Optum Rx®

White paper



Data drives prescribing transparency and improves therapy outcomes

Study shows how Optum PreCheck MyScript® (PCMS) – real-time benefit check (RTBC) data – reduces prior authorizations (PA), lowers costs and improves medication adherence.

Top research findings show PCMS:

- Provides prescription transparency that helps to eliminate benefit confusion and presents real time medication alternatives with saving opportunities
- Encourages better prescriber-patient conversations at point of care
- Improves patient medication adherence

Executive summary

This paper discusses research findings on how PCMS data embedded into the RTBC workflow delivers value for patients, providers, health plans and pharmacies. Analysis by Optum Advisory Services continues to evaluate how PCMS data streamlines the prescribing process and supports better patient care. Among key research highlights:

- Formulary options and requirements displayed using PCMS data allow providers to easily avoid PA requests where clinically appropriate.
- PCMS data minimizes the time and cost associated with provider PA requests and impacts to costs for key stakeholders in the healthcare system.
- PCMS data helps enhance transparency, provider efficiency and health outcomes, including increased medication adherence for select chronic conditions.



PCMS data used during patient prescribing showed a **5%–6% higher medication adherence** rate in 5 chronic conditions.[2]

Stakeholder benefits and outcomes at a glance	
Patients	$110 savings/per prescription fill[1]
	Across 5 conditions over 2 years, providers who utilized PCMS data when prescribing showed a 5%–6% higher patient medication adherence rate than non-PCMS patients.[2]
Providers	Saved over 42 minutes and $41 per prescription per patient by avoiding PA[1]
Health plans	$295 savings per prescription filled[1]
Pharmacies	4 minutes saved per paid claim[8]

Introduction

Providers want transparency regarding coverage, costs and PA requirements to help them support their patients. They also need help navigating the increasing volume of nonclinical tasks they face. Doctors spend up to 20 hours a week on paperwork, often taking as much time to document patient visits as they do actually caring for patients.[3] About 88% of doctors describe the burden associated with PA as “high” or “extremely high.” [4]

PA requests play an important role in managing prescription drug costs, controlling misuse and protecting patient safety to ensure quality therapeutic outcomes. At Optum Rx, providers tell us that the ability to minimize PAs and increase patient medication adherence is a key driver in their decision to adopt PCMS.

What is PCMS?

PCMS is real-time benefits check data that is embedded within providers' electronic health records (EHR) systems. During prescription processing, PCMS returns and displays patient-specific prescription benefit information at point of care. As the appropriate quantity and day supply are entered, Optum Rx processes that data in under 2 seconds and the results are displayed within the EHR. This allows the prescriber to see the patient's coverage status and cost, as well as any available preferred alternative medications, products or pharmacy channels.

PCMS data:

- Allows providers to focus more on patient care instead of administrative tasks
- Enables patients to get their medications and start therapies, while saving money
- Facilitates more informed decisions by providers and patients

Providing prescription process transparency at the point of prescribing is a key benefit of PCMS data. It can also eliminate benefit confusion and help patients get the most appropriate, economical medications available without delay.



PCMS gives providers access to available prescription options, out-of-pocket cost comparisons, PA requirements and benefit coverage details at the point of prescribing.

Smarter processes, easier decision-making, better clinical and financial outcomes

Study methodology

For this internal Optum Rx study, the evaluation consisted of 12 months of data including 28 million unique prescribing events and 30 million PA requests. The study compares prescribing events where PCMS data was used to complete a RTBC versus those where it was not used. The analysis shows the costs associated with each step of the prescription process, including when:

- Providers write a prescription and complete a PA
- Pharmacies fill a prescription
- There are any follow-ups by providers and pharmacies



Patients whose providers used PCMS data were more likely to obtain their medication than those whose providers did not use the tool.[5]

Industry benchmarks

Cost and time savings were calculated using industry benchmarks such as:

- Average provider salary
- Average length of time to write a prescription
- Frequency of prescriptions being rejected for PA
- Length of time for providers to respond to, and appeal, a rejected claim

Similar calculations were performed for the administrative steps in the pharmacy.

The impact of PCMS data on medication adherence was also measured. This reflected the experience of a continuously enrolled population (both before and after adoption of the tool) within 5 disease states: chronic heart failure (CHF), chronic obstructive pulmonary disease (COPD), diabetes, hyperlipidemia and hypertension.

New findings/correlations

Stars Rating improvement

Centers for Medicare & Medicaid Services proposes adding a health equity index reward for the 2027 Star Ratings to assess how well plans serve individuals with social risk factors. This change may further incentivize Medicare Advantage Organizations and Part D sponsors to focus on improving care for enrollees impacted by social risk factors.[6]

In response to this future change, Optum Rx conducted an analysis to determine any link between medication adherence and social determinants of health (SDOH). These included financial and housing insecurity, social isolation, transportation access limits and socioeconomic status. As expected, the more social risks patients experience, the lower their medication adherence.

