Q1 2024 PROGRESS REPORT

Digital Intake for Specialty Drug Support Programs

AssistRx

Table of Contents

Forward

In this progress report, AssistRx shares our insights gained over the past year about the current state of patient support programs in the specialty pharmaceutical space. Specifically, we'll discuss how the industry has turned to digital intake to eliminate manual processes, enable access services at the point of prescription and throughout the therapy journey, and ultimately support better health outcomes.

Here, we'll define digital intake, explore the components to achieving true digital intake and share how life sciences organizations are finding success in applying this method to their patient support programs.

Defining Digital Intake

As more life sciences organizations endeavor to adopt new technologies that will pull their patient support programs into the future, they face complicated and often conflicting definitions of available technology and their capabilities.

As an emerging strategy, digital intake and associated terms like tech-first are often confused or misrepresented. To ensure our industry can work toward our common goal of improving patient outcomes, it is imperative to align on the definition of "tech-first." We must also align on our understanding of digital intake as a strategy.

In this section, you will:

- Develop an understanding of how digital intake and tech-first solutions can ensure differentiation in the market.
- Explore how tech-first solutions impact patients and healthcare providers.
- Review specific examples of the products that would benefit from digital hubs utilizing a digital intake strategy and tech-first support services.

ARTICLE

Five Ways Tech Can Transform Your Program Delivery

All specialty pharmaceutical stakeholders have seen patient support programs evolving alongside the industry's growing adoption of technology. This transition is accelerated by market entrants, an increasingly digital society and, most influentially, competition.

Eighty-four novel active substances (NASs) were launched globally in 2021—twice the launches in 2016. Of the 72 NASs launched in the U.S. in 2021, more than 60% received first-in-class designation by the Food & Drug Administration (FDA). The number of drugs at the human clinical trial phase globally exceeds 6,000, up 68% from 2016. Emerging biopharma companies (EBPs) are behind 65% of molecules in research and development (R&D) and half the NASs launched in the U.S. in 2021.

There are more EBPs entering the market, higher R&D investment in new drugs, growing NASs and a coming boom of biosimilars and generics. As such, life sciences organizations should be assessing their patient support programs to ensure differentiation in the market today and tomorrow.

> *Life sciences organizations should be assessing their patient support programs to ensure differentiation in the market today and tomorrow.*

Here are five ways tech can transform your program delivery and differentiate your product:

1. Digital Intake with Auto-Triggered e-Services

To transform program delivery, your patient support program should be able to intake the prescription where the HCP is (e.g., fax, EHR) and automatically trigger therapy initiation Advanced eServices. Additionally, the prescription should be able to be triaged without having to contact the HCP or patient for additional information. This can be done with a partner that is a covered entity and offers the right technology.

For example, AssistRx's technology-driven access and fulfillment solution, CoAssist, can intake an e-prescription from the EHR, automatically triggering Advanced eServices to speed access to therapy. Our proprietary Advanced eServices include e-Consent, Advanced Benefit Verification (ABV), Advanced Prior Authorization (APA), e-Enrollment, Financial Assistance Access (i.e., e-Copay and e-PAP) and Patient Services Access. Leveraging direct connectivity to payers/PBMs and other data sources, AssistRx solutions deliver comprehensive patient coverage information in under 15 seconds using five patient identifiers, as well as PA decisions in minutes.

> *To transform program delivery, your patient support program should be able to intake the prescription where the HCP is (e.g., fax, EHR) and automatically trigger therapy initiation Advanced eServices.*

2. Patient Coverage and Affordability Options at the Point of Prescription

A recent study found only 21% of physicians accurately estimated patients' out-of-pocket (OOP) drug costs, even when presented with the drug's price and patient's coverage. This underscores the need for comprehendible price transparency, payer access requirements and affordability program options at the point of prescription.

Technology like ABV can transform your program and differentiate your product by empowering HCPs with comprehensive patient coverage results at the point of prescription. ABV goes beyond other e-BV solutions to include payer/PBM name and type; employer; BIN and PCN; member ID, group ID, relationship; effective/termination dates; deductible amount, remaining and exemptions; patient OOP cost maximum, minimum and remaining; formulary tier status; drug access restrictions and coverage notifications. ABV not only facilitates more accurate financial conversations, but also alerts the HCP and patient to required next steps like a PA.

> *This underscores the need for comprehensive price transparency, payer access requirements and affordability program options at the point of prescription.*

> *[Advanced Clinical Documentation] provides the patient's full care team with visibility to treatment plan, current medications, lab test results, etc. This technology can transform your program by creating more informed decisions and improved outcomes.*

3. Immediate Access to Comprehensive Patient Clinical Summary Data

Our industry is rife with siloed EHRs, one-off platforms, and vendors that cannot or will not integrate with others. This can delay therapy initiation and foster poor HCP and patient experiences.

Using technology like AssistRx's Advanced Clinical Documentation solution empowers stakeholders with access to richer, relevant patient information. Powered by integrations with leading healthcare data exchange providers, this real-time solution provides the patient's full care team with visibility to treatment plan, current medications, lab test results, etc. This technology can transform your program by creating more informed decisions and improved outcomes.

4. End-to-End e-Pap with Automated Re-Enrollment

Complementing ABV is the need for real-time electronic PAP and Copay solutions. These solutions should be delivered in real-time and modularly to meet patients and HCPs where they are and at their time of need.

Beyond screening and enrollment, an end-to-end e-PAP solution should facilitate differentiated experiences by capturing all information in one workflow and performing enrollment in real-time. Further, all e-PAP solutions including a non-commercial pharmacy for dispense should be housed under one roof to accelerate fulfillment.

e-PAP technology should also deliver ongoing PAP audits to identify patients who've obtained coverage and transition them to paid-for scripts. ABV can also be leveraged to achieve this. For example, AssistRx saved one client $2 million by leveraging ABV for automated batch re-enrollment and transitioning patients who received coverage to commercial script.

> *[e-PAP and Copay] solutions should be delivered in real-time and modularly to meet patients and HCPs where they are and at their time of need.*

5. Stratified, Omnichannel Delivery of Patient Support

Education and adherence are critical to differentiating your product. A stratified approach through targeted touchpoints and omnichannel delivery yields the highest impact. With so many varying adherence risk levels, communication preferences, and scenarios like disease progression, your technology must be able to seamlessly evolve.

Some patients prefer communications through text, whereas others prefer phone calls. Some programs may require shifting communications from a caregiver to a patient over time. Regardless of scenario, your adherence technology can best transform your program if it can reach multiple stakeholders through multiple channels at multiple times.

Technology can only transform your program when designed and deployed in the right way for your product. This requires a patient solutions partner that has both the technology capability and expertise to create tailored, nimble patient support programs. Implementing these solutions now can not only differentiate your product from current drugs on the market, but also the coming onslaught of competitors.

> *Your adherence technology can best transform your program if it can reach multiple stakeholders through multiple channels at multiple times.*

ARTICLE

What a Technology-First Approach Really Means for Your Patient Support Program

One in five patients reports doing their taxes is less painful than managing their healthcare.

The healthcare space—specifically, the specialty space—is rife with manual processes, siloed systems, and other challenges that prevent timely patient access to care. Fortunately, there have been significant advancements in healthcare technology that accelerate access and improve treatment outcomes. The right partner can help life sciences organizations deliver a technology-first approach to drive differentiated experiences for your patients and healthcare providers (HCPs).

What is a technology-first patient support program? It depends on who you ask. To understand what a technology-first approach is and what it means for your patient support program, we must first understand the difference between "technology-first" and "technology-enabled."

Defining Technology-Enabled Versus Technology-First

Many patient support programs deploy technology-enabled solutions in some capacity, like electronic benefit verification (e-BV) or digitized enrollment. However, leveraging technology-enabled solutions does not mean the program is a technology-first program. So, what's the difference?

The real differentiator lies in the ability to automate the process with technology, versus relying on human intervention to prop up technology.

For example, some patient support providers generate electronic benefit coverage via test claims, whereas AssistRx uses Advanced Benefit Verification (ABV), a technology-first approach that leverages direct connectivity with payers to provide immediate and comprehensive patient coverage results.

