Decreasing Medication Delays: Maximizing the Efficiency of Patient Assistance Program Applications Through an Electronic System at a Student-Run Free Clinic

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The Experience

"*I can barely breathe when I walk and I can't afford my inhaler*," said one patient at our student-run free clinic. Time after time, we listen to our patients' struggles and try our best to support them, as many of them manage co-morbid, chronic conditions, but there is only so much we can do as students.

In 2019, more than 20% of Americans were unable to obtain prescription drugs due to excessive cost, a substantial cause of uncontrolled health conditions across all patient populations.[1] The combination of unregulated prices from pharmaceutical companies and limited patient access constitutes a public health crisis. To mitigate this crisis, patient assistance programs (PAPs) are sponsored by pharmaceutical manufacturers to provide free medications for patients that meet specific criteria.[2]

By guiding our patients through the PAP application process, we realized that students can alleviate some of the financial burden patients endure. Applications require various administrative steps, resulting in medication delays (see *Figure 1*).

Last year, an analysis of 100 randomly selected paper applications from 4/9/16 to 11/17/21 demonstrated that it takes an average of 62 days for an application to be approved at our clinic. More specifically, it took an average of 4 days to obtain patient signatures, 19 days to obtain prescriber signatures, 30 days to obtain proof of income (POI), 43 days to fax the application to the pharmaceutical company, and 105 days to receive rejection status. "*When we saw the results of this analysis, my jaw dropped. I could not believe how long it took to get our patients life-saving medications. We knew there was some way to expedite the process, and our team was dedicated to discovering a way to achieve so.*"

To decrease the processing time of applications, we implemented a streamlined, secure, and electronic-based platform in November 2023. With Adobe Editor and Frevo applications, we transformed electronic PDF applications to online forms. Students and faculty volunteers can access these forms on our clinic's main website. The forms were created so that patients and providers only provide their signature once. Moreover, when the volunteer is prompted to select an attending name as the prescriber, their licensing information (such as NPI number, DEA number, and clinic address) is automatically populated. This auto-population feature decreases the time needed to fill out an application and ensures that all fields are completed. If the patient has no income, there is an option to generate an automatic no income letter, which includes the patient's signature and the clinic's letterhead. When the volunteer submits the completed application, it is automatically uploaded to our secure Teams Channel, which is accessible for all volunteers of the clinic and allows us to fax the application within several minutes.

After three months of utilizing this electronic system, we analyzed 100 randomly selected electronic applications from 11/8/22 to 2/23/23, which revealed an average of 15 days to obtain approval, a 75.8% decrease from the amount of time it took for approval before implementation of the electronic system. Additionally, all applications received a patient signature on the same day of application initiation. It took an average of 1 day to obtain prescriber signature, 3 days to obtain POI, 6 days to fax the application to the pharmaceutical company, and 15 days to receive rejection status. All administrative steps significantly decreased with the implementation of the new system (p<0.01).

The electronic system has significantly expedited the approval and overall process of applications. Automating income letters for eligible patients has decreased the time required to obtain POI. Likewise, online accessibility of applications has decreased time required to fax applications to companies. "*It has been a tremendous achievement to see that our electronic system has helped patients get their medications faster,*" said one of our student volunteers who helped create the electronic system.

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Experience

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Obtaining POI and faxing applications are primary causes of delays, with missing POI being the main reason for rejection. Therefore, we plan to implement a new, faster method of obtaining POI where we text patients a link to safely upload documents. Moreover, we hope to automate faxing complete applications when submitted.

"*We really try our best to provide patients with as many resources as possible, and these applications have not only saved our patient's a large amount of money, but that have also saved their lives. I feel extremely fortunate to be in a position where I am able to help the lives of our underserved community,*" exclaimed one of the student volunteers in charge of handling PAPs.

Our goal is to share our findings with clinics utilizing PAPs and encourage others to implement similar interventions into their practices, ensuring continuity of patients' medication regimes and better management of their conditions, ultimately improving the healthcare of vulnerable populations. As MD/MPH students and future providers, we seek to provide accessible and quality healthcare that addresses the critical role of social determinants of health and optimizes patient care.

