It's a Small Copay After All— Launching a Central MPAP (Medication Patient-Assistance Program) Team

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Learning Objectives

At the end of this session, participants should be able to:

1. Recall potential financial barriers to medication therapy and patient care as well as the level of burden caused to providers and clinical staff.
2. Identify key steps in launching and maintaining a Central MPAP (Medication Patient-Assistance Program) Team.
3. Recognize the Key Performance Indicators (KPIs) and business initiatives that can help sustain this an MPAP team.

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About Scripps Health

- Scripps is a private, nonprofit, integrated health system in San Diego, California

- Encompasses 5 hospital campuses

- 32 outpatient centers/clinics

- Scripps operates 3 traditional retail pharmacies and 1 closed-door specialty pharmacy

- More than 3,000 affiliated physicians and 16,000 employees

- Scripps treats 700,000 patients annually

- Very diverse payor mix: both patient and insurance

  o Military county
  o Border county
  o Popular vacation county
  o Wide range of incomes

Source: https://www.scripps.org/about-us, https://www.scripps.org/locations

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PART 1 – DEFINE THE NEED

Elephant in the room is the burden of financial barriers to medication therapy

Image provided by Nugget and Aaron. Not for reuse without permission of Nugget and Aaron.

OoP/Copay/Coinsurance $ = Barrier

- One of the primary barriers to medication therapy is the patient's out-of-pocket (OoP) cost
  - Prior authorization has been an important piece, so that insurance will pay for a portion of the cost
  - But even then, the remaining OoP in the form of a copay (pharmacy benefit) or coinsurance (medical benefit) may prevent initiation or continuation of therapy
- MPAP have inherent complexity, since the programs are highly individualized
  - Legally these can be limited by payor type (government/commercial)
  - Some are need-based with no single standard for application/selection
  - Funding and participation can change suddenly based on contributions, usage, profitability, and a variety of other intrinsic/extrinsic factors

Source: Hung A, Blalock DV, Miller J, McDermott J, Wessler H, Oakes MM, Reed SD, Bosworth HB, Zullig LL. Impact of financial medication assistance on medication adherence: a systematic review. J Manag Care Spec Pharm. 2021 Jul;27(7):924-935.

Good/Bad of MPAP Centralized Teams

- Medication Patient-Assistance Programs (MPAP) have a clear impact

    - Increasing medication initiation/implementation by up to 18%[1]

    - Increasing one-year maintenance/persistence by up to 47%[1]

- However, MPAP has significant drawbacks mitigated by a centralized team

    - Delays in initiation of care while awaiting assistance approval

    - Average time to initiation of oral prostate cancer medication with approved assistance = 39 days[2]

    - Average initiation of same medications without assistance = 12–18 days[2]

    - Medians for these same groups were 31 days versus 5–10 days[2]

Sources:
(1)Hung A, Blalock DV, Miller J, McDermott J, Wessler H, Oakes MM, Reed SD, Bosworth HB, Zullig LL. Impact of financial medication assistance on medication adherence: a systematic review. J Manag Care Spec Pharm. 2021 Jul;27(7):924-935.
(2) Jeong AY, Schwartz EB, Roman AR, McDevitt RL, Oerline MK, Henry E, Veenstra CM, Caram MEV. Characterizing Out-of-Pocket Payments and Financial Assistance for Patients Prescribed Abiraterone and Enzalutamide at an Academic Cancer Center Specialty Pharmacy. JCO Oncol Pract. 2022 Feb;18(2):e284-e292.

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Scripps MPAP Centralization

- MPAP complexities and lack of standard processes take considerable time and effort from prescribers and patient care givers

- By centralizing the MPAP work to pharmacy technicians you can reduce the burden on providers and clinical staff

- Scripps Health has previously shown success and efficiency of scale with a centralized team dedicated to medication prior authorization

- Using a similar framework but tools specific to MPAP, the same pharmacy expertise can reduce OoP barriers to medication therapy

- Expand from medication authorization to medication access

Source: Ragavan MV, Swartz S, Clark M, Chino F. Pharmacy Assistance Programs for Oral Anticancer Drugs: A Narrative Review. JCO Oncol Pract. 2024 Jan 19.

If Only…

- If only there were an award-winning team to help show you the way.

- Perhaps two representatives from a world-class organization with an integrated Medication Patient Assistance Program (MPAP) team.

- Two brilliant and eloquent pharmacists who can provide a roadmap to MPAP success and sustainability.

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HealthTrust 2023 Pharmacy Excellence Award

Centralized Medication Financial Assistance Program

Source: HealthTrust University 2023. Used with permission of HealthTrust.

CE Credit Deadline: 09/30/24

Assessment Question #1

Which of the following is/are common financial barrier(s) to patient medication access?

A) Required prior authorization approval by PBM so that insurance will cover a portion of the medication cost.

B) Patient inability to afford their copay/share of cost even with insurance paying the remainder.

C) Difficulty locating a pharmacist who is not eclipsed by a Flemish Giant rabbit.

D) Both A & B.

| **CE Credit Deadline: 09/30/24**

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Answer Question #1 - D

Which of the following is/are common financial barrier(s) to patient medication access?

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D) Both A & B.

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PART 2 – MPAP LAUNCH

The journey to launching a Centralized Medication Patient-Access Program team

Source: Scripps Health Pharmacy Team. Not for reuse without permission of Scripps Health.

Time Machine – 2017 to 2018

- Late 2017 – I was working in acute care hospital. My boss came by & told me that I would be moving to OP to launch a prior authorization (PA) team.

- 1/29/2018 – Scripps launched the CPA team…

- Late 2018 – Something strange was happening:

  o Requests for PA on meds that did not require one or where PA already approved.

  o Prior authorization did not equal affordability.

  o Example: Patient is started on an amazing $10,000 per month therapy. PA is approved and insurance generously is covering 80% of cost. But oddly the patient is not all that excited about paying the remaining $2,000 per month.

