

# Improving Prescription Decision Support with RxBenefit Clarity

CASE STUDY:

#### MARKET NEED

### Patients are encountering increasingly high prescription costs.

As high-deductible plans become more common (43 percent of Americans had one in 2017),<sup>1</sup> high prescription costs are becoming the norm for many patients. During 2017, the average out-ofpocket cost on prescription claims for patients with high deductibles was \$270, compared to \$29 for those with copayments.<sup>2</sup>

# O2 High costs can lead to abandoned prescriptions, endangering patient health.

When cost exceeds \$125 per script, 52 percent of patients abandon their prescriptions. Above \$250, the abandonment rate increases to 69 percent.<sup>2</sup> In 2018 alone, an estimated 140 million prescriptions were abandoned,<sup>3,4</sup> contributing to nearly 125,000 potentially avoidable deaths.

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## Providers often lack the information necessary to discuss costs with patients.

Only half of providers say they can access formulary tier info when prescribing, and only a third see out-of-pocket costs.<sup>6</sup> Moreover, they don't trust the information they get: providers rate their trust in formulary data at only 5.7 out of 10.<sup>7</sup>

### **HOW IT WORKS**

## RxBenefit Clarity enables instantaneous transparency on cost, the moment a prescription is written.

Powered by an integrated, real-time benefit check solution, RxBenefit Clarity<sup>™</sup> lets prescribers see what patients will pay for medication as it's prescribed — so there are fewer surprises at the pharmacy.

Developed by CoverMyMeds and RelayHealth, RxBenefit Clarity, leverages an open network of EHR systems, pharmacies and health plans to collect and validate patient-specific benefit information. This custom patient profile is then used to accurately predict costs that may include the following:



As a result, RxBenefit Clarity arms providers with the best price for their patient's medication.

### RESULTS

In March 2018, CoverMyMeds partnered with a leading EHR system to launch RxBenefit Clarity. Servicing a network of over 120,000 providers, RxBenefit Clarity has been used to generate over 108 million transactions, helping millions of patients make more informed decisions about their prescriptions.



#### Patient pay amount returned was 97 percent accurate,

helping increase providers' confidence when speaking with a patient about costs.



Patients whose providers used RxBenefit Clarity were **19 percent more adherent to picking up their medications** compared to those without it. RxBenefit Clarity displayed cheaper alternatives in 2.5 million transactions, helping providers give more options to their patients.



Same day pick-up for prescriptions was available for 84 percent of RxBenefit Clarity transactions; 61 percent were available within one hour, decreasing time-to-therapy and identifying restrictions early.



Providers ran an average of four transactions during a single patient visit, demonstrating actionable decision-support for patients and providers at the point of prescribing.

### **OTHER IMPROVEMENTS**



#### **Network Growth and Optimization**

CoverMyMeds has continued to improve the response rate of RxBenefit Clarity through partnerships with top pharmacy retailers and payers. The program has also seen several technical enhancements, including dispense history and benefit eligibility completion through the selected pharmacy.



#### **Response Rate Improvement**

Through these efforts, the RxBenefit Clarity response rate has improved by 26 percentage points between March 2018 and January 2019.



#### Additional Features

Additional optimizations that help increase transparency — including cash price outside of insurance — are available within the solution but were not implemented within this EHR system at the time of the study.

#### SOURCES

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