> *The real differentiator [between tech-enabled and technology-first solutions] lies in the ability to automate the process with technology, versus relying on human intervention to prop up technology.*

Some solutions utilize digital forms for prior authorization (PA) completion. AssistRx utilizes Advanced Prior Authorization (APA), which returns the appropriate patient plan- and product-specific PA question set, enabling real-time PA submission with payer/PBM decisions returned in minutes.

Finally, true technology-first clinical support encompasses not only virtual visits, but also automated appointment scheduling and reporting. Often, scheduling and tracking is manually managed by agents, resulting in inconsistent, incomplete and non-standardizable data. A true technology-first option like AssistRx's Advanced Clinical Education (ACE) solution integrates with the CRM to facilitate a full view of the patient case.

A technology-first program is commonly referred to as a digital hub. A true digital hub can integrate technology into all patient support services, leaving only the most complicated or high-touch cases to be supplemented with talent. This requires the digital hub provider to not only have interoperable technology, but also to ingest, analyze, action and share data with all parties necessary to facilitate technology-first support.

> *A true digital hub can integrate technology into all patient support services, leaving only the most complicated or high-touch cases to be supplemented with talent.*

> *Digital hubs support HCPs by solving for portal fatigue and automating traditionally burdensome manual processes.*

What a Technology-First Approach Means for HCPs

Digital hubs support HCPs by solving for portal fatigue and automating traditionally burdensome manual processes. By digitally intaking the prescription from the EHR, triggering solutions like ABV, APA and other eServices, and triaging a full enrollment package to the pharmacy—all in one place, digital hubs speed access and streamline workflows. For the HCP, this means nearly all their therapy initiation tasks are completed electronically in the background. They only need to intervene to prescribe, initiate the PA, support an especially complex case or if they prefer manual methods.

Increase in speed to therapy using AssistRx's technology-first therapy initiation solutions

Patient enrollments starting technology-first with "text to enroll" campaign

Decrease in missing information for enrollments within 30 days

What a Technology-First Approach Means for Patients

Digital hubs support patients by improving speed to therapy. What typically takes weeks can be completed in days. For example, AssistRx's technology-first therapy initiation solutions accelerated speed to therapy by 45%.

Using a technology-first approach also enables patients to take ownership of their health. An example of this approach is the AssistRx "text to enroll" campaign. AssistRx launched electronic enrollment for one client and leveraged a texting campaign for patients to "text to enroll". Within 30 days, 50% of enrollments started technology first, and the missing information rate for enrollments dropped by 61%.

> *Life sciences organizations need a partner that understands how to strike the right balance of technology and talent based on the nuances of the product.*

Talent: The Complement to a Technology-First Approach

All program types can benefit from a technology-first approach. However, in today's complex healthcare environment, a life sciences organization's digital hub program cannot, and should not, be 100% digital. There are HCPs and patients who require or prefer manual interventions at some point in their journey. Thus, life sciences organizations need a partner that understands how to strike the right balance of technology and talent based on the nuances of the product.

The optimal partner will also have experience stratifying patient/HCP populations to deliver the right technology, at the right time, through the right delivery method.

To create differentiated patient and HCP experiences, today's life sciences organizations need to go beyond technology-enabled and embrace technology-first approaches. A true digital hub should streamline the process for your HCPs, speed access to therapy for your patients, and drive efficiencies within your program.

ARTICLE

What Is a Digital Hub In 2023?

The healthcare space is adopting and even requiring the digital processes that organizations have been driving the industry toward for over a decade. Regulators continue to emphasize innovation in healthcare, especially digital requirements for e-prescriptions, e-prior authorizations (e-PAs), and other technology-first methods.

The Centers for Medicare and Medicaid Services (CMS) continues to advance its interoperability goals and address process challenges related to e-prescribing and PAs. Proposed rule CMS-0057-P would require impacted payers to improve the electronic exchange of healthcare data and streamline PA processes.

Additionally, CMS continues to implement a provision of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act that requires e-prescribing of controlled substances under Medicare Part D. Further, a recent Biden Administration proposal would implement e-PAs for several government insurer plans by 2026, as well as require payers and states to streamline PA processes and improve the electronic exchange of data. It also contains incentives for hospitals and physicians to adopt e-PAs.

While these regulatory changes will force many in the industry to adopt digital methods, the specialty pharmaceutical space may never fully transition to digital-only processes. Some may argue that the level of human intervention may always be needed, due to the complex nature of specialty product support. However, technology advancements within the space demonstrate that specialty is ready to embrace technology-first programs, or digital hubs. As noted ahead, the definition of a digital hub varies greatly by stakeholder.

Some may think a digital hub is:

- A collection of technology-enabled solutions.
- Automation when possible.
- Electronic solutions available via web, app, etc.
- Human intervention in the backend.

But what a digital hub actually provides is much more specific. The source of confusion over the definition of a digital hub can be attributed to the uncertainty between "technology-first" and "technology-enabled" patient support programs. The first step to understanding a digital hub in 2023 is to identify how these two types of programs differ.

Understanding technology-first and technology-enabled solutions

Many patient support programs deploy technology-enabled solutions in some capacity, like electronic benefit verification (e-BV) or digitized enrollment. However, leveraging technology-enabled solutions does not mean the program is a technology-first program. The difference lies in the ability to automate the process with technology, versus relying on human intervention in the backend to prop it up.

For example, some patient support providers generate electronic benefit coverage via a combination of e-BV and phone calls to the payer, whereas technology-first approaches leverage direct connectivity with payers/pharmacy benefit managers (PBMs) to return comprehensive patient coverage results in real-time. Some providers utilize digital forms for PA completion. Technology-first PAs return the appropriate patient plan- and product-specific PA question set for completion and submission to the payer/PBM, with decisions returned in minutes.

A digital hub provider possesses two qualities:

1. The ability to integrate technology into all patient support services, fully automating the process, versus relying on human intervention to prop up technology.
2. A strategic choice to deliver services with a technology-first approach. This means every step of the patient journey that can be completed in an electronic, automated fashion begins and ends with technology.

Patient support providers that can deliver a digital hub must have advanced, interoperable technology, as well as an agnostic stance and willingness to integrate with all parties necessary to facilitate technology-first patient support.

Digital Hub Providers

Integrate technology into all patient support services, fully automating the process.

Complete every step of the patient journey in an electronic, automated fashion that begins and ends with technology.

Which products benefit from a digital hub?

Products that benefit most from a digital hub typically have some of the following characteristics:

- Pharmacy benefit product at a stage in its product lifecycle in which most processes can be digital and automated.
- Low wholesale acquisition cost (WAC) product unable to afford high-touch, full-time equivalent (FTE)-enabled specialty services or product approaching the loss of exclusivity (LOE) cliff.
- Technology-savvy HCP population that is familiar with specialty drug processes.
- Highly motivated, technology-savvy, and cognitively and physically able patient/caregiver population.
- A payer mix of payers/PBMs with electronic capabilities.
- Formulary position that does not require significant step edits and PA hurdles.

These products require little to no human intervention to maintain prescription journey momentum. Services can be completed in an automated fashion due to electronic connectivity and available data. Further, data required to make informed decisions, such as patient coverage information and PA requirements, can be returned with high accuracy through integrations, or direct connectivity, with the source.

It's important to note that the technology is only as good as the design. Digital hub program effectiveness depends on deploying the right technology at the right time and through the right delivery method. It's critical that the digital hub vendor knows when and where to incorporate technology and talent not only throughout the product's current therapy journey, but also as processes evolve along the drug's lifecycle.

For example, a high-volume, mid-lifecycle pharmacy benefit product with short PA approval periods would benefit from a technology-first (digital hub) approach, while a first-to-market, buy-and-bill product would need talent-enabled support at launch. However, a strong patient support program vendor supporting this high-volume pharmacy benefit product would likely have implemented tech- and talent-enabled support at launch to support HCPs with navigating payer hurdles and to drive perceived access. Talent would have also been leveraged to improve payer coverage by deploying payer-targeted product demand and clinical effectiveness call campaigns, and to evaluate when the program was ready to incorporate additional technology-first solutions.

