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Don't worry if your survey doesn't match your neighbor's

There are different versions of the surveys



UCSF Student Pharmacists present:

Helping our Patients Pay for Medications:

Drug-Cost Containment Strategies for Underserved Patients

April 20, 2012
University of Louisville
Vincent Cheng, William Hung, Tina Ling, Carolyn Robinson

Disclosure Statement

The presenters have nothing to disclose.

&

We do not have any conflict of interest with the following material/activity.



Objectives

- Characterize the underserved population
- Describe drug cost-saving strategies for the UN-insured and UNDER-insured
- Explain 3 types of drug cost-saving programs
- Explain the Low-Income Subsidy for Medicare Part D patients
- List practical resources to help underserved populations reduce out of pocket medical costs



Objectives

Underserved Population

Pre-existing Condition

Uninsured

Underinsured

Medicare Part D

Resources



Underserved Population



UNDER-insured



UN-insured

- Individuals who experience barriers in attaining:
 - Access to health care
 - Continuity of care



Underserved Population



UNDER-insured

Patients who:

- Have insurance
- Face limitations or restrictions in coverage
- Have limited access to needed services and drugs



Underserved Population

- 1 out of every 6 individuals under the age of 65 lacks health insurance
 - 18% of the non-elderly lacked health insurance in 2010



UN-insured

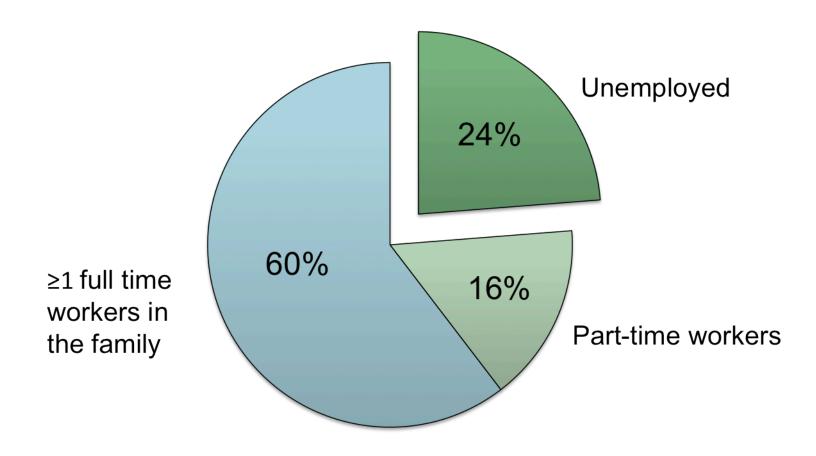
Un-insured Population Employment Status Income Status Age **Immigration Status** Race/Ethnicity

