# Scripps

## Launching a Centralized Financial Assistance Team – Increasing Medication Access

#### Background

Access to prescription medications is often contingent on the ability of patients to pay their out-of-pocket share of cost (OoP). In January of 2018, Scripps Health launched a Centralized Medication Prior Authorization (CPA) team. This 14 FTE CPA team provided a streamlined approach to PA submission and maximized insurance coverage. However, an increasing number of patients were unable to pay OoP copays even with PA approvals. Therefore in 2022, a second team of 4 FTE was formed to process submissions for medication patient assistance programs (MPAP).

#### **OBJECTIVES**

(1) Establish a dedicated MPAP team of 4 fulltime pharmacy technicians. (2) Launch an EMR (Epic) module tailored for MPAP requests, tracking, and reporting. (3) Provide KPI metrics that demonstrate efficacy and sustainability.

#### METHODS

Established 4 FTE Pharmacy Tech Specialists exclusively for MPAP as of 2/2022. Funding split – 1 FTE Clinic, 1 FTE Pharmacy, 1 FTE 340B, & 1 FTE additional proof-of-concept.

EPIC FA Module Launched 5/2/2022: Provided a standardized way to request FA on patients (FYI Flag). Directly fed into a worklist, that could be sorted and workshared. Allowed tracking tools in a dashboard, workbench report, and exportable reports. Permitted patients to self request using MyChart (MyScripps). EMR storyboard with visibility for every patient to show FA status. Standard work for MPAP team. Potential to generate automated reports for renewal season.

System-wide education and coordination of rollout for 32 clinics, 5 hospital campuses, and ambulatory pharmacies. Scope of Scripps MPAP Team:

- Pharmacy benefit medications (self-administered)
  - Filled at our retail & closed-door specialty pharmacies. • Filled at any outside pharmacy if prescribed by a
  - Scripps provider.
  - Discharge/transition medications for patients leaving
  - hospital stay at Scripps.
- Medical benefit medications (infusions/clinic-administered) • Given at a clinic office, clinic infusion center, or HBOI center owned by Scripps.





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Metric	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Total	ľ
# Processed	239	213	160	362	268	220	199	228	198	205	240	173	2,705	
\$ Free Drug/Co-Pay	\$4,531,614	\$3,479,722	\$3,317,496	\$15,615,964	\$9,542,305	\$6,087,152	\$6,117,275	\$4,273,691	\$4,596,278	\$2,457,226	\$4,536,586	\$2,808,844	\$67,364,152	
\$ Grants	\$272,300	\$271,525	\$192,600	\$853,111	\$389,700	\$191,200		\$240,946	\$317,000	\$245,774			\$3,797,501	
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#### RESULTS

EDICATION PATIENT FINANCIAL ASSISTANCE PROGRAM

he Medication Patient Financial Assistance Program serves patients that may be uninsured nder-insured as well as those that have insurance. Staff members search out funding sources fro rants and manufacturers for high dollar medications so that patients do not have to make a choice tween their physical health and financial health. The purpose is to make medications available t tients that would otherwise be unaffordable. This includes indigent patients or those without urance. Increasingly the program is seeing Medicare seniors on a fixed income who are unable afford their share-of-cost and may abandon therapy due to financial constraints.

Fiscal Year 2022, Scripps served 1,801 patients through this program and funded four full-time ployees dedicated to identifying and enrolling patients in free drug or reduced out-of-pocket dru osts for needy individuals throughout San Diego County. Scripps' decision to add this patient edicated resource was in direct response to seeing patients unable to afford their self-administer dications. Those without insurance are often unable to afford the "cash pay" price of medication nd they will sometimes go without these therapies. Equally impacted are those who have surance but find their co-pay (share of cost) is still beyond their means and at times they need t n affording their medications or affording food/rent/utilitie

ndigent patients who are started on new medications within the hospital. It is vital that these lifeustaining medications are continued after discharge. However, cost is an absolute barrier for the atients. The essential patient service of the Medication Patient Financial Assistance Program is ree of charge and provided regardless of where the medications are dispensed from in the

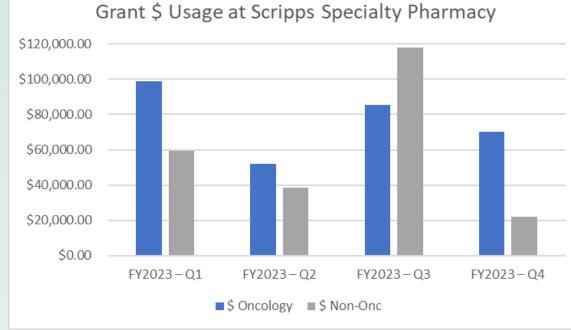
023 Scripps Community Benefit Plan & Repor

board -			
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	Program		Number of Trackers
34	V FA MED DRUG MANUFACTURER		379
	Approved		218
	Denied		109
	Pending		52
	✓ FA MED GRANT/FOUNDATION		160
LYNN [256037] TAMAYO, LYDIA GEMINI R [178598]	Approved		94
'5	Denied		56
	Pending		10
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	Program	Approved / Total	Approval Rate
	FA MED DRUG MANUFACTURER	218 / 379	57.52 %
	FA MED GRANT/FOUNDATION	94 / 160	58.75 %
	Ratio	312 / 539	57.88 %
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ge (Days)	Report completed: Wed 8/10 03:52 PM		
	Program	Denied / Total	Denial Rate
() 🖪 :	FA MED DRUG MANUFACTURER	109 / 379	28.76 %
	FA MED GRANT/FOUNDATION	56 / 160	35.00 %
	Ratio	165 / 539	30.61 %
210	Pending Trackers Needing Attention		() E :
	Report completed: Wed 8/10 03:52 PM		
25 30	Program		Number of Trackers
	✓ FA MED DRUG MANUFACTURER		31
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	Cases by Source		() E :
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### RESULTS

MPAP was shown to be sustainably self-funding, in addition to the patient/community benefit, and system-wide KPI success.

(SPC) Scripps Specialty Rx	FY2023 – Q1	FY2023 – Q2	FY2023 – Q3	FY2023 – Q4	FY2023 - Total
SPC \$ <u>Oncology</u> Used PAP/FA	\$98,784.76	\$52,116.26	\$85,344.15	\$70,053.17	\$306,298.34
SPC \$ <u>Non</u> -Onc Used PAP/FA	\$59,450.92	\$38,463.24	\$118,066.46	\$22,160.56	\$238,141.18
SPC \$ <u>Total</u>	\$158,235.68	\$90,579.50	\$203,410.61	\$92,213.73	\$544,439.52



#### CONCLUSIONS

The launch of a centralized MPAP team & EMR module was highly successful for Scripps Health. In FY2023, four dedicated FTEs were able to process 2,705 MPAP cases with a theoretical maximum value of tens of millions of dollars. The actual capture for FY2023 at Scripps closed-door specialty pharmacy exceeded \$500K, of which more than \$300K was oncology medication. This demonstrates the 4 FTE are selfsustaining and provide essential services to patients who otherwise would face financial barriers to vital medications.

#### ACKNOWLEDGEMENTS

Our gratitude to Scripps Health for supporting this project with special thanks to Ambulatory Pharmacy, Scripps Information Technology, Revenue Cycle & Project Management. This also would not have been possible without the partnership of Epic in both development and implementation. Most importantly is our thanks to the tireless dedication of our 4 Technician Specialists and to the patients they serve who entrust us with their healthcare.