Products that best benefit from a digital hub strategy usually share some of these characteristics

Pharmacy benefit product in a stage of its lifecycle when most processes can be digital and automated.

Low WAC or approaching LOE cliff.

Technology-savvy HCP population.

Highly-motivated, tech-savvy patient population.

Payer mix with electronic capabilities.

Formulary position without significant step-edits or PA hurdles.

How digital hubs impact patient and HCP experiences

Today, more than half of HCPs under the age of 55 experience emotional distress and burnout in some part, due to the administrative burdens they face to ensure patient access. This realization underscores the need for digital hubs to support HCPs with simplified, automated processes. For example, digital hubs can incorporate a digital intake process that enables triggered Advanced eServices at the point of e-prescription intake from the electronic health record/electronic medical record (EHR/EMR). This process automates and accelerates the therapy initiation process, while meeting HCPs where they are.

Digital hubs can support patients with managing their healthcare too, as many of today's patients are familiar with digital processes. A recent survey reported that 80% of respondents have used telemedicine within their lifetime, and it's now the preferred channel for receiving prescriptions and care for some conditions. To meet patients where they are, digital hubs can incorporate omnichannel strategies, such as branded engagement websites, chatbots, and automated communications like text and email.

However, these strategies must be designed and deployed in the right way for the product. A stratified, omnichannel approach based on patient segmentation yields the best results, as patients can self-serve, engage with the brand through a variety of channels and do so at their convenience.

Further, digital hubs should stratify patient populations based on adherence risk to deliver tailored technology-first and talent-enabled adherence solutions based on the patient's risk profile and communication preferences.

HCP segmentation is needed for a successful program, too. It is essential for digital hubs to not only stratify HCP populations to meet them in their workflow, but also to identify which offices require additional support. For example, a PA denial due to a missing letter of medical necessity (LMN) for a less-technology savvy office would trigger a different follow-up task than a technology-savvy office that receives a PA denial for the same reason. The first office would receive a triggered fax containing the appropriate template LMN. The second office would receive a triggered email containing a tokenized hyperlink to complete the LMN/e-appeal.

Delivering differentiated experiences with a digital hub

Digital hubs can create tailored technology-first experiences for program stakeholders that differentiate the program in a competitive market. To remain competitive, program design must evolve with the product lifecycle, HCP technology adoption, and patient life stage/disease progression. Let's review a few examples.

Example one

- Technology-enabled solution: Electronic benefit coverage results generated via e-eligibility or test claims.
- What a technology-first approach would look like: A solution that delivers comprehensive electronic benefit coverage results generated via direct connectivity with payers/PBMs and other data sources.
- How this technology-first approach differentiates a program: Provides accurate and comprehensive coverage results in under 15 seconds.

Example two

- Technology-enabled solution: Digital presentation of a PA form submitted to the payer/PBM through e-fax.
- What a technology-first approach would look like: An end-to-end e-PA solution that generates the digital product- and patient plan-specific PA question set, facilitates real-time submission to the payer/PBM through direct connectivity, and returns PA decisions within minutes through this same connectivity.
- How this technology-first approach differentiates a program: Enables real-time e-PA generation and submission directly to the payer/PBM to accelerate the process and create informed decisions.

Example three

- Technology-enabled solution: Virtual clinical visits with online appointment scheduling that are manually managed by call center agents on the backend.
- What a technology-first approach would look like: A clinical solution that integrates with the customer relationship management (CRM), providing automated appointment scheduling and reporting, as well as a secure channel for virtual visits.
- How this technology-first approach differentiates a program: Facilitates a full view of the patient case while delivering true technology-first patient support.

The key to a digital hub program that delivers differentiated patient and HCP experiences is the right balance of tech plus talent. By selecting a partner that implements a tailored, technology-first approach, supported by human know-how when appropriate, one can provide a digital experience for your program that increases patient uptake, facilitates greater visibility, and improves treatment outcomes.

Digital Hub Examples

	Technology-enabled solution:	What a technology first approach would look like:	How this technology-first approach differentiates a program:
EXAMPLE 1	Electronic benefit coverage results generated via e-eligibility or test claims.	A solution that delivers comprehensive electronic benefit coverage results generated via direct connectivity with payers/PBMs and other data sources.	Provides accurate and comprehensive coverage results in under 15 seconds.
EXAMPLE 2	Digital presentation of a PA form submitted to the payer/PBM through e-fax.	An end-to-end e-PA solution that generates the digital product- and patient plan-specific PA question set, facilitates real-time submission to the payer/PBM through direct connectivity, and returns PA decisions within minutes through this same connectivity	Enables real-time e-PA generation and submission directly to the payer/PBM to accelerate the process and create informed decisions.
EXAMPLE 3	Virtual clinical visits with online appointment scheduling that are managed by call center agents on the backend.	A clinical solution that integrates with the customer relationship management (CRM), providing automated appointment scheduling and reporting, as well as a secure channel for virtual visits.	Facilitates a full view of the patient case while delivering true technology-first patient support.

With an understanding of digital intake as an approach that uses tech-first solutions to digitize and automate traditionally manual processes, now we'll explore the specific components of digital intake strategies.

Components to Achieving Digital Intake

Achieving a digital intake strategy requires further knowledge of the individual tech-first solutions involved, as well as a consultative partner with the expertise to determine when talent is necessary to complement tech.

This section explores the specific elements of implementing a digital intake strategy.

In this section, you will:

- Compare artificial intelligence (AI) and data connectivity methods for delivering real-time benefit verifications.
- Learn about the back-end technology that powers the rapid implementation and scale of digital intake strategies.
- Uncover where in the product lifecycle technology makes the biggest impact.
- Explore how tech-first solutions can optimize patient assistance programs (PAPs).
- Take a closer look at how interoperability is shaping the industry's approach to patient access.

ARTICLE

The Pulse of Electronic Benefit Verification Solutions: Know the Facts

Improving price transparency for patients and healthcare providers (HCPs) is a constant priority for life sciences organizations. Unfortunately, only eight percent of prescribers report that it's somewhat or very easy to access patients' out-of-pocket (OOP) costs.

Further, only 21% of HCPs can accurately estimate a patient's OOP drug cost when given all necessary information about product price and patient plan. This signifies that HCPs are looking to life sciences organizations to deliver benefit coverage information not only in an accurate and timely manner, but also in an easily comprehendible format.

Patient support providers (vendors) often generate electronic benefit coverage information via AI or direct/data connectivity. Here is a pulse of how each method is used in benefit verifications (BVs) today and how they can impact your program.

Artificial Intelligence – Pharmacy and Medical Benefit

AI is the theory/development of systems that perform tasks normally requiring human intelligence. Using algorithms, AI can deliver accurate information, but it requires a significant amount of historical data to do so. The pros, cons and use cases for performing electronic BVs via AI are reviewed on the next page.

Direct Connectivity – Pharmacy Benefit

Unlike AI, direct connectivity uses application programming interfaces (APIs), so multiple systems can exchange information in real time. Using APIs, vendors can connect directly to payers/PBMs, clearinghouses and other data sources to gain coverage information. The pros, cons and use cases for performing electronic BVs via direct connectivity are reviewed on the next page.

Data Connectivity – Medical Benefit

For medical benefit products, vendors should leverage electronic Medical BV (e-MedBV). While medical benefit information is less digitally accessible than pharmacy benefit information, real-time data connectivity is still a more accurate method than algorithmic conjecture.

