Help preserve prescriber choice by including patient savings offers in the EHR:

As the adoption of price transparency expands, so does the need to provide in-EHR brand savings information

*To better understand prescribers' attitudes and preferences regarding patient price transparency and real-time access to patient savings, ConnectiveRx conducted in-depth interviews with primary care and specialty prescribers. Results suggest that the question for marketers is no longer "**Should** I deliver brand patient savings information to HCPs and their patients in prescribing workflow?" but rather "**How** should I deliver patient savings information to HCPs and their patients in prescribing workflow?"*

Key findings:

1. **Generally, prescribers consider in-EHR price transparency to be a helpful service**

2. **Prescribers rate the importance of in-EHR display of net patient OOP cost at 6 on a 7-point scale**

3. **Respondents want easy ways to pass savings offers to patients and pharmacies**

Introduction

The move toward drug price transparency is real and growing. PBMs and EHR providers are working at breakneck speed to display patient-specific prescription drug coverage and pricing information in the e-prescribing module of the prescriber EHR. This type of technology is known by many names: real time benefit check (RTBC, the term used widely in this paper), real-time prescription benefit, real-time benefits, benefits check, etc. Regardless of the name, price transparency is spreading quickly. Surescripts reports that EHRs serving 80% of prescribers have signed on to offer RTBC information. 2018 saw a 40-fold increase in the number of prescribers using RTBC, and prescribers have used an RTBC tool to view patient-specific prices more than 41 million times. At this point, at least 76% of U.S. covered lives are currently reached with RTBC.

Not surprisingly, early feedback from PBMs suggests that the availability of RTBC information in the EHR is driving a switch to lower cost alternative medications. A recent report from CVS Health indicates that among physicians using RTBC, when a prescriber's first-choice drug isn't covered by the plan, he or she switches to a covered medication 75% of the time. Furthermore, for prescriptions written by physicians using RTBC, when a lower-cost preferred alternative is presented, physicians switch to the lower-cost alternative 40% of the time.

Fortunately, brand teams have multiple channels through which to provide information about available patient savings that can help HCPs have *full transparency* into the drug prices their eligible patients are likely to pay. These channels include physical or web-sourced copay cards, hub portals, and in-EHR display of patient savings offers.

In order to assess prescribers' opinions regarding the ideal integration of brand savings information into the EHR, ConnectiveRx recently conducted 45-minute, in-depth telephone and web-based interviews with 26 primary care and specialty prescribers. To be eligible, respondents confirmed that they e-prescribe personally and use or recommend brand savings

programs. The research sought prescribers' attitudes and preferences regarding the display of both payer-provided drug price information and manufacturer-provided patient savings offers in the e-prescribing module of the EHR. In addition, we asked for prescribers' recommendations on the ideal integration of patient savings offers within the EHR (e.g., position, timing, frequency, content). Key objectives:

- Determine how prescribers will use RTBC information
- Identify how and where prescribers prefer to access patient savings (within RTBC screen, in the eRx module)
- Pinpoint the most valuable types of savings information

Key Finding #1: Generally, prescribers consider in-EHR price transparency to be a helpful service

Research participants report a high degree of interest in having easy, in-workflow access to RTBC. Overall, prescribers expect RTBC to "streamline" prescribing, leading to fewer call backs. They believe RTBC is likely to influence prescribing where:

- An affordability problem exists with the drug of choice

- Alternatives are significantly cheaper, with similar efficacy
- A prior authorization (PA) is required for the selected medication, but not for an alternative (a link to an electronic PA offsets this for a few)

The most likely use of RTBC data is to check patient-specific prices when initiating new therapy or adding/changing an existing medication. When renewing a prescription, prescribers are likely to use RTBC information only when 1) the patient has expressed affordability concerns, or 2) the patient is present with the prescriber when the renewal takes place.

In addition, some respondents mentioned a few concerns regarding RTBC:

- The extra time or extra steps required to view and act on the information
- The fact that the information is presented after the initial prescribing decision has been made

The survey respondents also provided valuable insights regarding RTBC best practices (Figure 1), including the expectation that the stated out-of-pocket cost automatically includes brand savings offers.

Figure 1: Prescriber insights on communicating patient savings information

Brand savings	Many expect the out-of-pocket price automatically includes available brand savings offers. Qualify as necessary; include savings where possible.
Out-of-pocket accuracy	Despite experiences to date, most expect and require a high level of accuracy. Accuracy should be qualified, if necessary, to inform prescribers.
Alternatives	Most want to see medications in same class. Including other classes can frustrate in certain cases; occasionally acceptable if the medication is perceived as having similar efficacy.
Significant price changes	Since prescribers are less likely to access pricing for renewals, consider an upfront note where prices have changed significantly since last Rx.
Temporary pricing	Most want to be notified in the RTBC page where pricing for chronic medication is temporary (e.g., temporarily high due to deductible).

Key Finding #2: Prescribers rate the importance of in-EHR display of net patient OOP cost at 6 on a 7-point scale

As noted in the introduction, manufacturers can educate prescribers about available patient savings in multiple channels, including the EHR. Ideally, prescribers would like this information displayed during the e-Prescribing process and placed near any RTBC information. We asked our survey participants several questions about the opportunity to see such "real time patient savings" information in the EHR.