True or False

Majority of the uninsured are unemployed



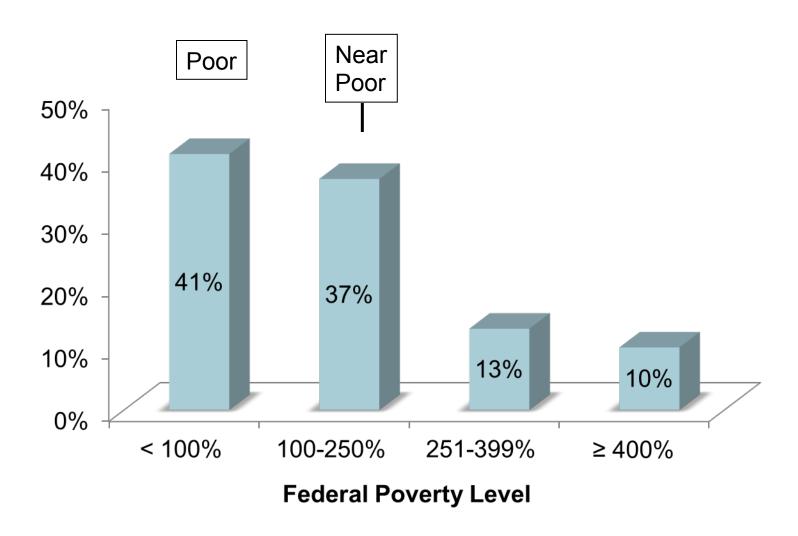
Work Status of the UNinsured, 2010



~ 80% of the Uninsured are Employed



Income Status of the UNinsured, 2010





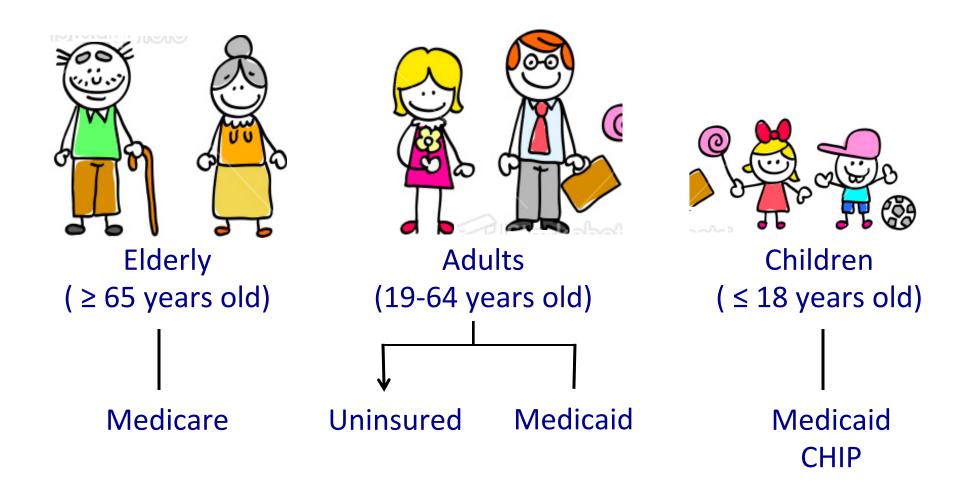


True or False

Most of the uninsured are over the age of 65



Who is UNinsured?





What proportion of the uninsured are undocumented immigrants?

A. $\leq 10\%$

B. 20%

C. 30%

D. $\geq 40\%$

80% of the uninsured are U.S. citizens or legal residents



Race/Ethnicity of the UNinsured, 2009

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Race	Uninsured
Hispanic	32%
American Indian	28%
Black, non-Hispanic	21%
Asian	19%
Multiracial	14%
White, non-Hispanic	13%



Impact of Lack of Insurance

- Uninsured patients more likely to:
 - Forego preventive and outpatient care due to cost
 - Be hospitalized for avoidable health problems
 - Have increased financial burden on society
- Uninsured have 40% higher risk of death
- 45,000 annual deaths due to lack of insurance



Impact of the Affordable Care Act on the UNinsured

- In 2014, 32 million uninsured will begin to receive health coverage
- Insurance companies can no longer deny care to children with pre-existing conditions
- Federally-funded temporary programs provide health coverage to high-risk adults



Objectives **Underserved Population Pre-existing Condition** Uninsured Underinsured Medicare Part D Resources



Pre-Existing Condition Insurance Plan (PCIP)

- Temporary high risk pool program
- Funded by the federal government
- Cot 25th 2010 Dec 31st 2013
- Covers adults with pre-existing conditions who have been uninsured for 6 months
- Premium based on the age and the region



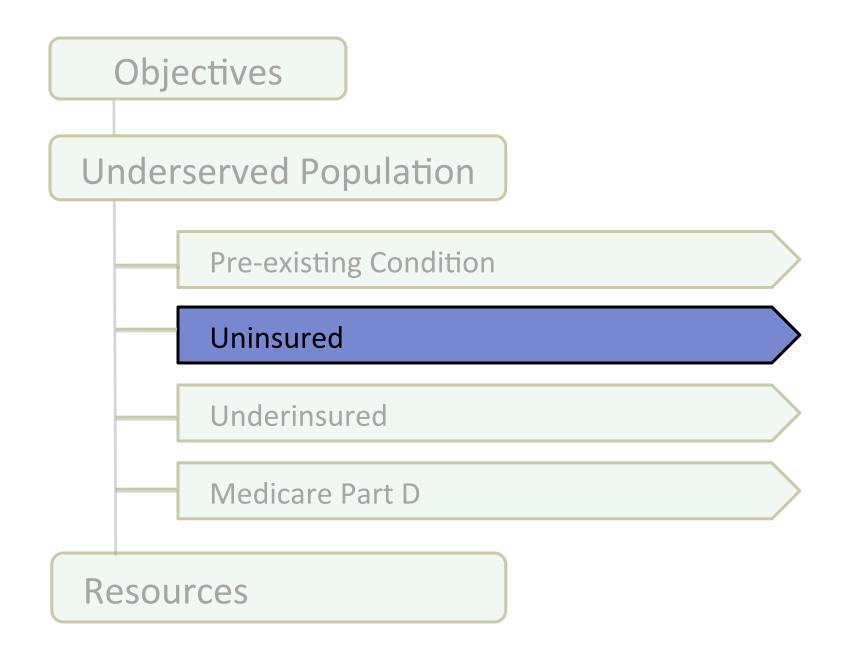
Kentucky Access

- State risk pool insurance program
- Funded by premiums, tobacco tax, health insurance company fees
- Examples of Qualifications
 - Insurance rejection
 - Higher Premium Rate
 - High Cost Pre-Existing Disease
- Renew plan yearly