	Artificial Intelligence – Pharmacy and Medical Benefit	Direct Connectivity – Pharmacy Benefit	Data Connectivity – Medical Benefit
PROS	• Delivers immediate information. • Automates repetitive tasks. • Identifies and predicts trends to create personalized communications.	• Delivers accurate data directly from the source and in real time. • Returns patient coverage, OOP cost, drug access restrictions (e.g., step edits), coverage alerts (e.g., age limit), fill options, for-mulary status, employer and more. • Generates product-, plan- and patient-level prior authorization (PA) information, including whether a PA is required and whether the patient has an active PA on file. • Provides monitoring and reporting, improving continuity of care.	• Delivers accurate data directly from the source and in real time. • Immediate, accurate coverage information reduces risk for the HCP office. • Returns payer/plan name and type; member ID; group ID; relationship; effective and termination dates; family/individual deductible, year to date, per year and remaining; and family/individual OOP, year to date, per year and remaining.
CONS	• Predictions are based on historical data, not real-time data. • May produce skewed results if product- and patient-specific coverage trends have recently changed. • Not effective at delivering accurate and comprehensive information in instances with sparce historical data and/or current digital data. • Many technologies are misrepresented as AI.	• Requires significant reach among data sources to deliver accurate and comprehensive information. • Not all payers have electronic connectivity; thus, manual intervention may be needed. • Many electronic BV/Real-time Benefit Check (RTBC) solutions only offer plan-level data, not patient-level data. • Most electronic RTBC solutions show the HCP alternatives to the prescribed medication.	• Not all payers and data sources have electronic capabilities for medical benefit products; thus, some manual intervention may be needed. • Leveraging multiple data sources is key.
USE CASES	• AI's conjectural nature hinders its ability to provide accurate product- and patient-specific coverage information. Thus, it's more effectively applied in situations that do not require comprehensive and precise information (e.g., adherence solutions). • AI can support you in tailoring your patient adherence strategy at the individual level, and can even evolve with your patients throughout their journey.	• HCPs can self-serve to obtain patient coverage information in real time via channels including specialty therapy initiation platforms, HCP engagement websites or as widgets on the brand's existing website. You should seek a partner that can place ownership of this technology in either their user interface (UI) or your UI. Additionally, your vendor should present only relevant data to the HCP and in an intuitive, digestible format. • Vendor hub staff can also leverage this technology to obtain patient coverage information at the point of prescription as well as ongoing (e.g., automated batch reverifications). Your vendor should be able to implement this technology in insourced, hybrid and outsourced hub models. • Pharmacies can also use this technology, which is key for brands having high direct-to-pharmacy prescriber populations and/or when the brand does not have a hub.	• HCPs can self-serve to obtain immediate patient coverage information via specialty therapy initiation platforms. Again, your vendor should present only relevant data to the HCP and in an intuitive, digestible format.

AssistRx delivers real-time, up-to-date and comprehensive digital pharmacy and medical BVs through direct connectivity and/or data connectivity. Our Advanced Benefit Verification solution goes above and beyond other electronic RTBC solutions to provide immediate and comprehensive patient coverage results for all pharmacy benefit therapies. Our e-MedBV solution also pulls real-time, comprehensive medical benefit coverage information using multiple data sources. Both solutions return product-, plan- and patient-specific coverage information in under 15 seconds.

Deploying this market-leading technology isn't enough to differentiate today's brands. Patients and HCPs look to life sciences organizations for more support than ever before—access, coverage navigation, affordability, education and adherence. You need a strategic partner with nimble and interoperable technology and the expertise to deploy solutions that address evolving market needs.

ARTICLE

Technology's New Approach: One Gateway to Deliver Comprehensive Patient Support Services

As the market access landscape evolves alongside industry, regulatory and technology changes and advancements, so has the role of the patient support program. Higher patient cost sharing, paired with increasing numbers of access barriers has redefined the role of patient support services and how critical they are to the viability of specialty products.

Studies show a correlation between rising cost and utilization restrictions and diminishing fill rates and adherence. According to the 2021 KFF Health Tracking Poll, "Among those currently taking prescription drugs, one in four say they have difficulty affording their cost, including about one third who take four or more prescription drugs."

Higher out-of-pocket costs, according to one study published in the Journal of Clinical Oncology, are associated with higher rates of prescription abandonment and delayed therapy initiation. Meanwhile, utilization restrictions are so cumbersome that states and the federal government are taking steps to require prior authorization (PA) responses from payers within 48 hours (Oregon) or seven days (CMS-0057-P)(CNN Health).

Robust patient support programs can help patients and healthcare providers (HCPs) overcome these barriers. However, because these support programs need to provide services ranging from benefit verification (BV) and PA support, affordability program screening and enrollment, free drug dispense, clinical education and more, many life sciences organizations utilize multiple vendors – each specializing in one piece of the patient journey. Often, this results in a disjointed and frustrating experience for both patients and HCPs. Using multiple vendors can also result in non-standardized and incomplete program data that makes gaining visibility into actionable insights an uphill battle.

Picture This: The Ideal Patient and HCP Experience and Usable Program Data

Imagine standing up patient support program technology in a matter of weeks, not months. Now, picture this technology as modular, scalable, and can be integrated into frontend access channels and backend operations. Specifically, technology that enables patient and HCP self-service through channels like the brand website, while facilitating a talent offramp and program reporting through the CRM.

> *Imagine standing up patient support program technology in a matter of weeks, not months. Now, picture this technology as modular, scalable, and can be integrated into frontend access channels and backend operations..*

On the frontend, rather than leveraging multiple vendors, this modular solution allows both HCPs and patients to get the information they need in real time, from one place. HCPs can access e-services like eBV, ePA and eCopay to move the process forward – under the life sciences organization's brand. On the backend, a single integration enables a talent offramp in which access experts use these same e-services within the CRM to support complex cases. Receipt of consistent, measurable data from frontend and backend operations ensures transparency into successes or opportunities for improvement. This unique combination, which can only be achieved using a single API integration that deploys the right technology-first tools, enables life sciences organizations to deliver upon the growing access, affordability and adherence needs of specialty products.

For solutions like AssistRx's Advanced Gateway, these tools can include:

- **e-Consent:** Digital capture of patient consent obtained at the point of care or virtually at the patient's convenience through email, text, brand website or HIPAAConsent.com.
- **Advanced Benefit Verification:** Comprehensive pharmacy benefit coverage information delivered in under 15 seconds using just five patient identifiers. Returns include coverage, out-of-pocket (OOP) cost, access restrictions, coverage alerts, formulary status, employer, fill options and more.
- **e-Medical Benefit Verification (e-MedBV):** Extensive medical benefit coverage information delivered in under six seconds. Returns include plan name; payer name and type; effective and termination dates; and individual/family deductible and OOP year to date, per year and remaining.
- **Patient Coverage Check:** Patient-facing pharmacy coverage information delivered in under three seconds. Results include coverage status and access restrictions.
- **Advanced Prior Authorization:** Digital tool returns patient plan- and product-specific PA question set and enables real-time PA submission with payer/PBM decisions returned in minutes. Only relevant questions and response options are presented, and LOEs/LMNs can be included.
- **Advanced Clinical Documentation:** Comprehensive patient-specific clinical summary data pulled and delivered in real time to drive efficiencies related to drug utilization reviews and PA support.
- **e-PAP and e-Copay:** End-to-end, technology-first solution that enables real-time automated consent, BV, eligibility screening, enrollment and card/voucher download, all in one workflow.

All these services can be kicked off through automated technology, added and removed from the program's offerings as the product moves through its lifecycle, and supported by intervention from talented patient access specialists and case managers as needed. Life sciences organizations can simplify a complex system for patients and HCPs, gain comprehensive program visibility, improve access and adherence — to create better results from care.

> *All these services can be kicked off through automated technology, added and removed from the program's offerings as the product moves through its lifecycle, and supported by intervention from talented patient access specialists and case managers as needed.*

ARTICLE

Digital Transformation: Facilitating Healthcare Provider and Patient Behavior Change

The goal of a digital transformation is, according to ZDNet, "to use technology not just to replicate an existing service in a digital form, but to use technology to transform that service into something significantly better." For the specialty pharmaceutical industry, a "digital transformation" in the form of technology-first services involves encouraging patients and healthcare providers (HCPs) to adopt digital methods throughout the therapy journey and the product lifecycle.

Whether launching a new product, innovating at mid-lifecycle or facing loss of exclusivity (LOE), technology-first solutions improve efficiencies for patients and HCPs, increasing the likelihood of adoption for both the product and the technology driving differentiated experiences. However, delivering the right technology, at the right time, through the right delivery method requires a partner that understands how to strike the right balance of tech + talent based on the product.

Whether launching a new product, innovating at mid-lifecycle or facing loss of exclusivity (LOE), technology-first solutions improve efficiencies for patients and HCPs, increasing the likelihood of adoption for both the product and the technology driving differentiated experiences.