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Medication Central Prior Authorization Team (CPA)

Source: Scripps Health Pharmacy Team. Not for reuse without permission of Scripps Health.

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HealthTrust 2021 Pharmacy Excellence Award

Early Adoption – Medication Central Prior Authorization

Source: HealthTrust University 2021. Used with permission of HealthTrust.

Time Machine, Part 2 – 2019

- 2019 – Attended EMR user-group to present on CPA/EBM
  - Several great presentations on a new FA module & FA best-practice
  - Houston Methodist
  - Aurora Health Care
- EMR FA module did not address medications at all (my opinion)
- Scripps did not yet agree to costs of implementation for FA module
- Discovery that Scripps had 2 existing pharmacy technicians who were performing FA: Gemini and Stephany
- Shook the apple cart by asking the mangers for Gem and Steph for permission to meet with them on a monthly basis

Source: https://userweb.epic.com/, https://eventarchive.epic.com/Past%20Events/2019%20Events/

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Time Machine, Part 3 (Working in Silos 2020)

- One technician was doing FA for medications on a nearly full-time basis at Scripps since 2015

  o Almost 5 years at Scripps, many years before at another institution

  o Funded under 340B program

  o Often assisting indigent patients or elderly low-income patients

  o High touch and lots of coordination for relatively low-cost medications

- The other technician was separately processing medication FA since 2014 as a part of their other clinic work duties

  o Oncology focused and funded position

  o Often for high-dollar infusion and GSF/ESA medications

  o Off-label, clinic administered, some oral as well

Time Machine, Part 3 (Working in Silos 2020)

- Neither had met each other before in-person or knew about their parallel work

- Both described vastly different types of MPAP

- Delivery of medications to patients, refills, notification of clinic staff or patient, and nearly every other aspect was done differently

- Manual processes, stacks of paper/folders, so many inputs

- Apples and oranges isn't even that close

- Painful workflow meetings, no one should ever have to sit through

Fab-4 | Goal of 4 Dedicated MPAP FTEs

- Affectionately known as the Fab-4

- Officially together as of January 2022

- And now, the starting lineup for your MPAP…

- Oncology – Gemini

- 340B – Stephany → Jennifer

- Approval + 1 FTE expansion – Tami

- Stolen from CPA – Gaby

MPAP Fab-4

Source: Scripps Health Pharmacy Team. Not for reuse without permission of Scripps Health.

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Scope of Scripps MPAP Team

- Pharmacy benefit medications (self-administered)
  - Filled at our retail pharmacies
  - Filled at our closed-door specialty pharmacy
  - 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
- Very low volume of medication replacement, but a future possibility
- Very low volume of IP hospital-based meds (normally out of scope)

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Why dedicated MPAP FTEs?

- Sharing resources model is popular, especially in specialty retail
- Scope for us is not limited to medications that are filled at Scripps-owned pharmacies
- Economy of scale in trying to coordinate 4 FTEs to cover a wide variety of patients/customers
- Tying pharmacy FTE to Rx fills may limit expansion or even lead to contraction
- Time windows for funds are sometimes very finite. Don't want to miss it while staffing
- Gemini's story:
  - Was an IV compounding technician in the Hem-Onc clinic
  - Prepared chemotherapy medications, pre-meds, supportive therapeutics, etc.
  - During downtime between compounding, they would work on FA
  - Led to delays and staffing tug-of-war since these were distinctly different needs

EMR – EHR FA Module – Getting Better

- UGM 2019 presentations/demos interesting but not applicable
- Early 2020 found out that Scripps Revenue Cycle agreed to a discovery and funding request
  - Target = what was seen at other systems (hospitalization, procedures)
  - Updated demo in 2020 with EHR developers spoke to the potential to improve upon the FA module from a medication standpoint
  - But still very limited in tailoring towards medications
  - Revenue Cycle kindly agreed to give me a seat at the table
- March 2020 – "Slight delays expected due to a novel coronavirus."
- September 2021 – Demo much improved EHR FA Module from med perspective (flag system, med groupers, med specific fields)
- Agreement to have:
  - Phase I = November 2021 – Not medications
  - Phase II = May 2022 – Medications

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Launched 5/2/2022 – EHR FA Module

Many cool things:

- Provided a standardized way to request FA on a patient – FYI Flag

- Directly fed into a worklist, that could be sorted and work-shared

- Allowed tracking tools in a dashboard, workbench report or exportable report modality (no more manual spreadsheets)

- Also permitted patients to self request using patient chart-portal (MyScripps)

- EMR storyboard with visibility for every patient to show approved FA

- Standard work that all MPAP team could point to

- Potential to generate an automated report for renewal season

MPAP Basic Workflow – Overview

FYI FA MED Flag → MPAP Work Queues → Case/Trackers

FYI FA MED Flag

- To request MPAP, add the FYI flag type of FA Medication Assistance to a patient's chart
- This will trigger the patient to fall into a work queue for MPAP technicians to build a case and request for funding
- To add more details and information, use the smart-phrase ".famed" to generate the question prompts

MPAP Work Queues

- WQ 27644 Financial Assistance Medication Review Needed
- WQ 27645 Financial Assistance Medication Pending Cases Without Trackers
- WQ 27646 Financial Assistance Medication Pending Trackers

Source: Scripps Health MPAP EMR. WQ = work queue with corresponding numbers.