Eligibility Requirements

	PCIP (Federal)	KY Access (State)
Resident	✓	✓
Denial letter from insurance company	✓	+/-
SSN required	✓	✓
Dependent coverage		✓
Annual or lifetime cap		✓
Monthly premiums (30yo and single)	\$150-200	\$265-1035





Case #1 The UNinsured



Mr. Murphy is a 51 YO gentleman who was recently laid off from a job and no longer has health insurance. He is worried he can't afford all his medications.

Current Meds

Aspirin 81 mg – 1 tab PO daily Metformin 850 mg – 1 tab PO three times daily Lisinopril 40 mg – 1 tab PO daily



Cymbalta 60 mg Delayed Release – 1 cap PO daily Gabapentin 800 mg – 1 tab PO 3 times daily Vytorin 10/40 mg – 1 tab PO daily

Social History

1-person household with \$1,400/mo from unemployment insurance \$17,000 annually



Are the Medications Appropriate?

- Check the indication
- Can you switch to generic?

Do you have suggestions for Mr. Murphy's med list?

Cymbalta 60 mg Delayed Release – 1 cap PO daily Gabapentin 800 mg – 1 tab PO 3 times daily Vytorin 10/40 mg – 1 tab PO daily



Patient Assistance Programs (PAPs)

- Drug company sponsored free drug programs
 - Only for brand-name drugs
 - Only for the uninsured "poor"

"Poor" is ≤ 200% of the Federal Poverty Level ≤ \$21,780/year for single-person household in 2011

- Stopgap measure only
- Great benefit for patients who cannot afford brand name drugs



How to Access PAPs

www.RxAssist.org

- One stop shop for PAPs
- Independent website operated by Brown University's Center for Primary Care and Prevention







Health Care Professionals

Helping You Help Your Patients

Help your patients obtain free or

low-cost medications and learn

more about safety net programs for
the uninsured.



The Web's most current and comprehensive directory of Patient Assistance Programs

Patient assistance programs are run by pharmaceutical companies to provide free medications to people who cannot afford to buy their medicine. RxAssist offers a comprehensive database of these patient assistance programs, as well as practical tools, news, and articles so that health care professionals and patients can find the information they need. All in one place.

Welcome

Provider Center to access the database and other resources.



Patients

Information about free medications

Find information about free and low cost medicine programs and other ways to manage your medication costs.







Patient Assistance Program Center

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Provider Center

Use the Database Search below to find patient assistance programs. Get more indepth information on a range of topics by visiting The Learning Center.



AstraZeneca is a proud sponsor of RxAssist



Database Search

Search our database to find current application forms and information on patient assistance programs. Click here for detailed instructions.

Search By: O Drug Name

Company Name

Search Term: CYMBALTA

Submit

nter drug, brand or company name or first few letters)

Mukiple Drug Search

PAP Program Direct

Donate to RxAssist



Did you know?

RxAssist has a resource called 'Finding Low Cost Diabetic Supplies' in the Learning Center. You can print it out here. While you are there, be sure to check







Patient Assistance Program Center

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Program Details

ELI LILLY & COMPANY Lilly Cares Cymbalta (duloxctine hcl)

CONTACT INFO

Address: PO Box 230999

Centerville, VA 20120

Phone: 1-800-545-6962 Provider Phone:

Fax: Website: Lilly Cares website

Application Forms & Instructions

The following documents are provided in interactive PDF format, allowing you to type information directly into the form.



Form (English)



Refill (English)

ELIGIBILITY

Eligibility Info:

- To qualify for the Lilly Cares Program, patient must not have prescription coverage and must meet income guidelines.
- Individuals eligible for Medicare are not eligible for Lilly Cares services.
- Patients must not have any other prescription drug coverage (Medicaid, VA, Blue Cross, Medicare Part D, etc.)

