



# Preferred Patient Assistance Solutions:

## *Alternative Funding Solutions to Reduce Specialty Drug Costs*



**Specialty medications provide breakthrough, sometimes lifesaving, treatments for complex, chronic, and rare diseases—yet the cost of these drugs is often hard for self-funded plans to bear.**

Implementing alternative funding programs has become an increasingly common way to attempt to shift plan costs, sometimes with unintended consequences. Because appropriately prescribed medications are important to a member's health, outcomes can decline when access barriers, like high cost specialty drugs, exist. Employee satisfaction, engagement, and retention can decline. And finally, the loss of rebates can have a meaningful impact on the plan's net cost, undermining the actual savings. What your clients really need to tackle rising costs and risks is a thorough, multi-pronged approach that takes all these factors into consideration.

# A Thorough & Flexible Approach to Meet Clients' Unique Needs

RxBenefits specialty cost control strategy begins with RxBenefits' Protect, which includes independently managed prior authorization reviews to ensure the medical necessity and appropriateness of high-cost or frequently misused medications. In addition, RxBenefits has evaluated the alternative funding benefit administrators in the market and elected to integrate two beneficial patient assistance solutions into its preferred solution marketplace at this time. Both administrators help your plan save money by supporting your members in utilizing available drug manufacturer assistance dollars available for high-cost specialty medications. Both provide a clinically sound approach, work within the broader RxBenefits solution offering, have substantial savings potential, and provide a quality member experience relative to other market alternatives.

In keeping with its client-aligned model, **RxBenefits does not receive any fees or commissions related to implementing these solutions.\*** The company offers them simply as a service to its clients and continues to monitor the vendor landscape to identify additional right-fit solutions.

\*Note: Program fees apply.

Protect<sup>®</sup>



AMWINS | R<sup>®</sup>



SaveOnSP



## Protect<sup>®</sup> + AMWINS | Rx<sup>®</sup>

For non-ESI clients, Amwins Rx is an excellent choice. When the member attempts to fill a new prescription requiring a prior authorization, a RxBenefits clinical pharmacist conducts an unbiased review. If a prescribing question or error emerges, the RxBenefits clinical pharmacist works with the prescriber to resolve the issue. If the review shows that the proper dose of an appropriate medication was prescribed, the PA is issued and the pharmacy fills the prescription at the plan sponsor's expense, following the pharmacy benefit setup. Within the next 30 days, an Amwins Rx representative reaches out to collect required information to assist the member (or their legal guardian) in applying for need-based financial assistance. If the member qualifies and funds are available, future prescription refills are dispensed at no cost to the member. If funding isn't secured because the member does not qualify or because available dollars have been exhausted, the plan sponsor remains responsible for covering the cost of the medication, but continues to receive applicable rebates to offset the drug cost. Retaining the right to collect rebate dollars can be meaningful in managing some plans to the lowest net cost and sets this program apart from others.



## Protect<sup>®</sup> + SaveOnSP

Upon comparing available benefits, most of RxBenefits' Express Scripts clients elect to move forward with the SaveOnSP-administered copay assistance benefit, called Advantage, as it helps plans to achieve savings while keeping members supported throughout the benefit transition. When selected, SaveOnSP supports members with obtaining alternative funding for non-essential health benefit (NEHB) medications. When a member attempts to fill a NEHB medication, an unbiased RxBenefits' clinical pharmacist steps in, conducting an independent and objective prior authorization review and ensures the correct medication has been prescribed for the right reason at the proper dose. If a prescribing question or error surfaces, the RxBenefits clinician works with the prescriber to resolve the issue. If the prescription is deemed appropriate as written, the pharmacy directs the patient to SaveOnSP, where they are educated about their copay assistance benefit and learn about how to enroll in the available funding for their medication. If the member completes the manufacturer's enrollment process and allows SaveOnSP to monitor their pharmacy account on the plan's behalf, the member will receive their medication at no cost to them.

If a participating member does not qualify for any manufacturer assistance or the funds for a prescribed medication have been exhausted, the plan is responsible for the remaining balance. If members do not agree to enroll in alternative funding or refuse to have SaveOnSP monitor their pharmacy account to ensure the funding is applied accordingly, the member is responsible for the applicable coinsurance as noted on the drug list. Any payments made by the member or the drug manufacturer for these drugs will not accumulate towards the member's deductible or out-of-pocket maximum.

Yet another thing that sets the SaveOnSP-administered copay assistance benefit apart from other administrators is that if available manufacturer funding is delayed, members can begin their medication therapy via a short-fill (a courtesy fill for less than a 30-day supply) while funding is pursued with the plan responsible for any remaining balance of the short-fill. This bridge solution supports member adherence and member satisfaction.

# A Recommendation You Can Stand Behind

RxBenefits' thorough, no-cost pharmacy performance analysis will demonstrate the true savings potential for either benefit so you can make a confident selection. Leveraging historical claims data, RxBenefits' clinical and financial experts will examine your client's utilization patterns to answer critical financial, clinical, and member experience questions, and they will apply their landscape expertise to answer or advise on important considerations such as:

- What specialty medications are driving plan costs?
- How many members will be impacted by the the Advantage and Protect solutions?
- Should the plan exclude all specialty drugs or select drugs?
- What is the true potential net plan cost savings?
- What is transpiring in the market in terms of lost funding for cost-driving medications?



## Reasons to Choose RxBenefits' Protect & Preferred Patient Assistance Solutions:

When plans implement Protect and one of RxBenefits' preferred Patient Assistance solutions, we deliver:

- Uniquely balanced focus on pharmacy plan savings and member health
- Prospective reporting to audit against preferred partner savings net of rebates
- Clinical reviews for appropriateness and safety of applicable medications
- Better coordination with prescribers and members vs. other programs
- Compassionate, award-winning services with focus on first call resolution
- Coordination of warm transfers to patient assistance program reps
- Quality control over the member experience
- Retrospective outcomes reporting to audit true program savings, net of rebates

**To learn more, contact your Business Development or Account Team representative.**

We welcome the opportunity to conduct a complimentary analysis to estimate the savings an employer might see when implementing one of our preferred Patient Assistance solutions.

*Amwins Rx and SaveOnSP are independent, third-party companies and are not agents for, not joint venturers of, not employed by, and not affiliated with RxBenefits. The preferred Patient Assistance solutions described herein are subject to the terms and conditions of the applicable third party service provider. The decision to select or hire any third party service provider is at the sole discretion of the client.*