New Product: Driving Product Adoption While Overcoming Access Hurdles

Access hurdles abound for new-to-market products, requiring the balance of tech + talent to skew toward talent. As the product awaits formulary placement, many processes require manual intervention, such as identifying the correct prior authorization (PA) form, understanding step-edit requirements, etc. Further, getting the product established on formulary may require a concentrated effort to demonstrate product demand and clinical effectiveness.

More technology-enabled methods can be integrated once the product gets on formulary, more payer coverage data becomes available, and patients and HCPs become familiar with the process. This is because product- and patient plan-specific data can be electronically retrieved across more patient lives and with higher accuracy—and patients and HCPs require less handholding. Digital methods allow even new-to-market products to deliver better patient and HCP experiences and improved perception of access by reducing risk for errors, rapidly returning information and streamlining the process.

Digital methods allow even new-to-market products to deliver better patient and HCP experiences and improved perception of access by reducing risk for errors, rapidly returning information and streamlining the process.

Achieving better experiences and strong perception of access requires change in behavior. Patients and HCPs may be accustomed to using manual methods for competitor brands or perceive access for existing products to be stronger than newly launched ones. Thus, patient support and field teams need to educate patients and HCPs about the product's patient support program offerings and the advantages of accessing them.

Education alone cannot achieve a change in behavior. Technology, such as the brand's website or therapy initiation platforms like iAssist, must be simple and reliable. It's the balance of tech + talent that creates differentiated experiences, as well as the behavior change needed for a digital transformation.

Mid-lifecycle and LOE: Moving from Manual Methods to Technology-first Methods

The next behavioral shift is the adoption of technology-first methods. As the product moves to mid-lifecycle and/or approaches LOE, life sciences organizations should seek opportunities to lower operating costs and retain market share. Automated solutions ultimately pull FTEs away from data entry and onto higher value-add touchpoints.

Technology-first solutions automate manual processes with nearly all therapy initiation tasks completed electronically in the background. Some of these technology-first solutions include:

- **Advanced Benefit Verification* (ABV):** Initiated by the HCP, this technology-first approach leverages direct connectivity to provide immediate and comprehensive patient coverage results in under 15 seconds. Returns include payer/PBM name and type, BIN, PCN, member ID, group ID, effective/term dates, deductibles, patient OOP costs, formulary tier status, access restrictions and more.
- **Advanced Prior Authorization* (APA):** Initiated by the HCP, this real-time PA solution returns the appropriate patient plan- and product-specific PA question set and enables real-time PA submission with payer/PBM decisions returned in minutes.
- **Patient Coverage Check:** Technology-first approach leveraging direct connectivity to empower patients to check their coverage status, as well as any PA, step therapy, dispensing pharmacy requirements and more. Data is returned 99% of the time and in under three seconds.
- **e-Copay and e-Patient Assistance Programs:** A real-time eligibility and enrollment solution for copay and patient assistance programs (PAPs). By using ABV, e-income verification tools and other data sources, HCPs can proactively and in real time perform eligibility screening, enrollment and copay card/voucher generation.
- **Advanced Clinical Education (ACE):** Technology-first clinical support encompassing virtual visits, reporting, and self-serve appointment scheduling. Integrated with the CRM, ACE facilitates a full and reportable view of patient cases.

**HCP-facing tool only*

> *As the product moves to mid-lifecycle and/or approaches LOE, life sciences organizations should seek opportunities to lower operating costs and retain market share. Automated solutions ultimately pull FTEs away from data entry and onto higher value-add touchpoints.*

As HCPs self-serve and move through their workflows faster due to technology-first solutions, patients gain accelerated access to therapy. Coincidingly, as patients self-serve, HCPs are freed up to support more patients. To drive a digital transformation, it's critical to capture data like this to share with HCPs and patients who still prefer manual methods.

Talent-enabled touchpoints with HCPs and patients should entice them to adopt technology-first solutions. For example, field teams should be equipped with marketing material about digital services. When engaging in digital channels, patients and HCPs should receive positive reinforcement such as faster delivery of data, more accurate and digestible information, and offramps to talent-enabled support, if needed.

Life sciences organizations should seek a partner having the technological capabilities and legacy expertise to not only deploy the right balance of tech + talent for the product, but also to support the behavior change behind a digital transformation.

ARTICLE

Taking a Technology-First Approach in your Affordability Program

Previously, we discussed the differences between "technology-first" and "technology-enabled" patient support programs. To review, the differentiator lies in the ability to automate processes with technology, versus relying on human intervention to prop up technology.

A technology-first approach can drive differentiated experiences for patients and healthcare providers (HCPs), as well as significant efficiencies and cost savings. Digital hubs should have technology incorporated into all patient support services, including affordability programs.

A 2022 study reported that 43% of working-age adults were inadequately insured, including individuals who were uninsured (9%), experiencing a gap in coverage (11%) or underinsured (23%). These alarming numbers only exacerbate the need for life sciences organizations to consider affordability programs for both insured and uninsured patients.

Technology-First Approach to Copay Assistance Programs

For commercially insured patients, a technology-first approach in your copay program starts with enrollment. Through channels such as brand websites and HCP portals, copay enrollment should include options for both patients and HCPs to self-serve. Technology such as AssistRx's automated Advanced Benefit Verification (ABV) and e-Copay solutions should return patients' comprehensive coverage information and eligibility for the copay program, enroll eligible patients, and immediately generate the copay card via digital and traditional channels.

The AssistRx ABV solution leverages direct connectivity to payers/PBMs, clearinghouses and other data sources to provide patient coverage results including payer/PBM name and type; employer; BIN and PCN; member ID, group ID, relationship; effective/termination dates; deductible amount, remaining and exemptions; patient out-of-pocket (OOP) cost maximum, minimum and remaining; formulary tier status; drug access restrictions and coverage notifications. ABV returns comprehensive coverage results in under 15 seconds.

> *Through channels such as brand websites and HCP portals, copay enrollment should include options for both patients and HCPs to self-serve.*

The key to a differentiated copay program is accurate, comprehensive patient coverage returns and enrollments in real time and in one workflow, as well as reporting. Your partner should provide comprehensive reporting on copay card usage and funding, copay card abuse guardrails, and proactive, automated measures to mitigate against copay accumulators and maximizers.

Technology-First Approach to Patient Assistance Programs (PAPs)

Like copay programs, a technology-first approach in PAPs begins with screening and enrolling patients into PAPs in real time. A digital hub should also consult with you on the right PAP technology for your product. For example, buy-and-bill product PAPs may benefit from incorporating proactive e-eligibility check and e-income verification tools deployed before administration of therapy.

Powering the enrollment process with technology not only improves patient and HCP experiences, but also facilitates staffing cost savings. For one AssistRx client, implementation of an e-PAP model drove a 40% reduction in full time employees (FTEs) and projected $9M in savings over two years.

$16M

*Leveraging ABV and eIncome to automate PAP reverification, one AssistRx client gained roughly **$16M in recaptured revenue**.*

Technology-First Approach to Annual Reverification

While every patient support program vendor offers annual reverification, few incorporate a technology-first approach. The annual reverification process is commonly referred to as “blizzard season” due to its flurry of activity and new hires. With the right technology, this FTE-approach “season” can be eliminated.

Digital hubs prevent manual, high-cost reverifications by automating reverification efforts. A solution like ABV is optimal for reverification to ensure accuracy of data returned. ABV empowers us to search for insurance coverage, both at time of application and at various times throughout the year, to identify patients who obtain insurance coverage during PAP eligibility and transition them to paid-for scripts.

For example, leveraging our ABV and e-Income Verification solutions to expedite and automate the e-PAP reverification process, one AssistRx client gained roughly $16M in recaptured revenue and about 115 patients converted to commercial product.

The annual reverification process is commonly referred to as “blizzard season” due to its flurry of activity and new hires. With the right technology, this FTE-approach “season” can be eliminated.

The Role of Talent in Affordability Programs

A life sciences organization’s digital hub program cannot, and should not, be 100% digital in today’s complex healthcare environment. The same applies for affordability programs. Digital hubs should have a team specializing in alternative coverage options, such as Medicare Low Income Subsidy (LIS) and third-party charitable foundations.