Print-friendly version of this page



Limitations of PAPs

- Application must be completed by Health Care Providers
- Applications and eligibility requirements are not standardized
- Lengthy wait time
 - Average of 4-6 weeks for patient to receive medication
- Continued drug provision is not guaranteed



Advantages of PAPs

- Free and discounted medications!
- Great way to boost patient adherence
- Mail-order option available
- Available to US citizens and legal residents
- Some offer assistance to Medicare patients







Generic Drug Programs

1: Walmart and Target \$4 (30-day supply) \$10 (90-day supply)



2: Costco

3: Rx Outreach: mail order pharmacy



1: Walmart and Target \$4/10 Generics

- Incomplete formularies
- Only offer specific doses and quantities

Blood Pressure Drugs	30 day QTY #30 tabs	90 day QTY #90 tabs
Lisinopril 20 mg	\$4	\$10
Lisinopril 40 mg	Not on formulary	









Shop Now at Costco.com

Click here to register

Email

Password

Forgot Password?

LOGIN

Search

Pharmacy

GO

ORDER PRESCRIPTIONS

- New Patients Click here to get started.
- Refill Prescriptions
- > Transfer Prescriptions
- New Prescriptions
- Prescription Status
- Patient Information

Welcome to the Costco Pharmacy



RESOURCE LIBRARY



Download Order Forms CLICK HERE

Download Our

Shop Health & Wellness

The brands you trust at great Costco values.







Prescription Price Checker





2: Costco

- Les Don't need a membership for medications
- Generic drug savings is greater than brand
- Can check pricing on the website

Example: 30 day supply of Gabapentin

Walmart	Costco
\$120	\$90

\$360 saved per year



Rx Outreach®



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Eligibility

Medications Available

Application

Clinic

Forms

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PRICE POSSIBLE FOR MOST MAIL ORDER PRESCRIPTION DRUGS DELIVERED TO YOUR HOME.

Compare Our Prices To Retail And Save



\$20 for a 180-day supply for more than 150 medications

Same price for any dose or strength

More than 400 medications to choose from

Welcome To Rx Outreach...

www.rxoutreach.org

Ax Niech is an Dispositif in Chair that the training the Chair and the c

access to affordable medications to preserve their quality of health.

Our mission is straight-forward: providing medications to make a difference for people in need.

As a non-profit organization we serve as a catalyst for public, private and charitable interests to work together to bring appropriate drug therapies to those who have limited or no access today.



3. Rx Outreach Mail-Order Pharmacy for Generics

- High quantity limits: May cover up to a 6-month supply, this is the greatest cost savings
- Great for chronic drugs and patients with mobility issues
- Only eligibility criteria is income



Must Be Poor to Qualify Insurance Status NOT Relevant

# People in Household	Annual Income Cutoff
1	< \$33,510
2	<\$45,390
3	<\$57,270
4	<\$69,150
Each additional person	\$11,880



Easy application!

- 1. Check Rx Outreach drug list
- 2. Make sure to write 90 or 180 day supply on the prescription and give it to the patient
- 3. Patient mails out
 - a. Prescription
 - b. Completed application
 - c. Payment



Check the Formulary

Disease \$	disease_linl�	Rx Outreach Medication List •	Brand or Generic \$ Equivalent	Brand_link \$	Available strengths offered through Rx \$ Outreach	Fee per 90 day ♦ supply	Fee per 180 da \$ supply	Fee by Quantit \$
Blood / Heart		Folic Acid tablet	N/A		1mg	N/A	\$20	
Blood Pressure / Heart		Furosemide tablet	Lasix®		20mg, 40mg, 80mg	N/A	\$20	
Seizures	seizures	Cobapendir Capsule	Neurontin®		Toomg, Soomg, 100mg	N/A	N/A	\$30 for up to 270
Seizures / Pain		Gabapentin tablet	Neurontin®		600mg, 800mg	N/A	N/A	\$45 for up to 270 tablets
Cholesterol / Triglycerides	Hour France	Gemfibrozil tablet	Lopid®		600mg	\$30	\$53	
Diabetes	diabetes	Glimepiride tablet	Amaryl®	Amaryl®	1mg, 2mg, 4mg	N/A	\$20	
Diabetes	diabetes	Glipizide ER tablet	Glucotrol XL®		2.5mg, 5mg, 10mg	\$35	\$65	
Diabetes	diabetes	Glipizide tablet	Glucotrol®		5mg, 10mg	N/A	\$20	
Diabetes	diabetes	Glyburide, micronized tablet	Glynase® PresTab®		1.5mg, 3mg, 6mg	N/A	\$20	
Diabetes		Glyburide/Metformin tablet	Glucovance®		1.25/250mg, 2.5/500mg, 5/500mg	\$30	\$55	



Generic Drug Programs Review

Mr. Murphy takes 1 Tab of Gabapentin 800mg PO 3 times daily

Walmart	Costco	Rx Outreach		
30 day supply	~ 30 day supply	90 day supply		
90 pills	100 pills	270 pills		
\$120	\$96 \$45			
\$120/month	\$86/month	\$15/month		

\$1260 saved per year!