Case/Trackers

- Created/updated by MPAP technicians
- Viewable by all staff with EMR transparency
- Allows for distinct fields to be pulled in reporting and single location for keeping MPAP
- Streamlines KPI metrics
- Does not do submissions

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MPAP Basic Workflow – FYI FA MED Flag

FYI FA MED Flag

- To request MPAP, add the FYI flag type of FA Medication Assistance to a patient's chart

- This will trigger the patient to fall into a work queue for MPAP technicians to build a case and request for funding

- To add more details and information, use the smart-phrase ".famed" to generate the question prompts

FYI

New Flag

Contact:
#21 - 3/31/2022 - Appointment

Flag type:
FA Medication Assistance

Insert SmartText   100%

1. Please pursue financial assistance for this patient for the following medication(s): ***
2. Is this to support infusion? If Yes, please indicate the scheduled visit location: ***
3. Is there a specific Contact Person (other than the patient)? If Yes, please provide their name, relationship to patient, and phone number. {y/n:25926}
4. Is there any additional information that our FA Med team should know? {y/n:25926}

✓ Accept   Accept & New   ✗ Cancel

Source: Scripps Health MPAP EMR. Not for reuse without permission of Scripps Health.

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MPAP Basic Workflow – WQs for MPAP

WQs for MPAP

ID	WORKQUEUE NAME	WORKQUEUE QUALIFICATTION	WORKQUEUE FALL OUT
27644	FINANCIAL ASSISTANCE MEDICATION REVIEW NEEDED	FYI Flag: FA Medication Assistance	1.Case is created 2.Case flag: FA Medication Assistance
27645	FINANCIAL ASSISTANCE MEDICATION PENDING CASES WITHOUT TRACKERS	1. Case has a status of "In Progress" 2. Case flag: FA Medication Assistance 3. NO FA Med tracker	1.FA Med tracker created
27646	FINANCIAL ASSISTANCE MEDICATION PENDING TRACKERS	1. Case has a status of "In Progress" 2. Case flag: FA Medication Assistance 3. FA Med tracker has a Pending status	1.FA Med tracker updated with status of approved/denied 2. Case status update to Complete

Workqueue List
🔄 Refresh | 📖 Open
📇 Account | 📅 Appt
F | ID Name
☆ 27644 FINANC
☆ 27645 FINANC
☆ 27646 FINANC

Total Count
1
7
66

Source: Scripps Health MPAP EMR. Not for reuse without permission of Scripps Health.

MPAP Basic Workflow – Case/Trackers

Case/Trackers

- Created/updated by MPAP technicians

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Source: Scripps Health MPAP EMR. Not for reuse without permission of Scripps Health.
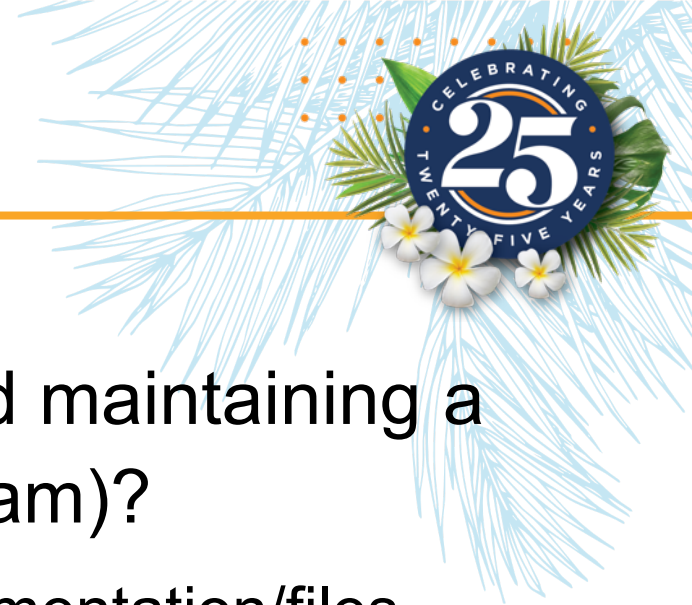
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Assessment Question #2

Which of the following are key steps in launching and maintaining a Central MPAP (Medication Patient-Assistance-Program)?

A) Establishing standard MPAP work and systematized documentation/files.

B) Having an EMR or other technology platform with transparency that can be shared by MPAP staff, clinics, providers and patients.

C) Designating MPAP staff as dedicated to that role, rather than as a task subset of other primary duties.

D) All the above.

| **CE Credit Deadline: 09/30/24**

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Answer Question #2 - D

Which of the following are key steps in launching and maintaining a Central MPAP (Medication Patient-Assistance-Program)?

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C) Designating MPAP staff as dedicated to that role, rather than as a task subset of other primary duties.

D) <mark>All the above.</mark>

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PART 3 – Rx SPECIALTY

Launch & operations for Scripps Closed-door Specialty Pharmacy

Scripps Health Specialty Pharmacy

- Established 2020

- Team: 3 Pharmacists, 3 Pharmacy Technicians

- Dual accreditation

- Area served: greater San Diego County

Source: URAC 2024, ACHC 2024 seals of accreditation. Do not copy or distribute without approval from URAC/ACHC.

In the beginning…

Late 2020
- Started with a team of 1 pharmacist and 1 pharmacy Technician
- Filled ~ 600 prescriptions in ~3 months

2021
- Received dual accreditation ACHC/URAC
- Filled ~2300 prescriptions/year
- Team expanded to 2 pharmacists and 2 pharmacy technicians

2023
- Received dual reaccreditation ACHC/URAC
- Received URAC Pioneer in Leadership Performance Measurement
- Filled over 4,000 prescriptions
- Team expanded to 3 pharmacists and 3 pharmacy technicians

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Source: Getty images. Permission or accessed info.

