In a survey of 1000 patients, half said they did not fill a prescription because it cost too much when they arrived at the pharmacy.1

3 in 10 patients did not take a prescription because it took too long to fill.2

Up to 37% of patients have abandoned treatment when prior authorization is required.3

For specialty medications, delays can range from weeks to months.

We’re working to increase adoption of standards that can help patients obtain appropriate medications in a timely manner and save on their prescription costs.
Numerous studies have shown that the cost of prescriptions is a key cause of people failing to begin or continue prescription drug therapies. Failure to start on a prescription often occurs when a patient doesn’t know what it will cost and faces sticker shock at the pharmacy counter. Prescription abandonment will likely become more prevalent in an aging U.S. population with more chronic conditions requiring maintenance medications. It is also a serious problem for an increasing number of patients who encounter the startling high cost of specialty medications to treat complex conditions.

While prior authorization can interfere with patient access to care, the time delay in obtaining specialty medications is an even greater barrier to access. The enrollment process, benefit coverage decisions, safety and education components required before specialty medications can be dispensed are time consuming. The required information exchange typically occurs through phone and fax methods, which exacerbates delays. Although some patients can obtain specialty medications in a week or so, some report waiting months. While patients wait -- or give up -- their disease progresses and their health deteriorates, sometimes seriously.

Use of this information technology at the point-of-care enables physicians and patients to discuss and select the lowest cost medication that is clinically appropriate.

The average out-of-pocket medication cost savings for the patient at the time of dispensing was $21.40, with the highest cost savings at dispensing being more than $1,000.

In a world facing new health challenges every day, your support of the NCPDP Foundation has never been more important.

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1. Surescripts, Prescription Price Transparency and the Patient Experience, February 2020
2. Surescripts, Prescription Price Transparency and the Patient Experience, February 2020
3. CoverMyMeds data on file, based on two months of paid and rejected data from PioneerRx, 2019

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