PAPsfound on RxAssist.org



Shop around the GENERIC Drug Programs:

Target
Walmart
Costco
Rx Outreach



Objectives

Underserved Population

Pre-existing Condition

Uninsured

Underinsured

Medicare Part D

Resources



Case #2 The UNDERinsured: Employee



Mrs. Jones, a 64 yo woman, presents at clinic for a routine follow-up regarding rheumatoid arthritis.

She receives infliximab (Remicade) infusions every eight weeks. She has had an excellent response, but she is having difficulty paying for the infusions.

In the past, she paid \$50 per infliximab infusion. Her insurance has recently changed, and her new insurance has very limited drug coverage.

She will now be responsible for the full \$2,400 per infusion.

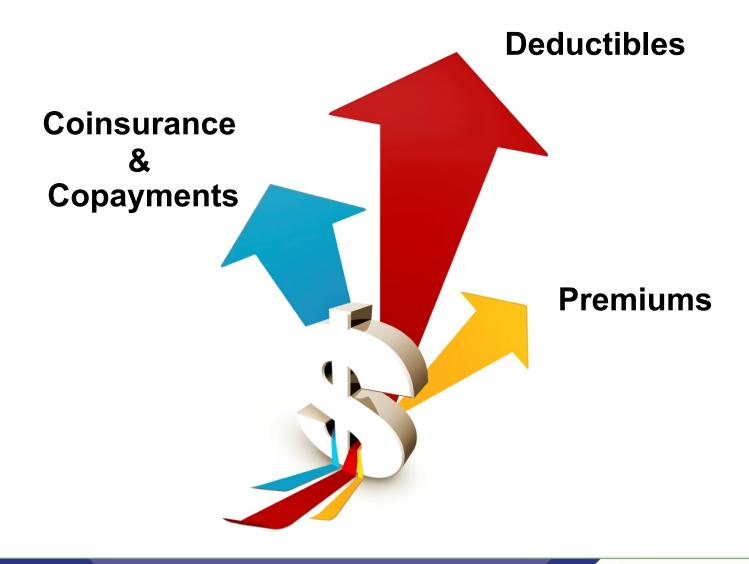


Examples of the UNDERinsured

- Insured patients with high out-of-pocket expenses
 - Insurance paid for by employer
 - Insurance purchased privately
- Medicare patients
 - Medicare Part B drugs have a 20% co-insurance
 - Medicare Part D patients have a coverage gap



Increasing Health Care Costs





Co-Pay Assistance Programs

Targeted for high-cost, specialty medications

For the insured only

RxAssist.org





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topics by visiting The Learning Center.



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Database Search

Search our database to find current application forms and information on patient assistance programs. Click here for detailed instructions.

Search By:
O Drug Name Company Name

Search Term:

Submit

(Enter drug, brand or company name or first few letters) Multiple Drug Search

PAP Program Directory

Printable Drug Lists



Learning Center

The Learning Center has all the resources you need to keep current with health care reform, connect to other program leaders and get online materials selected just for your needs. Visit the Learning Center.



Get Connected!

Stay on top of the latest PAP news, information and issues. Join DyConnecte our national lieteon, and RxAssist Brochures - Click here for more information

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Did you know?

RxAssist has a resource called 'Finding Low Cost Diabetic Supplies' in the Learning Center. You can print it out here. While you are there, be sure to check out the other great resources!

You can also sign up for the RxUpdates eNewsletter to receive announcements by email.



Prescription Drug Discount Program

Get your card today! Click here for more information



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Additional Help

additional resources? All of our patient education materials, fact shippers of the brms, etc. have been moved to our new Resource Library in the Learning Center today!

Co-pay assistance foundations

Organizations that assist individuals with medication co-pays for specific diseases. There may be waiting lists for this help.

State AIDS Drug Assistance Program (ADAP) information

ADAP provides HIV/AIDS related prescription drugs to uninsured individuals or individuals who cannot get all of their medication needs met through their insurance payer. Each state operates its own program and has its own application process.

Federal Poverty Level (FPL) calculator

The Federal Poverty Level is used to determine eligibility for many medication assistance programs, as well as government benefit programs. The Federal Poverty Level is the minimum amount of income that a family needs for food, clothing, transportation, shelter and other necessities as determined by the Department of Health and Human Services. The FPL varies according to family size.

Federal and state assistance programs

Government sponsored programs for health care, food stamps, housing, etc.