Most respondents saw the potential availability of

in-EHR patient savings information as positive, helpful, and time saving. In fact, they believe it is important to include patient savings information in RTBC, rating it at 6 on a 7-point scale (see Figure 2).

Taken together, if brand savings offers were displayed in the RTBC screen, at least 75% of survey participants would be more likely to:

- Mention the coupon to the patient
- Remind the patient to use the coupon
- Send the coupon with the eRx if available

Key verbatim participant comments:

> "Without it (savings information) pricing information is incomplete. If I'm going to look at the price, I've got to have the accurate price net of relevant savings programs, otherwise why would I bother looking?"
>
> – Endocrinologist

> "…you don't have to navigate to a different site…it's going to streamline... and make prescribing more efficient"
>
> – Gastroenterologist

> "I would love that. You can tell the patient the bottom line – what is the cost to you, all savings included"
>
> – Endocrinologist

Our previous research and extensive experience suggest that the in-EHR display of savings offers will not necessarily reduce the rate of generic prescriptions. On the contrary, in other ConnectiveRx research, most prescribers indicated that they clearly consider medication affordability when they prescribe, and favor generic medications whenever they are appropriate for the patient. They typically consider branded, single-source medications only when generic medications are not suitable for a given patient. But for those patients who need branded medications, the provision of patient savings information in the EHR may help preserve prescriber choice.

It is important to note that some prescribers also had a few concerns regarding in-EHR patient savings, chiefly regarding the possible complication of patient discussions. This suggests that prescribers may be selective regarding the type of patient with whom (or when) they will discuss drug costs.

Key Finding #3: Respondents want easy ways to pass savings offers to patients and pharmacies

We asked survey participants to identify their ideas for best practices regarding how to add brand savings information into the EHR. They made several excellent suggestions, as shown in Figure 3. Two of these recommendations are of particular note, since they affect patients directly. The first is labeled "Distribution to patient," and focuses on the idea that prescribers should be able use the EHR to deliver patient savings offers to patients via print or electronic media (or both). The second, labeled "Send to pharmacy," suggests that the savings coupon should be sent with the eRx directly to the pharmacy, giving the prescriber a high level of confidence that the savings would be applied.

Figure 2: The importance of patient savings in the EHR rated 6.1 on a scale of 1 to 7

How important is it that patient savings from manufacturers are included in RTBC?	
7	It is vital information, without current savings offers, pricing information is incomplete
6	**It is important to be included**
5	I would like it included if possible
4	Neutral regarding whether it is included or not
3	It is not really necessary, no need to include it
2	I don't want it, it could be a distraction
1	Keep it out, it is a definite distraction

Figure 3: Prescriber insights on communicating patient savings information

Expectations and considerations	
Distribution to patient	Most prefer print over electronic only so patient has a coupon in hand when they leave the office. Some would like both distribution options.
Send to pharmacy	Most would like to send the coupon with the eRx directly to the pharmacy, with a high level of confidence that the savings would be applied.
Savings offer	Prescribers expect any offer shown to be available to that specific patient. Including offer detail (max, expiry, eligibility) in simple form is vital: a tabular format was well received. Some prescribers expect the headline offer (e.g., PNMT) to reflect net OOP for patient.
Offer placement	Most expect and want an offer (e.g., coupon and/or offer detail) to correspond to the drug next to which it is placed. Placing an offer for a different medication next to the selected medication on the pricing page can lead to confusion and, for some, a negative perception of the underlying brand.
OOP	Ideally, prescribers want to see OOP with and without savings. If only one price is possible, most want patient's OOP with brand savings.
OOP in high deductible period	Where a high deductible temporarily limits the impact of a savings program, some prescribers want a notification that OOP would fall once the deductible is met.
Selective coupon disclosure	Ideally, most prescribers want offers to be presented for all the medications on the pricing page, with an offer on the selected medication considered the most important. Where no coupon is displayed for the selected drug, many prescribers would assume, sometimes wrongly, no coupon is available for the patient.

Discussion

Prescribers want RTBC to tell the complete story, including the in-EHR display of patient savings offers that help preserve prescriber choice when they believe a branded medication is the best option for a patient. Prescribers want to see clear descriptions of patient savings offers so that they and their patients have a seamless and positive experience.

Based on the results of this survey, we recommend 4 steps to help prescribers preserve their first choice when e-prescribing:

1. Keep a close eye on trends in RTBC. Payers and PBMs will continue to press for more formulary-supportive price transparency.

2. Work with your copay program provider to get your offer delivered in EHRs. Your market share can benefit significantly when prescribers can continue to select their first-choice medications for appropriate patients.

3. Continue to look for increasingly effective ways to let prescribers and patients see and access your offer in the EHR. Savvy brand managers will take advantage of opportunities to both inform the prescriber and deliver personalized savings offers to the patient via print, via the patient portal, via TEXT/SMS, and via direct delivery to the pharmacy.

4. Contact ConnectiveRx to learn more.

For more information, please visit ConnectiveRx.com