Figure 1. Administrative Steps for the Patient Assistance Programs (PAPs).
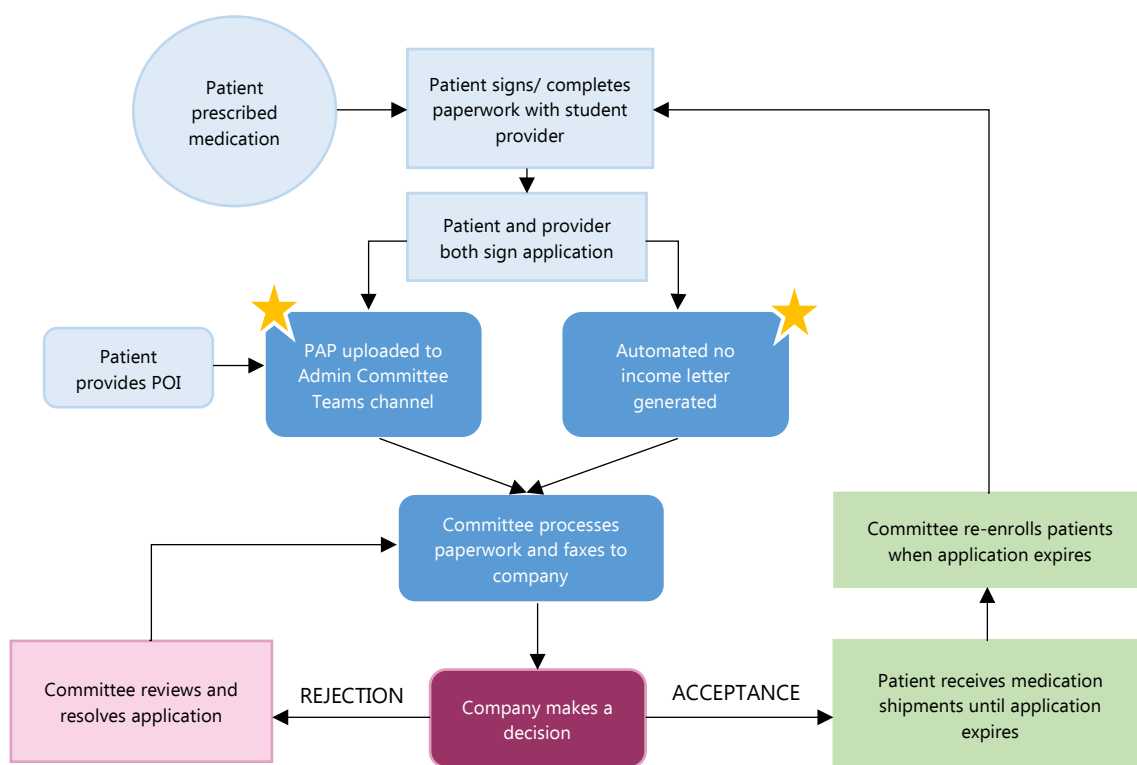
Summary – Accelerating Translation

Why Patients Wait Long for Medications from Patient Assistance Program Applications from Pharmaceutical Companies and Interventions to Decrease Wait Times

Many patients need medications to live. Thus, their health and wellbeing often depend on their medications. Patient assistance programs (PAPs) give uninsured and underserved patients medications that they might be able to afford on their own. However, it is often difficult to be approved by these programs. The program's applications require many administrative steps, which results in delays for patients to receive their medications. Last year at our student-run free clinic, it took an average of 62 days for an application to be approved. To address this problem, we have implemented an electronic-based platform to complete these applications, which has decreased the approval time more than 75%. Our goal is to share our findings with similar clinics utilizing PAPs and encourage others to use them in their practices. As MD/MPH students and future providers, we want to increase access to quality healthcare for patients who are most in need.

References

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