Health insurance options

This government site includes the latest information on options for people



The Learning Center has all the resources you need to keep current with health care reform, connect to other program leaders and get online materials.

Visit Now



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- Do NOT search for drug
- Click on "Additional Help"
- Click on "Co-payAssistancePrograms"
- Download PDF and search for disease

RxAssist.org

Disease	Co-pay assistance organizations offering assistance				
Acromegaly	www.panfoundation.org	www.patientservicesinc.org			
Acute Exacerbations of Multiple Sclerosis	www.cdfund.org				
Acute Porphyrias	www.healthwellfoundation	.org/			
Advanced Idiopathic Parkinson's Disease	www.patientservicesinc.or	9			
Age-Related Macular Degeneration	www.cdfund.org	www.panfoundation.org	www.theassistancefund .org		
Alcohol Dependence	www.cdfund.org				
Alpha-1 Antitrypsin Deficiency (Alpha-1)	http://caringvoice.org/	www.patientservicesinc.org			
Anemia Associated with Chronic Renal Insufficiency/Renal Failure	www.healthwellfoundation	.org/			



PATIENT ADVOCATE FOUNDATION CO-PAY RELIEF

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Disease and Treatment Silos:

Autoimmune Disorders

- Ankylosing Spondylitis
- · Crohn's Disease
- Idiopathic
 Thrombocytopenic

Purpura

- Inflammatory Bowel
- Plaque Psoriasis

Disease

- Psoriatic Arthritis
- Ulcerative Colitis

Breast Cancer

Chemo Induced Anemia

Chemo Induced Neutropenia

Colon Cancer

Cutaneous T-Cell Lymphoma

Rheumatoid Arthritis Resources

Patient Advocate Foundation's Co-Pay Relief (CPR)

The CPR program provides co-payment assistance to insured Americans who financially and medically qualify. Click here to start your application

Patient Advocate Foundation (PAF)

PAF is a national 501 (c)(3) non-profit organization which provides professional case management services to Americans with chronic, life threatening and debilitating illnesses.

Rheumatoid Arthritis Resources and Programs

The Patient Advocate Foundation's (PAF) Co-Pay Relief (CPR) Program does not review the information contained on the website links provided for content, accuracy or completeness. Use of and access to this information is subject to the terms, limitations and conditions as outlined on the accessed websites.

PAF Co-Pay Relief Program makes no representation as to the accuracy or any other aspect of the information contained on any website accessed from the CPR website, nor does PAF Co-Pay Relief Program necessarily endorse the website information provided.

The information presented on the PAF Co-Pay Relief website is provided for general information only and is not intended as a substitute for medical care. Please talk with your healthcare provider about any information you acquire from this or any other website accessed through the PAF Co-Pay Relief program website.

Arthritis Foundation

Phone: 800-283-7800 www.arthritis.org View organizations that offer financial assistance



Limitations of Co-Pay Assistance Programs

- Application process can be complicated
- Amount of money allocated to each program is limited
 - Funded by drug companies
 - Programs re-fund monthly, quarterly, or annually
 - Must apply early to increase possibility of getting help
- Coverage of specific drugs can be dropped at any time
- Must be for FDA approved indication



Advantages of Co-Pay Assistance Programs

- Fast turnaround time after submitting the application
- Can apply to another program if denied
- ONLY option for patients who cannot afford to pay for expensive biologics



Objectives

Underserved Population

Pre-existing Condition

Uninsured

Underinsured

Medicare Part D

Resources



Case #3 The Underinsured: Medicare Part D



Mrs. Jones, from Case #2, is now 65 and has enrolled in Medicare, including Part D.

Her infliximab infusions are not covered by Part D; instead, they are covered by Part B, Medicare's outpatient benefit.

Under Medicare Part B, Mrs. Jones has to pay 20% of the cost of her infusions (\$500 every 8 weeks).

She is on a fixed income and struggles to pay for her infusions and would like to know if there's any way she can save money on her other medications.

