

Follow the Dollar



Over 95% of retail pharmacy prescriptions are paid through commercial PBM's/MCO's, Medicare and Medicaid plans. Follow the Dollar examines the following strategies and tactics to control costs of prescription drugs in the ambulatory market:

Prescription Process and Financial Flows

- Physician to Pharmacist to Patient
- Rx Claim Adjudication via PBM/Medicaid/Health Plan
- Process Flows and Implications of Electronic Prescribing
- Brand vs. Generic Reimbursement
- MAC Pricing

New Trends in Pharmacy Benefit Design

- Triple Tier Copay Structures
- High Deductible Health Plans
 - ➔ HSA's and HRA's
- Closed Formularies
- Pharmacy Network Incentives
- New Pricing Methodologies
 - ➔ ASP, AMP and WAMP Pricing
 - Low or no cost generics

Over the last ten years, PBM's, health plans and state Medicaid programs have employed sophisticated systems to manage the financial and clinical responsibilities they assume in representing their clients. In our Follow the Dollar course, we review the business rules

and tactics established by these payers who help manage the financial spend for each prescription processed:

- Prior Authorization Process Requirements
- Step Edits
- Copay Levels
- Clinical or DUR Edits
- Patient Deductibles
- Quantity or Days Supply Limitations
- Mail Service and Mandatory Mail Service

Several converging factors, such as new and expensive therapies and lifestyle medications have prompted PBM's/MCO's to move from closed formularies to third and fourth tier copays. Follow the Dollar examines cost implications from various stakeholder perspectives:

- Health Plan or PBM
- Patient
- Pharmacy
- Physician
- Manufacturer

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