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Core Specialty Pharmacy Scope of Services

- Expert disease and drug therapy management/counseling

- Promoting cost-effective medication management by consolidating duplicate therapy, encouraging generic substitution, decreasing polypharmacy

- Promoting adherence to medication therapy to avoid hospitalizations or prescriber office visits

- Insurance processing and billing

- Assistance with prior authorization

- Assistance with financial assistance

- Offering 24/7 availability of a pharmacist for clinical/urgent questions

- Facilitating an alternate source for patients to obtain their medications when access or availability is an issue

- Coordination of care with the patient's other health care providers and payer organizations as required for optimal care management

- Complimentary, timely and temperature-appropriate delivery within greater San Diego County

- Convenient hours of operation for patient or their caregivers

| **CE Credit Deadline: 09/30/24**

Expanded Specialty Pharmacy Services

- Collaboration with: Oral Oncology (OO) Clinic & Comprehensive Medication Management (CMM) Clinic

- Able to qualify prescriptions and generate revenue through medication management via CMM & OO Clinic and dispensation out of our specialty pharmacy
  - ~ $450K total CMM revenue Aug.–Dec. 2022
    - Does not include oral oncology patients
  - ~ $11 million total OO + CMM revenue CY 2023
    - Includes all disease states, including oral oncology patients

Source: Getty images. Used with permission of HealthTrust.

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Expanded Specialty Pharmacy Services

- **Collaborative Practice Agreement**

  o Facilitate Mercy Infusion Access

    ▪ Act as an agent for the referring physician and facilitate access to our infusion center

  o Enhance collaborative care for patients managed at Scripps Specialty Pharmacy

    ▪ Authority to order labs and drug therapy-related tests; refill medications; and initiate, modify, or discontinue treatment

  o Assist in the management of outpatient iron deficiency anemia therapy

    ▪ Clinically manage patients for optimal treatments and outcomes

PA/MPAP & Outpatient Pharmacy – Working Together

How does the PA team help our Outpatient Retail / Specialty Pharmacies?

- Assist with initial and renewal PA submissions

- Assist with PA appeals

- Timely communication of PA status updates to pharmacies and clinics

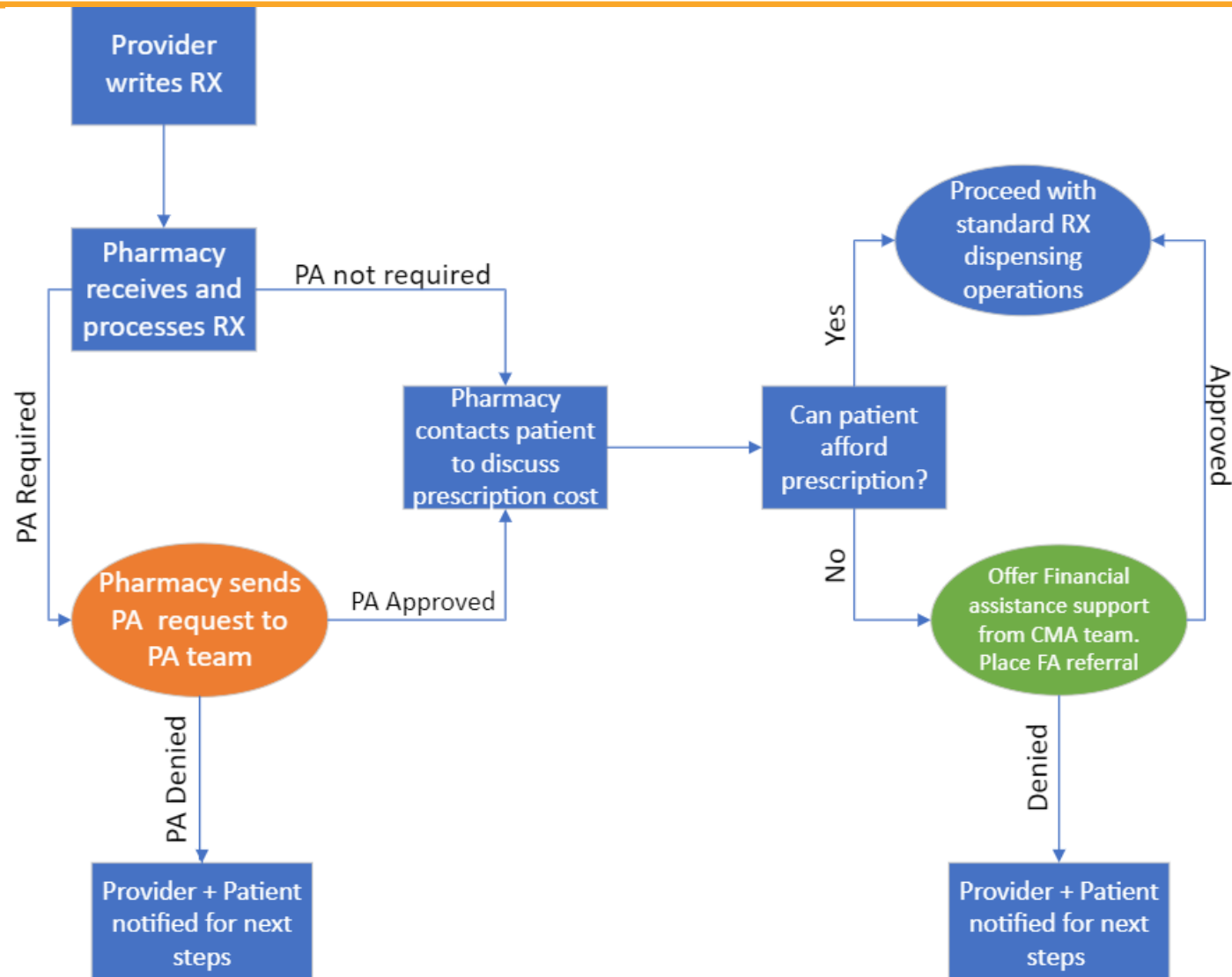- Maintain timely PA response turnaround time

| **CE Credit Dea"dline: 09/30/24**

How does the MPAP team help our Outpatient Retail / Specialty Pharmacies?

