

EXECUTIVE SUMMARY

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The ePA Report is published by CoverMyMeds in consultation with an advisory board of leaders from across the industry:

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Introduction

The benefits are widely known: When a prescription prior authorization (PA) request is submitted electronically, patients, on average, get their medications faster and are more likely to adhere to their prescribed treatment.

Because of this, electronic prior authorization (ePA) has been embraced across the healthcare network: Today, nearly 100 percent of pharmacies, payers and EHRs have adopted an ePA solution.¹

Yet, despite rapid integration of ePA over the last decade, nearly half of PA request volume is still submitted through traditional channels like phone and fax.²

In the sixth installment of our ePA National Adoption Report, we expand our focus on provider adoption — examining the implications for patients' access to medications, as well as how optimization of ePA may lead to greater adoption of the solution.

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Status and Evolution

A recent case study illustrated that patients access their medications an average of **13.2 days sooner when PA requests are submitted prospectively,** at the point of prescribing, versus retrospectively, often at the pharmacy.³







20% of providers complete requests after being notified by the patient²



Only **17%** of PA requests are started at the point of prescribing²

Nevertheless, retrospective ePA volume continues to outpace prospective, suggesting providers may not be aware of the true time and cost savings available by starting a PA request at the point of prescribing.

In a recent provider survey, 60 percent reported that their practice completes PA requests retrospectively, after the pharmacy has notified them that a PA is needed, while 20 percent reported they complete requests after a patient has notified them. Only 17 percent reported that they start a PA request at the point of prescribing.²

Despite evidence that the use of an electronic solution results in faster PA determinations, 49 percent of providers reported occasionally using non-electronic methods (*i.e.*, phone and fax) to complete PA requests for certain situations.²

Understanding Administrative Burden

Providers report spending an average of two business days a week (14.9 hours) completing PA requests and **86 percent claim that the PA burden for their office is high or extremely high.**⁴



86% of providers claim the **PA burden is high or extremely high** for their office.⁴ 88% of providers feel the burden of PA has increased in the last five years.⁴ Twenty-six percent of survey respondents reported that they've seen a reduction in face-to-face time with patients, as a result of administrative work like PA, they've seen a reduction in face-to-face time with patients.²

Sixteen percent reported that they have less time to interpret lab and scan results, and 16 percent reported they experience less staff interaction. Clearly, opportunities remain to lessen the providers' administrative burden, especially within the PA process.²

Through prospective submission via an existing PA workflow, providers can get ahead of additional work that arises when PA requests accumulate at the pharmacy.

Submitting PA requests at the point-ofprescribing may result in completions up to three times faster, leaving providers more time to engage with the work they want to prioritize.⁵ Providers report spending an average of two business days a week (14.9 hours) completing PA requests.⁴

ePA and the Patient Impact

In a recent survey, **55 percent** of patients reported delays in therapy due to PA.⁶

In a different survey, 91 percent of providers reported that PA results in delayed access to necessary care, while 75 percent of respondents reported the PA process has led to patients abandoning treatment altogether.²

The utilization of an ePA solution may increase patient medication adherence by helping to ensure patients leave the pharmacy with their prescription in-hand.

Data from a large ePA vendor reveals that completing PA requests electronically has a dramatic effect on determination time versus the fax channel.

Electronic submission of PA requests results in **40% more same-day determinations** than manual (*i.e.*, fax submission).⁵

Not only can accelerated turnaround times on PA determinations affect dispense rates at the pharmacy, the improved patient perception of access to medications can also translate to a three percent greater likelihood that patients will pick up their prescriptions from the pharmacy.

Channel Effect on Determination Time⁵



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60% of specialty patients reported some difficulty receiving their first dose.⁶

ePA and Specialty **Medications**

The inherent complexity of specialty medications is compounded by timeintensive up-front processes, including PA.

In a recent patient survey, 60 percent of those currently prescribed a specialty medication reported experiencing at least some level of difficulty in obtaining their first dose.⁶

Though many providers do not view ePA as a solution for these cases, its use over traditional methods like phone and fax can reduce time to therapy significantly, from 17 days to as few as 1.5 days.⁵

Read the full Electronic Prior Authorization Report for more insights into patient challenges and solutions that can make a positive impact for the entire healthcare network.

go.covermymeds.com/epareport

To discover other ways that patients are struggling to get the medications they need, visit our 2020 Medication Access Report.

go.covermymeds.com/medicationaccessreport

SOURCES

- 1. CoverMyMeds data on file, 2019
- 2. CoverMyMeds Provider Survey, 2019
- 3. CoverMyMeds and Metro Health case study, 2016
- 4. American Medical Association Prior Authorization Survey, 2018
- 5. CoverMyMeds data on file, 2018
- 6. CoverMyMeds Patient Survey, 2019