PCMS data impact on SDOH and medication adherence

Our analysis indicated providers who utilized PCMS data while caring for patients with high financial stress showed patients on average had a 5.2% greater adherence rate than patients whose providers did not utilize PCMS.[5] After reviewing patient financial stress across all 5 health conditions where PCMS data was used, patients showed higher adherence rates. This increase was evident even though those patients may have faced the same social risk burden.

Chronic care patient medication adherence rates

Conditions	PCMS not used	PCMS used	Adherence rate (percentage increase when PCMS used)
	Medication adherence rate	Medication adherence rate	
CHF	80.9%	87.4%	**6.5%**
COPD	45.6%	50.8%	**5.2%**
Diabetes	73.9%	78.9%	**5.1%**
Hyperlipidemia	85.4%	90.8%	**5.4%**
Hypertension	78.8%	84.8%	**5.9%**

Predicting unmet social needs

Exploring the link between unmet social needs and adherence levels with PCMS revealed an important patient-care insight. As part of its analysis, Optum Rx developed patient-level risk scores to predict unmet social needs across the 5 SDOH domains noted below.[5] Social needs information was collected from a U.S. consumer dataset, consumer credit data, food access research atlas (USDA ERS data), county health rankings, health literacy (NCES data), UnitedHealth Group (UHG) claims data and UHG surveys. Scoring metrics ranged from 0 (high insecurity) to 9 (very low insecurity), and social risk scores assessed the likelihood of patients experiencing:

Housing insecurity

Lack of access to stable housing and even possible homelessness

Financial stress

Economic difficulty related to struggles with making ends meet

Transportation insecurity*

Transportation limitations, such as lack of access to a car and/or public transportation

Social isolation

State of having fewer social ties with friends and family

Food insecurity

A lack of adequate food and safe drinking water

Analysis indicated that providers utilizing PCMS improved medication adherence among patients with unmet social needs at the same rate as those patients not impacted by these 5 SDOH. Continued adoption and utilization of PCMS is a powerful lever providers can use to increase their Stars ratings.

* Based on age 65 or older populations



Impact on patients, providers, health plans and pharmacies

PCMS data benefits patients, providers, health plans and pharmacies in several ways, including lower costs, improved outcomes and reduced administrative burdens. Here is a summary of current outcomes and key findings from the research, grouped by stakeholders:



Patients

When prescribers selected lower-cost alternative medications suggested by PCMS data, patients saved an average of $110 per prescription.[1]

Providers presented with preferred alternatives switched to a lower tiered alternative 74% of the time. [1]

Patients whose providers used PCMS data were more likely to obtain their medication than those whose providers did not use the tool.[5]

After PCMS data is implemented by their providers, patients' medication adherence improved as follows (see chart on page 4):

- 6.5% increase for CHF[2]
- 5.2% increase for COPD[2]
- 5.1% increase for diabetes[2]
- 5.4% for hyperlipidemia[2]
- 5.9% for hypertension[2]

The increase in medication adherence is significant in light of clinical research showing adherence is a key factor in improving chronic disease outcomes and lowering healthcare costs.[7]

Providers

Providers using PCMS data save approximately 50 minutes per prescription each time they select an alternative that avoids PA requirements.[1]

They save an additional 50 minutes by further avoiding any downstream appeal processes. (Note that providers typically write an alternative prescription when an appeal is denied, adding even more time for handling a single prescription for one patient.)[1]

Based on average salaries and time estimates for managing the PA process, writing a prescription requiring a PA costs providers $41.05 on average.[1] Note that this cost could be avoided in every case in which providers select an alternative presented by PCMS which does not require PA.

Health plans

- Health plans save $295 on average each time prescriber shifts to an alternative medication suggested by PCMS data.[1]
- Plans benefit from increased efficiencies and lower cost for patients, providers and pharmacies.

Pharmacists

- Pharmacies realize lower administrative costs per prescription for medications not requiring PA.
- Pharmacies save $1.78 per prescription.[1]
- PCMS data reduces the number of claims when a formulary rejection occurs.
- Pharmacies save 4 minutes per paid claim when using PCMS data for formulary rejections.[8]

New enhancements

Optum Rx continues to broaden PCMS data access to ensure the entire care team has visibility into patient-specific prescribing costs within the normal workflow. By further advancing PCMS data, providers enjoy greater transparency, including improved "next step" messaging and "smarter" preferred alternatives within the normal workflow. Future PCMS data enhancements aim to include diagnosis codes for more personalized alternatives and other pertinent data regarding step therapy and PA requirements.

Conclusion

In today's complex healthcare environment, getting patients the right medication without delay is one of the keys to reducing costs and improving outcomes. To meet this challenge, Optum Rx is giving providers **real time actionable prescription data** for more effective prescribing that help reduce administrative burden and lower patient out-of-pocket costs.

PCMS data reduces friction and increases transparency in the prescribing process by minimizing the need to obtain PAs and providing robust clinical and cost data. By spending less time on PA paperwork, providers can spend more time on patient care and improved access to cost-efficient medications. Today, we have approximately 1 million providers utilizing PCMS servicing over 6 million members a month.[1]



Eliminate benefit confusion

Get patients the most appropriate, economical medications available without delay.

Visit **rtbc-pcms.com** to learn more.

References

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