- Assist with FA for patients serviced in-house

- Timely communication of FA eligibility updates to pharmacies and clinics

- Provide alternative medication options that have available funding or FA

- Maintain timely FA response turnaround time

- Track and assist with patients waitlisted when funding becomes available

- Provide a "one stop shop" experience

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Source: Scripps Specialty Pharmacy. Not for reuse without permission of Scripps Health.

PART 4 – KPIs

Key performance indicators & measures of success

Source: HealthTrust University 2023. Used with permission of HealthTrust.

Financial Assistance – Copay Savings

(SPC) Scripps Specialty Rx	FY2023–Q1	FY2023–Q2	FY2023–Q3	FY2023–Q4	FY2023–Total
SPC $ Oncology Used FA	$98,785	$52,116	$85,344	$70,053	$306,298
SPC $ Non-Onc Used FA	$59,451	$38,463	$118,066	$22,161	$238,141
SPC $ Total	$158,236	$90,580	$203,41	$92,214	$544,440

- Data represents total copay amount covered by secondary patient FA plans for prescriptions filled at Scripps Specialty Pharmacy
- Savings applies to patient assistance plans billed secondary to insurance (e.g., grants, foundations, copay cards)
- Does not include free trial or free medications obtained by FA team
- Does not include financial assistance for our other non-specialty sites

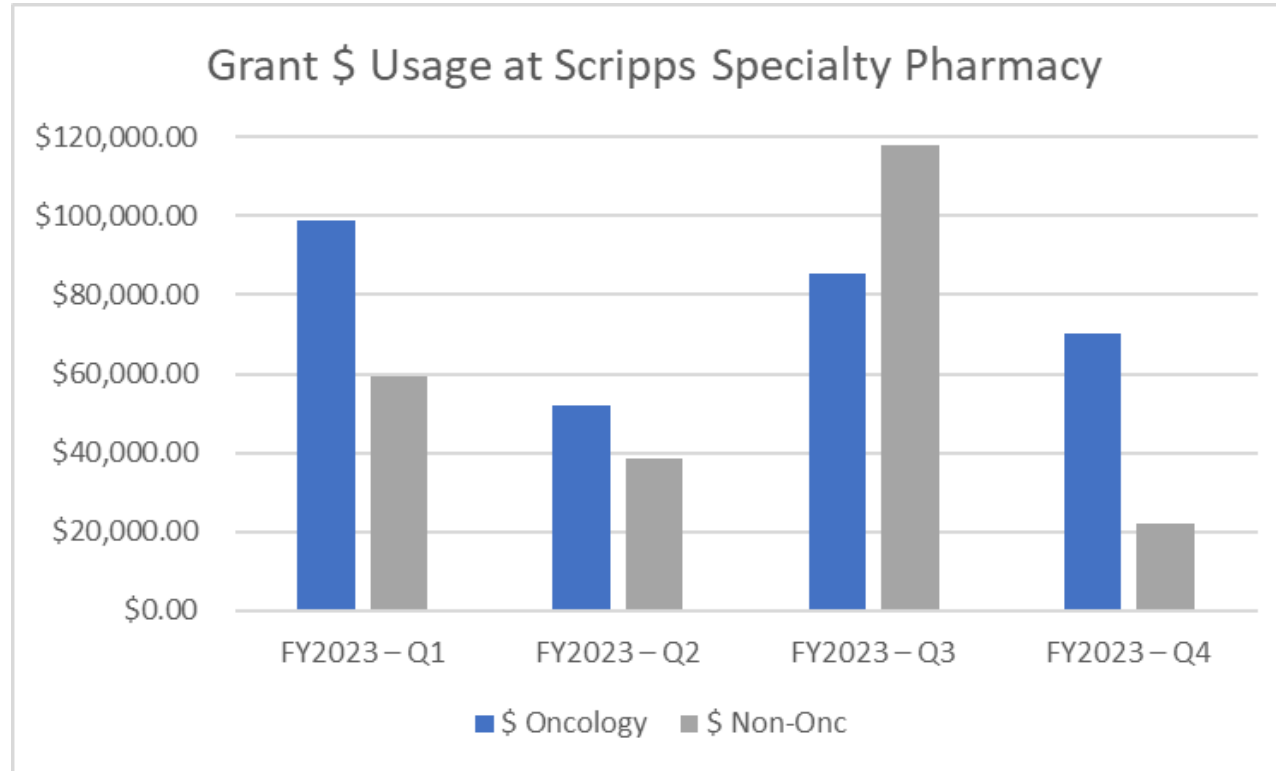Source: Scripps Health Specialty Pharmacy 2023 Data
SPC: Scripps Specialty Pharmacy
FA: Financial Assistance

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Total Grant Usage – Scripps Specialty Pharmacy

Total Savings by Patient Population Served

Grant $ Usage at Scripps Specialty Pharmacy

Source: Scripps Health Specialty Pharmacy 2023 Data

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Specialty Pharmacy KPIs

Time to Initiate Therapy (TAT) & Medication Adherence	Target	Baseline	2021	2022	2023
Proportion of days covered	>90%	89%	90%	92%	92%
TAT (time to delivery scheduling total all RXs)	≤5 days	1.25	NA	3.88	3.22
TAT (clean prescriptions)	trend	NA	NA	3.06	2.56
TAT (unclean prescriptions requiring interventions)	trend	NA	NA	3.90	4.63
Average delivery time (% of RXs delivered on time)	>90%	98%	98%	98%	99%

| **CE Credit Deadline: 09/30/24**   Source: Scripps Health Specialty Pharmacy Data

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Perspective & What Success Looks Like