Current Medications

- Risendronate 35mg weekly
- Lisinopril 10 mg daily
- Methotrexate 15 mg weekly
- •Albuterol MDI 1-2 puffs PRN
- Fluticasone/Salmeterol 250/50 2 puffs BID
- •Calcium Carbonate 500 + D TID
- •Infliximab 200mcg infused Q 8 weeks



The Medicare Alphabet

Part A: Hospital

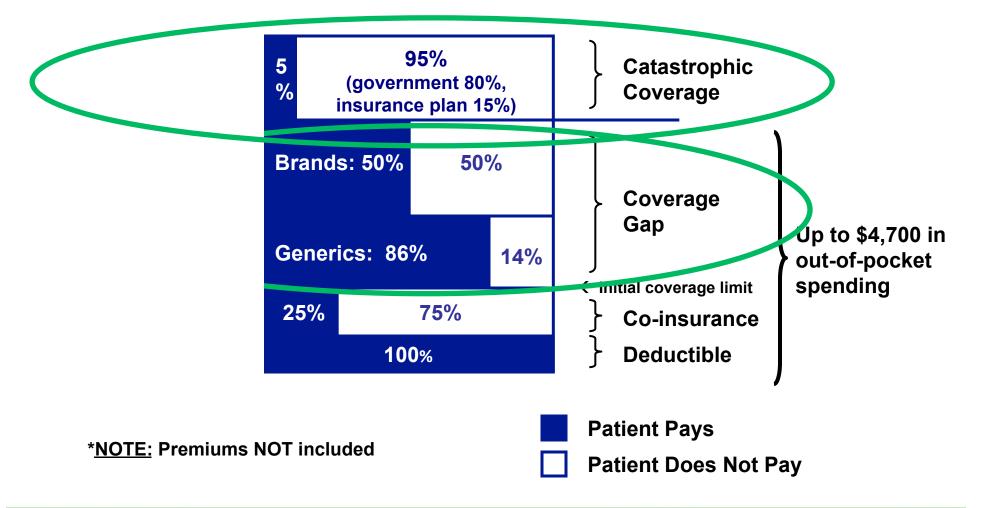
Part B: Outpatient Medical

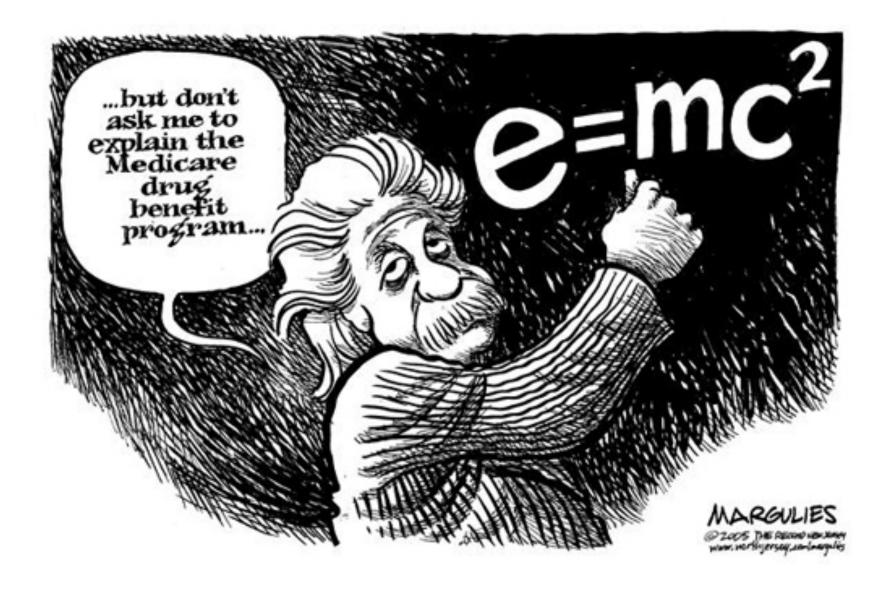
Part C: Medicare Advantage (A+B+D)

Part D: Prescription Drugs



The "Basic" Part D Plan in 2012

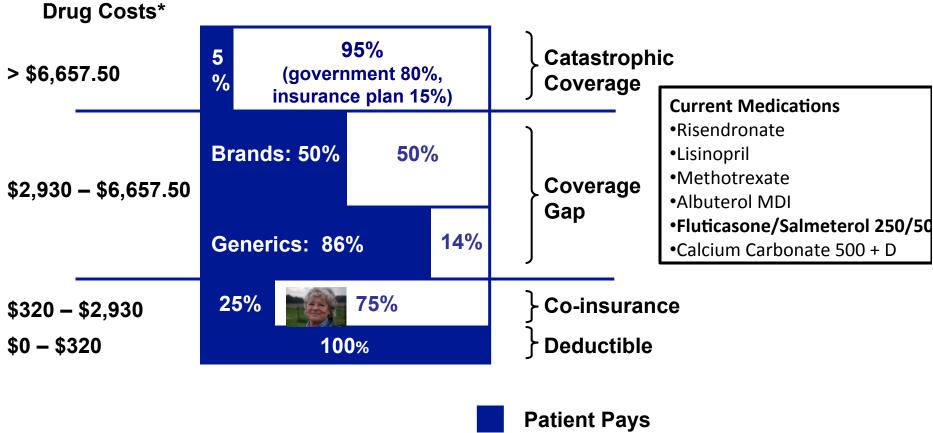




The "Basic" Part D Plan in 2012



Total Annual Drug Costs*





Patient Does Not Pay

Cost Saving Strategies for Medicare Part D

- Strategy 1: Determine patient eligibility for Low Income Subsidy (LIS)
- Strategy 2: Get patients into the best plan
- Strategy 3: Delay the coverage gap
- Strategy 4: Help patients during the coverage gap



