RxBenefits utilizes an independent, client-focused approach to provide best-in-market clinical solutions for employers. Our Clinical Advantage Program provides sustainable pharmacy strategies, tailored to help each client meet their specific goals and needs.

IN THE MARKETPLACE TODAY...
A smaller number of drugs are driving a larger percent of cost. In 2017, pharmacy claims greater than $1,000 for a 30-day supply account for 2% of total claims and more than 55% of total plan cost.¹

Not only is off-label use of drugs costly for plans, but it also can be dangerous for members’ health

- More than one in five outpatient prescriptions written in the U.S. are for off-label indications
- Only 20% of off-label prescribing is supported by strong evidence²
- Off-label prescriptions have a 54% likelihood of causing an adverse drug event²
- Doctors are not required to disclose off-label drug use to patients

$302.36
Average brand non-specialty drug cost¹

WHAT IS A HIGH DOLLAR MEDICATION (HDCR)?
- A brand medication on the pharmacy formulary that exceeds a set high-dollar threshold
- Alternative less costly medications, may provide equal therapeutic benefits
- High likelihood of off-label prescribing, overuse and misuse
- Expensive “new” combinations of older known drugs

For many pharmacy plans, there is a review of high dollar, specialty claims, but what about those high dollar brand claims?

The High Dollar Claim Review program provides umbrella protection to guard clients and members against unnecessary spending on high-cost medications.

1  RxBenefits Book of Business Avg. Gross Cost
2  2017 JAMA Internal Medicine study

Contact us to learn more.
800.377.1614
rxbenefits.com
HOW HIGH DOLLAR CLAIM REVIEW WORKS

Our High Dollar Claim Review program provides clients with umbrella protection against high-cost prescription claims for approved formulary drugs. Prescription claims over the threshold dollar amount are flagged prior to payment and reviewed for clinical appropriateness. This additional level of clinical oversight protects against unnecessary spending, saving clients money and providing improved visibility into claim reviews, decision processes, and cost savings.

HDCR OVERSIGHT PROCESS

RxBenefits manages the clinical review process for high dollar claims, providing oversight of the process. We communicate trends and savings results to clients through detailed reporting and analytics.

1. A prescription claim first runs through all of the usual point-of-sale reviews.
2. If a claim passes all of these reviews, the HDCR filter analyzes if the claim exceeds the threshold amount.
3. The pharmacy receives a denial message (“cost exceeds maximum”) and is provided with a contact number for the prescriber to initiate a clinical review.
4. The clinical reviewer checks to ensure the claim is for an FDA-approved indication and an FDA-approved dosage.
5. Following a clinical review, one of four actions will occur: the medication is approved, the medication claim is denied, the doctor may decide to withdraw and prescribe a different medication, or the reviewer can dismiss the claim due to lack of communication from the prescriber.
6. If the medicine is approved, a PA number will be entered into the system, approving the Rx.
7. If denied, an appeal process is available.

Threshold Amount for High Dollar Claim Review

- $1,000 max per less than 34-day supply
- $3,000 max per greater than 35-day supply

REVIEW TURN-AROUND TIME

Reviews range from 2 hours to no more than 72 hours from the time the review is initiated, depending on prescriber activity. If the prescriber does not respond within 24 hours, the reviewer will attempt contact once daily for three days.

ACHIEVE A CLINICAL ADVANTAGE

Our Clinical Advantage Program ensures the prescription drug program is optimized to save clients money and create a high level of member satisfaction. Find out which high-cost, non-specialty medications are driving your clients’ pharmacy trend. On average, clients save 5% - 7%.

About RxBenefits

RxBenefits is a full-service pharmacy benefits advisory firm, serving employee benefit consultants and their self-insured, mid-market employer clients for more than 22 years. Our client-focused pharmacy model offers aggregate pricing, concierge service and independent, strategic clinical management that employer groups won’t get with any other pharmacy administrator. Our tailored, sustainable pharmacy solutions deliver improved healthcare outcomes and help clients maximize savings.

Contact us today to get started with a no-cost, risk-free Clinical Assessment.

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