Source: Scripps Health Green Hospital Phone Installation Images.
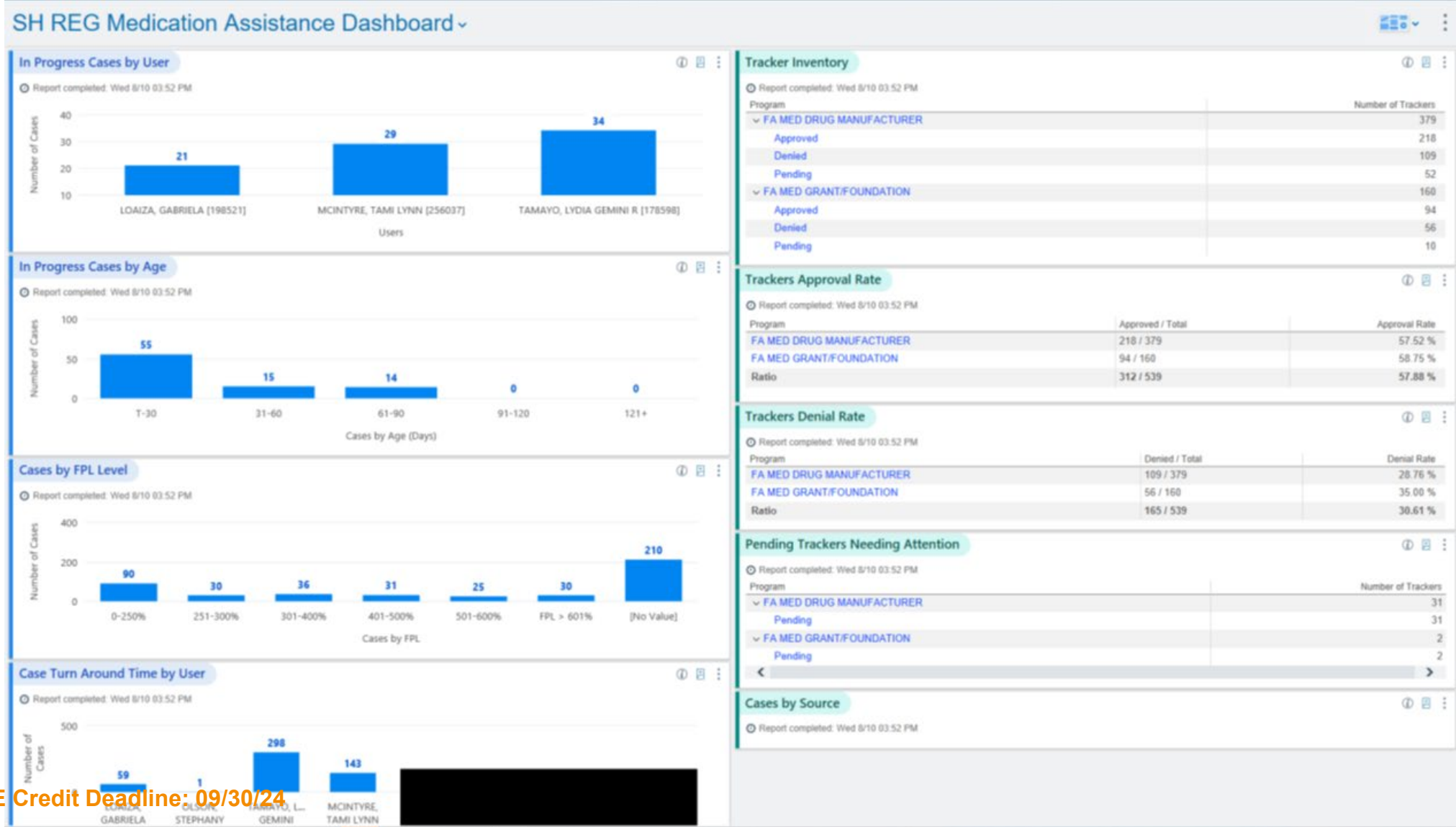
MPAP KPI FY2023 & Summary

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 self-sustaining and provide essential services to patients who otherwise would face financial barriers to vital medications.
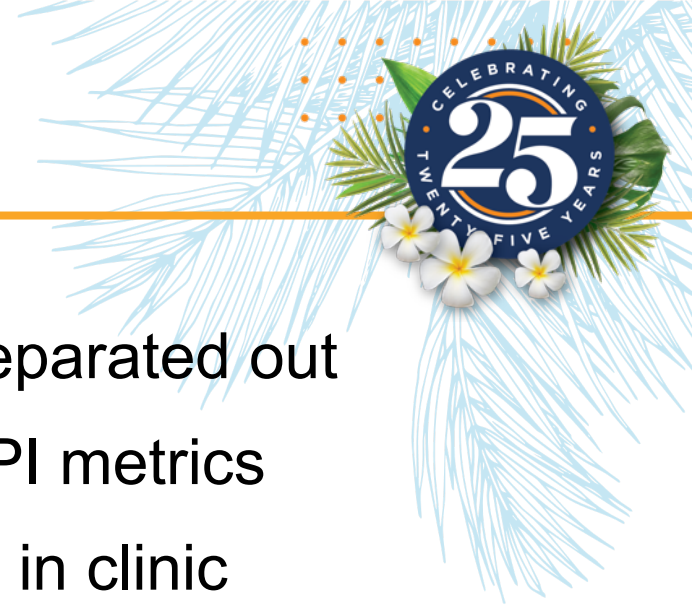
Metric	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Total
# Processed	239	213	160	362	268	220	199	228	198	205	240	173	2,705
$ Free Drug/Co-Pay	$4,531,614	$3,479,722	$3,317,496	$15,615,964	$9,542,305	$6,087,152	$6,117,275	$4,273,691	$4,596,278	$2,457,226	$4,536,586	$2,808,844	$67,364,152
$ Grants	$272,300	$271,525	$192,600	$853,111	$389,700	$191,200	$225,700	$240,946	$317,000	$245,774	$353,445	$244,200	$3,797,501

Source: Scripps Health FY2023 data pulled from EHR workbench reporting as entered in financial assistance module.