Medicare Part D

Strategy 1: Low Income Subsidy

Strategy 2: Best Plan for Patients

Strategy 3: Delay Coverage Gap

Strategy 4: Help During Gap



Strategy 1: LIS Benefits of the Low-Income Subsidy

- No coverage gap (donut hole)
- Lower or no deductible
- Lower or no monthly premiums
- Lower co-pays
 - Graded benefit: Poorer patients receive more help
- Estimated savings of ~\$4,000 a year



Strategy 1: LIS Eligibility for Low-Income Subsidy

1.Income

- Graded Below 150% Federal Poverty Level (FPL)
 - single person household: ≤ \$16,335/yr (~\$1350/mo)
 - married couple household: ≤ \$22,065/yr (~\$1840/mo)

AND

2.Assets

- Less than \$12,640 (single person)
- Less than \$25,260 (married couple household)
 - The patient's home and car do not count



Strategy 1: LIS



Medicare Part D

Strategy 1: Low Income Subsidy

Strategy 2: Best Plan for Patients

Strategy 3: Delay Coverage Gap

Strategy 4: Help During Gap



Strategy 2: Lowest Cost Plan



MyMedicare.gov

New to Medicare?

Compare Drug and Health Plans Compare Gap Policies Enroll Coverage Information Formula er - 2011 Plan Data Check Y Dllment



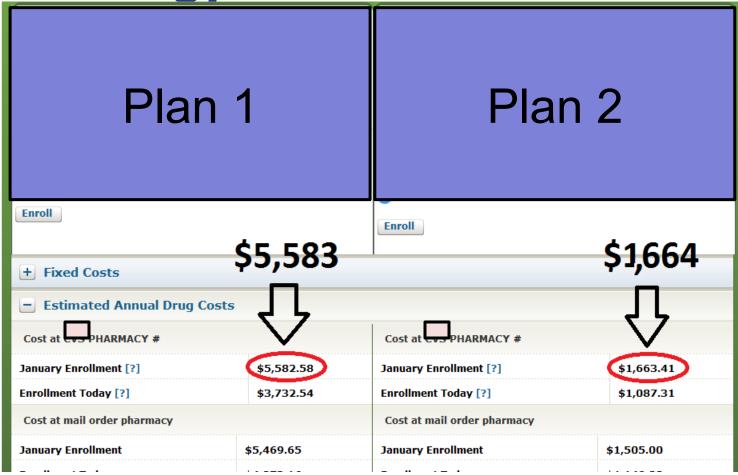








Strategy 2: Lowest Cost Plan



Savings: \$3,919



Medicare Part D

Strategy 1: Low Income Subsidy

Strategy 2: Best Plan for Patients

Strategy 3: Delay Coverage Gap

Strategy 4: Help During Gap



Strategy 3: Delay the Coverage Gap

- Prescribe generic medications
- Recommend generic drug programs
 - Walmart, Target, etc.
 - Tell patients not to use insurance on generics

Using Insurance Coverage:

\$5 co-pay (cost to patient)

+

\$20 counted toward donut hole

<u>Using \$4 Generic Program:</u>

\$4 out-of-pocket cost

+

\$0 counted toward donut hole



Medicare Part D

Strategy 1: Low Income Subsidy

Strategy 2: Best Plan for Patients

Strategy 3: Delay Coverage Gap

Strategy 4: Help During Gap



Strategy 4: Help During the Coverage Gap

- See if patient is LIS eligible
- Patient assistance programs
 - RxAssist.org
 - Typically, LIS-eligible patients are <u>NOT</u> eligible for PAPs
- Compare prices for higher-cost drugs



But I only have 15 minutes...

- Prescribe generics or cost-effective brands
- Remind patients to re-evaluate Part D annually
- LIS/Dual-eligible patients: Write for 90-day supplies
 - Saves 2 copays!
 - Must write for 90 days, not 30 days with 3 refills
- Empower patients
 - 1-800-MEDICAR(E) enroll in a plan

