HOW TO START COST CONVERSATIONS WITH REAL-TIME PRESCRIPTION BENEFIT

A Guide for Prescribers

With access to Real-Time Prescription Benefit, you have a powerful new way to identify therapeutic alternatives that could be more affordable for your patients. But how do you start that conversation? Here are some ideas from clinicians who've been there.

Quick tip: If your tablet or computer allows it, share your screen with the patient as you review cost information and medication alternatives.

5 MEDICATION COST CONVERSATION STARTERS

“Some of my patients have a hard time paying for all of their medications. Has the cost of your prescriptions been an issue?”

“I am not seeing the response I would have expected from your medication. One thing that gets in the way for some of my patients is the cost—they might skip doses to make a prescription last longer, for instance. Would it be helpful if we tried to find a less expensive alternative?”

“I know we’ve talked about using [drug name] to treat your [condition]. However, I think there might be some alternatives that would work well for you and cost less. I have a new solution that can show us that information. Let’s review our options.”

“I have this new system that allows me to check your insurance plan for alternative medications that may save you some money and work just as well. Let’s take a look at the information together.”

“I have a medication in mind, but before I prescribe it, I am going to check your insurance plan to check your out-of-pocket cost and see if there are any alternatives that would cost less and be just as effective. This takes less than a minute, so we can review it together.”

4 WAYS PRICE TRANSPARENCY CAN ENHANCE PRESCRIBING

Improve adherence and outcomes: Cost is a major barrier to adherence, and when patients aren't responding to their current therapy, they may be skipping or reducing doses. Real-Time Prescription Benefit helps you proactively identify and discuss lower-cost options even if patients are hesitant to share that they can't afford their medications.

Avoid pharmacy callbacks and prior authorizations: It’s a call you never want to get: A pharmacist is telling you that the medication you prescribed requires prior authorization, or your patient left without it after hearing the out-of-pocket cost. Real-Time Prescription Benefit shows you what the cost will be and whether prior authorization is required ahead of time.

Reduce time to therapy: With patient-specific benefit information available at the point of care, you’re more likely to make a medication decision that sticks the first time around, and patients can start therapy sooner.

Enhance the patient experience: Today’s patients want lower-priced prescription drugs: 80% of U.S. adults in a recent poll said that lowering prescription drug prices should be an “extremely important” priority for Congress. Starting the cost conversation lets patients know you share their concerns and are working to make sure they get care they can afford.

Q&A

Why do I not get a benefit response every time? Real-Time Prescription Benefit supplies patient-specific insights for more than three-quarters of U.S. patients. You may not receive a response for every patient at first. But as prescriber adoption grows, over time you can expect to see continued increases in pharmacy benefit manager and health plan coverage.
FROM THE FIELD: MADELINE’S STORY

We’ll call her Madeline: a meticulously dressed Baby Boomer who brings a wicked wit and a newspaper crossword (to be answered in pen) wherever she goes. That’s how her physician described her at a recent industry event.

During a routine appointment, Madeline told her doctor everything was fine, but her test results told a different story: Her condition had not improved as much as the doctor had hoped. He asked Madeline if she had been taking her medication as prescribed.

After a long pause, Madeline broke down in tears and said that she could not afford her medication. She’d been cutting her pills in half to make them last longer.

Madeline’s physician responded without judgment. Some patients have difficulty paying for their prescriptions, especially the one she’s on, he said. She wasn’t alone, but he was sure they could come up with a solution. He turned his laptop around and together they reviewed a list of medications that would be just as effective as the one she was currently taking, but cost less. Together, they selected a new drug that her insurance would cover, with a more affordable copay.

Although Madeline was embarrassed to share her situation, she was clearly relieved that she could be truthful with her physician, who had both the sensitivity to raise a difficult topic with respect and the tools to find an immediate solution. Madeline told him that she feels he’s someone she can trust—a true advocate for her health and wellbeing. Today, they’re both happy that she’s adhering to a new medication she can afford.

HOW REAL-TIME PRESCRIPTION BENEFIT WORKS

When selecting a medication, a prescriber performs a Real-Time Prescription Benefit check within the electronic health record’s e-prescribing workflow.

In real time, data is sent directly from the patient’s pharmacy benefit manager so the prescriber sees what the patient will pay at their choice of pharmacy.

The prescriber can also review up to five therapeutic alternatives for the selected drug, complete with cost and coverage information.

Flags for prior authorization and step therapy alert the prescriber to any requirements that might stand in the way of filling the prescription.

The prescriber and patient make a choice together, and the patient leaves confident that they’ll receive their medication at a price they can afford.