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EMR MPAP Dashboard Optimization

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Source: Scripps Health MPAP EMR. Not for reuse without permission of Scripps Health.

MPAP KPI FY2024 Q1 & Q2

- For FY2024 free drug and copay/coinsurance have been separated out

- First half of FY2024 is on-pace for exceeding all FY2023 KPI metrics

- In-progress initiative to automate MPAP coinsurance usage in clinic

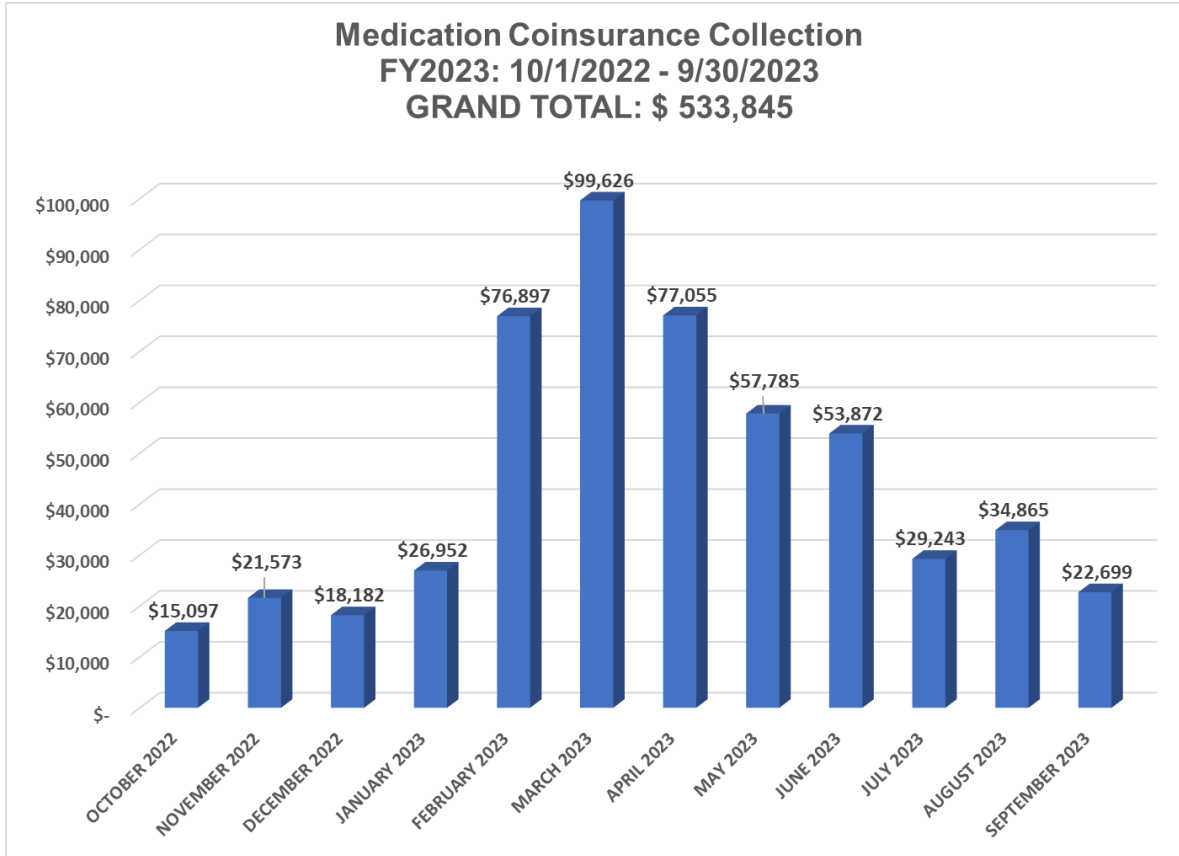| Metric	Oct	Nov	Dec	Jan	Feb	Mar	Apr - Sep	YTD Total
# Processed	235	246	262	438	296	239		1,716
$ Free Drug	$6,147,409	$4,244,229	$5,381,488	$17,897,729	$10,426,044	$5,110,397		$49,207,296
$ Copay-Coinsurance Cards	$480,775	$176,848	$897,877	$776,554	$1,044,335	$1,116,225		$4,492,614
$ Grants	$311,356	$329,900	$400,317	$714,141	$306,000	$211,410		$2,273,124