This dedicated talent is essential in ensuring patients have access to the funding they need, especially as many programs have a narrow window for applications. An AssistRx program having a high Medicare population identified $12.9M in funding over the life of the program and supported 89% of patients in receiving funding in one year.

A technology-first approach will only benefit your affordability program when designed and deployed in the right way for your product. Life sciences organizations need a partner that not only understands when to incorporate technology, but also how to balance this technology with talent based on your patient and HCP populations.

A digital hub with proven experience in technology-first affordability programs should be consultative about the right technology to integrate into your affordability programs.

$12M

*An AssistRx program having a high Medicare population identified **$12.9M in funding** over the life of the program and supported **89% of patients** in receiving funding in one year.*

ARTICLE

2023 Access Trends: Digital Hubs, Technology-first Patient Support Strategies and Improving PAP Performance

Considerations for whether a digital hub is right for your product:

1. *Product stage in lifecycle.*
2. *Type of product.*
3. *Patient and HCP population.*

Defining and delivering a "digital hub"

A key trend for 2023 is the specialty pharmaceutical space's progress toward digital hub models. Life sciences organizations with products across disease states and in various lifecycle stages are embracing digital strategies and creating digital ecosystems to best support patients, healthcare providers (HCPs) and patient support program performance.

What truly is a digital hub?

The concept of a digital hub is continuing to evolve. What defined a digital hub five years ago or even in 2022 has already changed. A digital hub in 2023 requires the capability to deploy technology-first experiences with technology-enabled talent available to step in as necessary – and a strategic approach to both.

Digital hubs must offer interoperable, real-time solutions that deliver an automated process. Further, digital hubs need to take an agnostic approach, meaning they are willing to integrate and share data with other parties to support the patient and therapy journeys.

Digital hubs need to deliver the right capabilities, at the right time, and through the right delivery channel. Some services, such as AssistRx's Advanced Benefit Verification (ABV) tool, can be technology-first, meaning they're completely automated from end to end. Other services, such as AssistRx's Advanced Prior Authorization (APA) tool, can be technology-enabled, meaning all steps except HCP submission are completed in an automated, digital fashion.

How do life sciences organizations determine if a digital hub is right for their product?

Life sciences organizations should consider the following:

- **Product stage in its lifecycle:** Mid-lifecycle products looking to reduce overhead or end-lifecycle products approaching the patent cliff benefit from digital hubs' technology-enabled solutions, but even products at launch can benefit from automation.
- **Type of product:** Low WAC products requiring specialty-lite services like PAs are typically better served by a digital hub than a product with a complicated method of administration or complex therapy regimen.
- **Patient and HCP population:** Products having highly motivated, technology-savvy patients and technology-savvy HCPs familiar with specialty drugs are great fits for a digital hub. Products having non-technology-savvy patients with high adherence risks and HCPs who prefer manual methods may benefit most from technology-enabled talent teams.

All factors considered, if a digital hub is right for a product, the life sciences organization needs to think through a few more considerations:

- **Which technology and balance of tech + talent best support the product?** Direct connectivity may be more accurate than AI when pulling coverage and affordability program eligibility. If a life sciences organization plans to buy data and mine it because the drug is entering a crowded market, AI solutions may be right for that program. A digital hub partner should provide guidance on the right balance of tech + talent, which tech- or talent-enabled touchpoints best differentiate the product, and how the support program approach should evolve throughout the product lifecycle.
- **Does the organization have the right expectations?** There will always be a manual component in the specialty pharmaceutical space. Life sciences organizations need to design programs for the 80%—the majority of customers and therapy journeys. At the same time, program design needs to account for 10% disruption—factors unaccounted for—and 10% safety net for cases that require talent or for customers who will always prefer talent-enabled support.

Optimizing Affordability Programs

Optimizing PAPs is another important trend this year. Rising operating costs among PAPs, the increasing number of payer-driven cost avoidance programs, and how technology can reduce operating costs and enhance experiences all factor into how the industry is addressing affordability.

A technology-first approach can optimize PAPs and how to supplement them with technology-enabled talent. Today's traditional PAP experience can take up to 18 days from the point of prescription, to the benefit investigation, to the PAP eligibility screening, to the patient receiving free drug. Many manual tasks are performed by hub staff throughout this process, driving up costs for free drug programs. However, a technology-first PAP can reduce this time to 12-72 hours and avoid costly FTE-based activities.

Traditional PAP experience:

18 days from prescription to patient recieved

Manual tasks performed by hub staff

Tech-first PAP experience:

<72 hours from prescription to patient recieved

Fewer FTEs required due to automation

What is a technology-first PAP?

A technology-first PAP (e-PAP) experience puts all eligibility and enrollment steps upfront and electronically to get PAP drug out the door and over to, the non-commercial pharmacy to dispense. In other words, an e-PAP gathers patient consent, coverage information, eligibility requirements more upfront and triggers the appropriate remaining automated steps—all in one workflow.

e-PAP experiences can greatly impact program performance throughout each step:

- **Eligibility screening and enrollment:** Through Advanced eServices like e-Income Verification and direct connectivity to payers, patients and HCPs can screen the patient for eligibility—based on the life sciences organization's business rules, complete enrollment and generate a card/voucher in real time. Patients and HCPs can complete these tasks at their convenience via engagement websites, text and email.
- **Reverification:** Automated reverification eliminates blizzard season headaches, reduces FTEs — and recaptures revenue. AssistRx's ABV solution searches for insurance coverage, both at the time of application and at various times throughout the year, to identify patients who obtain insurance coverage during PAP eligibility and transition them to commercial scripts. On average, we find at least 2% of PAP patients gain coverage each month. In under one year, we achieved $20M in recaptured revenue for an immunology drug portfolio's PAP.

What's the right balance of tech + talent for e-PAPs?

There will always be a need for talent-enabled services in specialty. While an e-PAP should be technology-first, talent should complement technology in the following instances:

- **Denied coverage:** Talent can leverage Advanced Clinical Documentation (ACD) to pull patients' medical history, including items that support PAs and appeals. ACD uses integrations with leading data health exchange service providers to return comprehensive patient information, such as tried-and-failed therapies, contraindicated medications and lab work, in real time.
- **Alternative coverage:** Experts on Medicare, Medicaid, alternative plans and third-party foundation research can support patients in finding and understanding eligibility requirements for alternative affordability assistance.
- **Copay accumulators/maximizers:** Talent can use ABV to identify which patients were or are likely to be targeted. Once AssistRx identifies targeted patient populations, we step in to support their continuity of care and input that data into our system to proactively flag and support similar patients.
- **Specialty carve-outs:** Two technologies can be used by talent to address specialty carve-outs. As described previously, talent can leverage ABV and ACD to identify patients likely targeted by carve-outs, as well as competitor drug PAPs that may have modified their program eligibility accordingly. In fact, AssistRx has 24 specialty carve-out programs flagged in our system. Thus, we can identify alike patients as they enter our system and go through ABV, and then administer a copay alternative or look into alternative coverage.

Another area in which talent supplements technology is the non-commercial pharmacy. Having e-PAP and the non-commercial pharmacy under one roof leads to improved efficiency, reduced compliance risk and fewer channel fees. For one AssistRx client, implementation of an end-to-end e-PAP model drove a 40% reduction in FTEs and projected $9M in savings over two years.

$9M

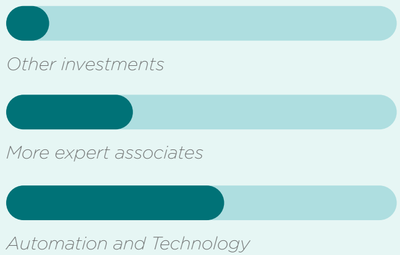
*Implementation of an end-to-end e-PAP model drove a **40% reduction** in FTEs and projected **$9M in savings** over two years.*

These technologies are not limited to PAP. Advanced eServices like e-Consent, e-Enrollment, ABV, APA, etc., can and should be applied to all life sciences organizations' affordability programs to optimize program performance and create differentiated patient and HCP experiences.

