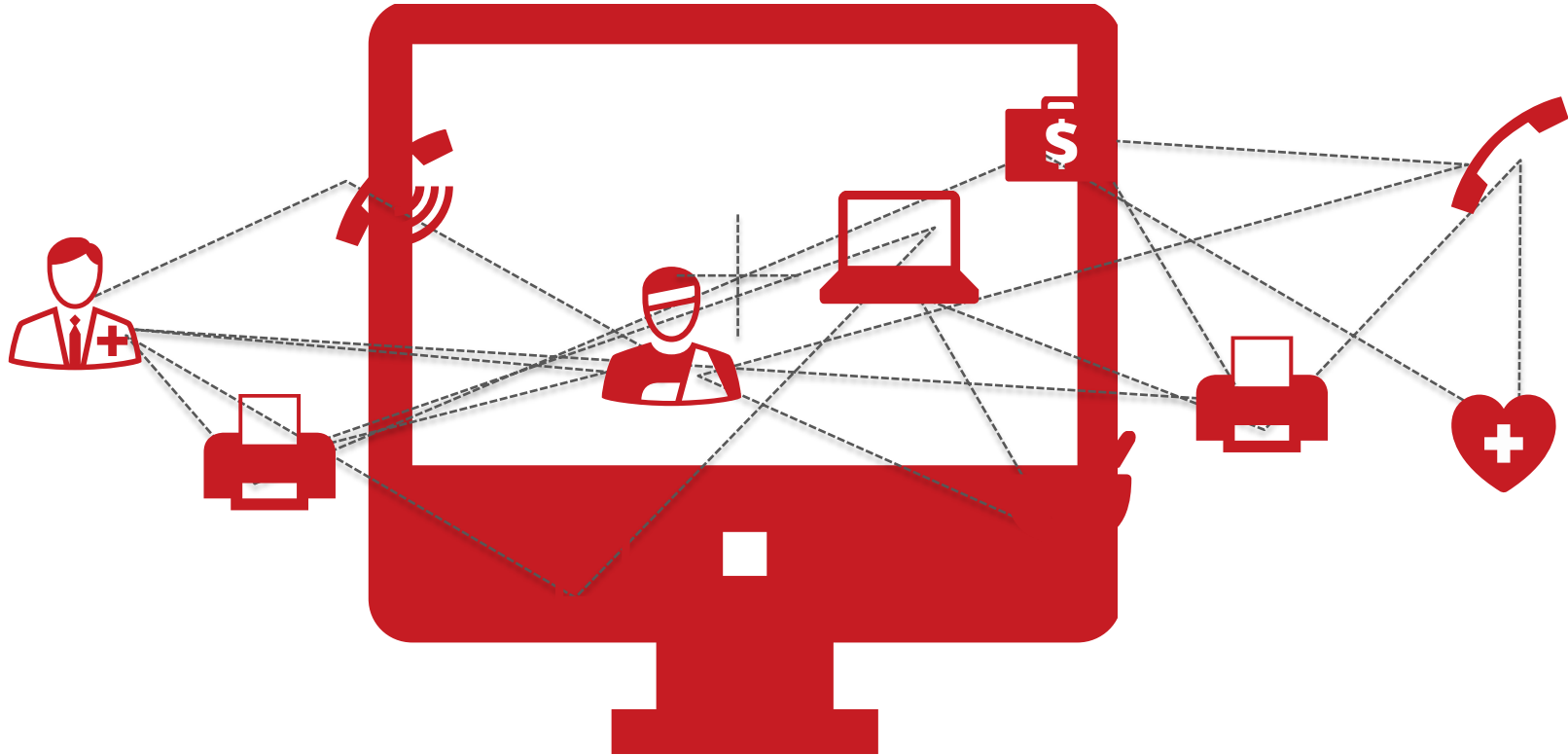
- Supports an “in workflow” REMS solution
- Currently supports a class-wide TIRF REMS (i.e. Transmucosal Immediate Release Fentanyl)
- Enhancements successfully balloted (Version E.3) for future use
 - Also supports real-time and in-workflow prescription drug monitoring program (PDMP) reporting

WG 11 – SCRIPT

- Standardizing the REMS process using ePrescribing transactions
- Streamline the electronic processing of REMS prescriptions from prescriber to pharmacy
- SPL “triggers” transaction in prescriber system



ePrescribing for Specialty Medications



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