Source: Scripps Health FY2024 data pulled from EHR workbench reporting as entered in financial assistance module.
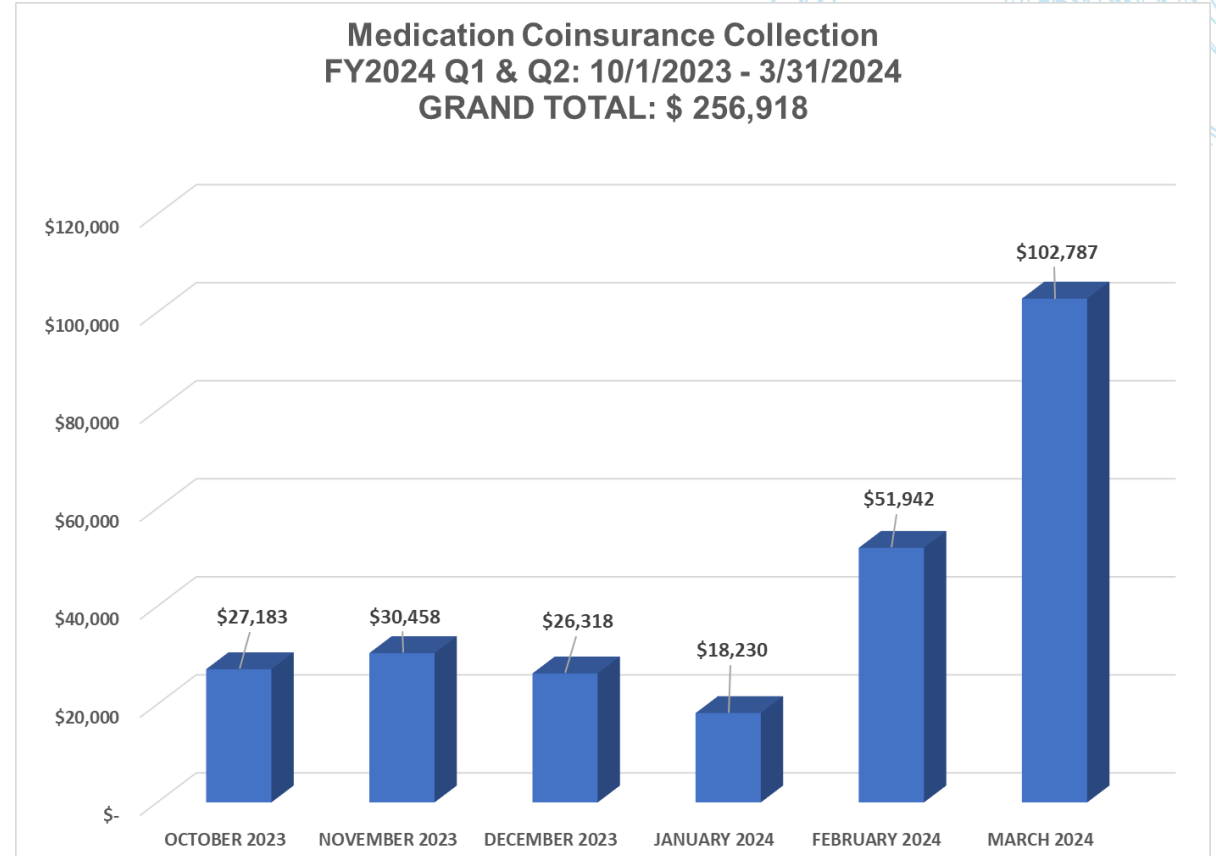
| **CE Credit Deadline: 09/30/24**

Clinic Medical Coinsurance MPAP Usage (Manual)

Medication Coinsurance Collection
FY2023: 10/1/2022 - 9/30/2023
GRAND TOTAL: $ 533,845

Month	Amount
October 2022	$15,097
November 2022	$21,573
December 2022	$18,182
January 2023	$26,952
February 2023	$76,897
March 2023	$99,626
April 2023	$77,055
May 2023	$57,785
June 2023	$53,872
July 2023	$29,243
August 2023	$34,865
September 2023	$22,699

Medication Coinsurance Collection
FY2024 Q1 & Q2: 10/1/2023 - 3/31/2024
GRAND TOTAL: $ 256,918

Month	Amount
October 2023	$27,183
November 2023	$30,458
December 2023	$26,318
January 2024	$18,230
February 2024	$51,942
March 2024	$102,787

Sources: Scripps Health FY2023 and FY2024 data manually collected by Scripps Business Services.

Assessment Question #3

All the following key performance indicators (KPIs) show value and sustainability of a centralized MPAP team <u>except</u>:

A) The monthly, quarterly, and yearly dollar totals of grant money obtained for patients seen within your institution.

B) Quarterly **used** MPAP dollar totals for patients at your company-owned specialty pharmacy and site clinics.

C) The total # of patients each month who are helped by centralized MPAP.

D) The ability of staff to reach wall mounted phone and read posted hospital extension lists.

|

Answer Question #3 - D

All the following key performance indicators (KPIs) show value and sustainability of a centralized MPAP team <u>except</u>:

A) The monthly, quarterly, and yearly dollar totals of grant money obtained for patients seen within your institution.

B) Quarterly **used** MPAP dollar totals for patients at your company-owned specialty pharmacy and site clinics.

C) The total # of patients each month who are helped by centralized MPAP.

D) The ability of staff to reach wall mounted phone and read posted hospital extension lists.

| **CE Credit Deadline: 09/30/24**

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"If you really look closely, most overnight successes took a long time."

~ Steve Jobs

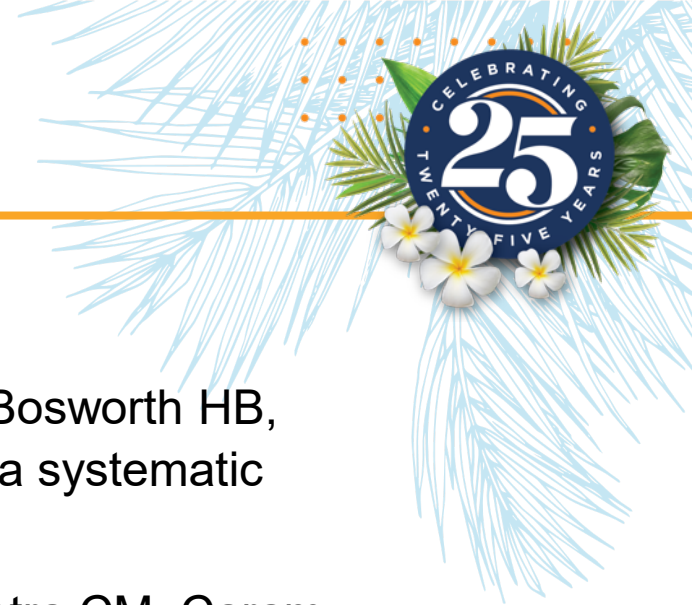American businessman, inventor & investor
best known for co-founding Apple Inc.

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"Keep shooting jump shots."

~ T. Jackson

Scripps Health, in reference to project
during 2018-2023 timeframe

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References

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- https://userweb.epic.com/, https://eventarchive.epic.com/Past%20Events/2019%20Events

- Collaborative Practice Agreement California State law (CA Bus & Prof Code § 4052.2 through 4052.6(2021).

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Thank You