ARTICLE

Transforming Patient Support Programs through Technology Integration

Given an unlimited budget, which would you invest in?



Data provided by 2023 AssistRx market survey

Life sciences organizations are making much-needed strides to evolve their patient support programs through technology integration. According to a March 2023 AssistRx survey of patient support leaders, respondents indicated they'd invest in technology rather than people for access and affordability services. Specifically, 55.6% said they'd invest in fully technology-powered and automated tools, while 33.3% indicated they'd invest in expert associates if given an unlimited program budget.

Investing in technology solutions over FTE-driven solutions can improve your patient support program performance across the therapy journey. Whether it be access, affordability or adherence services, technology can increase speed, accuracy, efficiency and scalability. However, due to the complex nature of specialty pharmaceuticals, patient support programs need the right balance of tech + talent. Key patient support program leaders recently dove into three focus areas for program technology integration: digital hubs, e-PAPs, virtual nursing services.

Access: Digital Hubs

Leveraging technology to improve **access services'** speed and accuracy

What is a digital hub?

There are some misconceptions about what constitutes a digital hub. Simply having digitized forms does not create a digital hub. When we think about a digital hub, it begins with digital intake at the point of prescription triggering automated Advanced eServices that drive the prescription journey to the best fulfillment option for the patient. It's automated, real-time services with technology-enabled talent support as an offramp, when needed.

> *Digital Hub: Begins with digital intake at the point of prescription, triggering automated Advanced eServices that drive the prescription journey to the best fulfillment option for the patient.*

Why should you adopt it?

We often ask ourselves, "How do I drive speed and efficiency in the process of getting a patient onto therapy?" Digital hubs can help you do that in many cases. For example, products with high EHR-driven prescription volume and highly motivated, technology-savvy prescriber and patient populations may be well served by a digital hub. Digital intake of the prescription from the EHR triggers technology that obtains e-Consent from the patient, pulls comprehensive coverage information and PA requirements in under 15 seconds, and digitally returns the appropriate PA question set for submitting PAs in real time with payer decisions returned in minutes.

This technology also screens and enrolls an eligible patient in a copay assistance or patient assistance program (PAP) in real time, performs immediate enrollment into support services like virtual nursing, and routes the prescription to the best fulfillment option based on the patient's benefits.

e-PAP: End-to-end, technology-first solutions including:

Real-time, automated consent

Benefit verification

Eligibility screening

Enrollment

Card/voucher download

Free drug prescription routing

Automated reverification

An e-PAP might be right for your program if your answer is “yes” to either of the following:

Is your organization seeking to reduce costs across the board by digitizing access and affordability programs?

Does your PAP cover a portfolio of brands supporting patient and HCP populations that would likely adopt digital methods?

Affordability: e-PAP

Incorporating technology to **drive affordability** program efficiency

What is an e-PAP?

e-PAP is an end-to-end technology-first solution. It’s real-time, automated consent, benefit verification, eligibility screening, enrollment, card/voucher download and free drug prescription routing—all in one workflow. It’s also automated reverification at any point of patient PAP eligibility, rather than waiting for the dreaded blizzard period.

When should you adopt it?

The answer would seem to be “always,” but it can depend on your overall patient support program strategy. This is something AssistRx discusses frequently with life sciences organizations. You must consider what makes sense from a timing and product lifecycle perspective, and also the political climate within your organization. Is your organization seeking to reduce costs across the board by digitizing access and affordability programs? Does your PAP cover a portfolio of brands supporting patient and HCP populations that would likely adopt digital methods? If “Yes” is the answer to either question, an e-PAP may be right for your program.

What are special considerations for e-PAP?

AssistRx gets many questions about alternative coverage support and how it relates to specialty carve-outs. One approach we’ve taken is using technology to identify which employers/employer groups adopted these mechanisms so that we can proactively support those patients. We’ve also used this data to consult clients on their PAP eligibility requirements to ensure they are both identifying and helping those who need it.

Adherence: Virtual Nursing

Integrating technology to increase **adherence services’** scalability

What is virtual nursing support?

A technology-enabled virtual nursing solution includes digital, self-serve appointment scheduling and a live nurse visit through video capability. This solution should also include CRM integration to manage scheduling, track the patient case and deliver program reporting. If the virtual nursing solution is integrated into the CRM, you can use an online calendaring tool to trigger an automated survey to the patient to measure the quality and outcome of the process.

When should you adopt it?

It should be adopted when there is administration education that needs to be provided to a patient — whether that means taking the medication out of the refrigerator, mixing it, etc. It’s also advantageous when a therapy requires first dose observation. AssistRx has had clinical staff perform virtual first dose observation and be available for intervention, if needed. This added virtual component accelerated under COVID-19, especially for immune restrictive patients, and is still in place. We frequently discuss this capability with our clients because it extends your nursing group support to address health equity and those patients unable to make it to their HCP’s office.

Virtual Nursing Solution: Technology-enabled support including:

Digital, self-serve appointment scheduling

Live nurse visits through video capability

CRM integration to manage scheduling, track the patient case and deliver program reporting

A digital intake strategy, balanced perfectly with expert talent when needed, takes patient support programs from reactive and inefficient to proactive and cost-effective.

Next, explore our case studies for how AssistRx and our partners built tech-first programs that deliver best-in-class experiences for patients and healthcare providers.

Applying Digital Intake to Patient Support Programs

A digital intake strategy should be tailored to the specific needs of the patient support program. This section includes examples of how AssistRx and our partners configured digital intake approaches based on the product's stage in its lifecycle, as well as its patient and healthcare provider populations.

In this section, you will:

- Learn how digital intake strategies directly impact improved time to therapy.
- Discover how tech empowers talent to deliver more meaningful patient and healthcare provider interactions.
- See how one life sciences organization recaptured millions in lost revenue after implementing a tech-first patient assistance program.
- Review the successes made possible through an AssistRx digital intake solution, Advanced Gateway.

CASE STUDY

iAssist: Improving Time to Therapy with a Digital Enrollment Strategy

Challenge

A manufacturer of a therapy indicated for the treatment of a rare optical condition faced hurdles to getting its product to patients quickly and streamlining processes for its prescribers.

Because the product has a relatively small patient population size, payers require prior authorizations (PAs) and the product must be triaged to a specialty pharmacy. With a patient population primarily of Medicare age, most require financial assistance and other patient support services.

The manufacturer primarily utilized traditional, manual methods of enrollment and PA submission to help their patients overcome access hurdles, leaving opportunity to greatly improve patient and provider experiences with faster, digital methods.

Solution

As part of the manufacturer's digital enrollment strategy, AssistRx supported a renewed emphasis on tech-first solutions such as iAssist, the advanced specialty therapy initiation platform. Within the product's iAssist workflow, healthcare providers (HCPs) utilize Advanced eServices such as e-Consent, e-Enrollment, Advanced Prior Authorization and e-Appeals (depending on payer). These tools enable HCPs to help their patients overcome access hurdles quicker, all within a single workflow.

Results

In only six months, iAssist has made a significant impact on patients' time to therapy. The average **turnaround time for PAs is two days faster,** and the average **turnaround time to triage is three days faster.** Our solution not only streamlines HCPs' processes, but supports improved patient experiences with faster time to therapy.

3 days faster

Average turnaround time to triage

CASE STUDY

CoAssist: Digital Intake for More Meaningful Patient and HCP Interactions

Challenge

A manufacturer of a multi-indication blockbuster drug was challenged with long turnaround times (TAT) and implementing scalable solutions that would reduce program headcount.

The mid-lifecycle product had well-established coverage, but still required prior authorizations (PAs), program enrollments and benefit verifications (BVs) for its skyrocketing patient population.

- Long turnaround times (TAT)
- Legacy technology
- Large FTE count
- High PA volume

Solution

AssistRx deployed a digital intake strategy to eliminate enrollment forms and kick-off automated, real-time Advanced eServices at the point of prescription. HCPs e-prescribe from the EHR to CoAssist, AssistRx's digital hub solution, which uses the data included in the prescription to:

- Trigger patient e-Consent capture via text message, email, etc.
- Run Advanced BV (ABV) to return patient coverage and PA requirements in under 15 seconds
- Initiate PA requests via Advanced PA (APA) with payer decisions returned in minutes
- Immediately identify — and enroll patients in, if needed — the best affordability option
- Route the prescription for dispense accordingly

Results

This digital intake approach eliminated manual, time-consuming faxes and calls. Patient outreach TAT decreased from **19 minutes** to **12 seconds**, and **50%** of PA responses were returned within **1 hour**.

Ultimately, utilizing CoAssist increased speed to therapy from **12.2 days** to **3.7 days**, getting patients the medications they need faster and enabling better results.

3.7 days

CoAssist improved speed to therapy from 12.2 days to 3.7 days

CASE STUDY

Engagement Sites: Supporting e-Patient Assistance Programs with Tech-first Solutions

Challenge

The manufacturer of a portfolio of products was challenged with long turnaround times to enroll patients in patient assistance programs (PAPs) and dispense free product. Consent paperwork and PAP applications were faxed or mailed, which could take up to four weeks to process. Patients and healthcare providers lacked an electronic means for consent, enrollment, PAP qualification and other patient-facing resources.

Solution

AssistRx deployed a patient engagement website inclusive of e-consent, e-income check, e-enrollment, click to enroll via text message, and real-time enrollment into copay programs. These tools, available all in one place, are known as e-PAP. Together, they expedite the process for patients requesting support, improve the customer experience and prevent missing information and unsigned consent forms.

Results

Utilization of the patient engagement site (PES) **decreased PAP turnaround time by 23 days**. What previously could take up to a month to process was reduced to 3-4 days. This reduction resulted in **$88k in annual savings** for the manufacturer. It also resulted in a **26% decline in missing information, which equates to $225k in savings** for the manufacturer, improved HCP and patient experiences with the brand, and a faster start to therapy for patients.

3-4 days

Utilization of the PES decreased PAP turnaround time by 23 days.

$88K saved

Reduced turnaround time resulted in $88k in annual savings.

$225K saved

26% decline in missing information equated to $225k in savings.

CASE STUDY

Advanced Gateway: Transforming Patient Support Programs through Technology Integration

	Challenge	Solution	Results
EXAMPLE 1	• A life sciences organization manufacturing a diabetes drug was challenged with therapy access delays due to a manual BV process. • The average BV turnaround time (TAT) was 7 hours.	• AssistRx automated BV efforts with Advanced Benefit Verification (ABV), a proprietary solution that connects to payers/PBMs and other data sources to pull real-time pharmacy benefit coverage results. • ABV uses just 5 patient identifiers to pull patient coverage data in <15 sec for 80% payer-covered lives.	• During the first month, ABV returned coverage status for 82% of the 10k+ requests. • BV TAT was reduced to 15 sec, and over 30% of requests were fully automated.
EXAMPLE 2	• A life sciences organization manufacturing 4 cardiology therapies was challenged with long enrollment TATs. • The 4 medical benefit drugs required a perfect balance of a tech- and talent-enabled solution to speed the BV TATs.	• AssistRx automated BV efforts with eMedical Benefit Verification (e-MedBV), a solution that leverages a mix of payer and other data source integrations, proprietary algorithms and talent offramp to pull medical benefit coverage results. • eMedBV uses 5 patient identifiers, J-code, and payer and member IDs to pull medical benefit coverage data in <6 sec for 70% payer-covered lives	• All steps needed to initiate therapy — including medical benefit BVs — were completed in <5 min. • Speed to therapy TAT for all 4 therapies improved by 50%.
EXAMPLE 3	• A life sciences organization manufacturing a dermatology drug was challenged with high PA volumes and low approval rates. • The average PA approval rate was 20% with the previous vendor.	• AssistRx implemented Advanced Prior Auth (APA), an automated solution for submitting PAs in near real-time with payer/PBM decisions returned in minutes for 80% payer-covered lives. • APA digitally returns the correct PA form question set and pre-populates patient and HCP data. • APA also includes a proactive Letter of Exception in the workflow.	• In year one, PA approval rates increased by 100%. • By year two, PA approval rates increased by 250% as HCPs became more familiar with electronic methods.

Closing

Over the past year, leading life sciences organizations have embraced digital intake to improve patient access to therapy. By utilizing digital intake, specialty pharmaceutical stakeholders can implement a multi-threaded approach to engagement that simplifies the kick-off of support services and removes the barriers that most affect patient access. In combination with traditional access channels, digital intake helps brands deliver best-in-class experiences and better health outcomes.

When choosing a partner to implement a digital intake strategy, keep these considerations in mind:

Where is the product in its lifecycle?

Mid-lifecycle products looking to reduce overhead or end-lifecycle products approaching the patent cliff benefit from digital intake strategies. However, products at launch can also benefit from automated, tech-first solutions. The ideal partner should be able to easily add or remove solutions with a tool like Advanced Gateway as the product evolves.

How motivated and knowledgeable are the patient and HCP populations?

Products with highly motivated, technology-savvy patients and technology-savvy healthcare providers familiar with specialty drugs are great fits for a digital intake strategy. Products with non-technology-savvy patients with high adherence risks and healthcare providers who prefer manual methods may benefit most from tech-enabled talent teams, rather than fully automated processes.

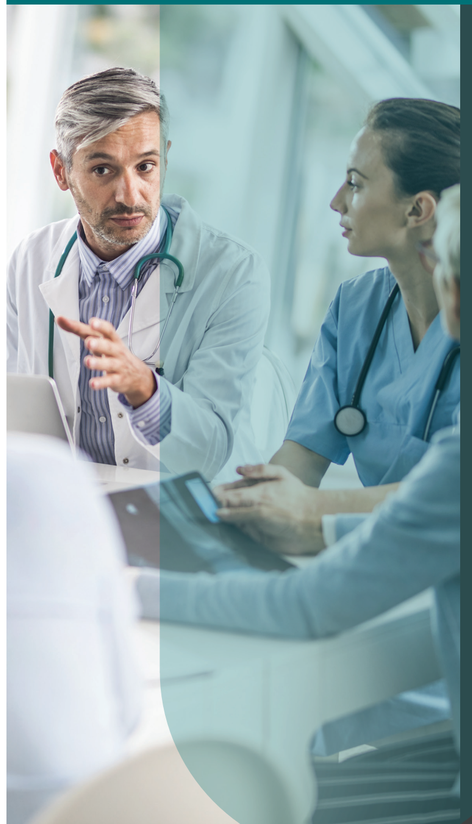
How complex is the product?

Some products require human expertise and/or high-touch support services like site of care coordination or self-injection training. Some require specialty-lite services like benefit verifications and prior authorization support. Low WAC products requiring specialty-lite services are typically better served by a digital intake strategy than products that require human intervention throughout the prescription journey.

What technology and expertise does the program need now and ongoing?

Vet a potential patient solutions partner's technology stack and approach. The right provider should offer not only interoperable solutions, but also a willingness to integrate with other partners to best serve the program. Further, the ideal provider should have the industry expertise needed to serve as a consultative partner in our ever-evolving specialty pharmaceutical space — and the agile technology capable of evolving with the market.

With a vision to transform lives through access to therapy, AssistRx has consistently partnered with our clients to create best-in-class solutions for patients, caregivers and HCPs. Through the powerful combination of our people and technology, we help life sciences organizations increase uptake, gain visibility and improve outcomes.



Why Life Sciences Organizations Choose AssistRx

Balanced and Unique

Solutions align with current communication preferences and deliver informed connectivity to improve program experience and outcomes.

Innovative and Interoperable

Flexible and scalable platform works seamlessly with systems and processes that support a successful patient journey.

Proven and Performance-minded

Independent provider of an integrated solution with the stability of a mature company that delivers with a responsive attitude.

AssistRx

Informed access. Improved outcomes.

AssistRx has engineered the perfect blend of technology and talent to provide an intelligent therapy initiation and patient support solution to improve patient uptake, visibility and outcomes. Our solution integrates technology and therapy expertise to advance patient therapy in a more efficient and effective manner—delivering informed touchpoints that simplify a complex system to enable better results for today's patients.

assistrx.com

1.877.450.4412

inquiries@assistrx.com