The Role of Oncology Pharmacy Technicians to Address Health Disparities

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Cancer Treatment Costs: A Barrier to Care Cancer patients often face a range of financial challenges that hinder access to treatment. These challenges include missed work, credit payments delayed, reliance on community support, and even long journeys to receive care. These financial burdens create obstacles to innovative treatments, undermining the progress made in cancer care. As we move towards personalized cancer treatment, with a shift from traditional chemotherapy to oral oncolytics and other targeted therapies, the importance of addressing 'financial toxicities' becomes evident. These financial burdens, encompassing outof-pocket expenses, sacrifices, and time commitments, affect many patients, regardless of their insurance type. With rising number of targeted therapies being developed in oral formulation, a paradigm shift needs to happen to enable and empower Oncology Pharmacy Techs to play a very important role and proactive roles in addressing financial barriers to access appropriate life saving cancer therapies.

The evolving landscape of cancer treatment brings its own set of challenges, especially with the increasing use of oral oncolytics. However, it also presents opportunities to improve patient care and streamline resources. One such opportunity is medically integrated pharmaceutical dispensing, which not only benefits patients by saving them trips to the pharmacy but also creates an ancillary revenue stream for physicians. As we continue to advance in the field of cancer therapy, it is crucial to embrace solutions like these and foster the role of a collaborative pharmacy team in addressing the rising challenges. Pharmacy-led patient assistance programs play a key role in mitigating health disparities in cancer treatment by providing support to underserved populations. When addressing health disparities, the importance of addressing financial toxicities becomes evident as one of the largest challenges cancer patients can face is medication affordability. At CBCCA, we have made it our mission to ensure patients receive equal, quality care regardless of income, racial, or ethnic status. Through our pharmacy-led patient assistance programs we have begun to address these health disparities by offering personalized support and resources, medication management, and patient education. In the year 2024 from the months of January to June, we have connected 20 patients with foundations that cover the full cost of their medication. Another 90 patients have been connected to foundations providing financial assistance that greatly reduces the cost of their medication. Through comprehensive screening, we identify patients who qualify for and benefit from financial assistance and connect them with proper resources to aid in their treatment journey. This study aims to prove the effectiveness of pharmacy-led patient assistance and show how through these programs we can enhance equitable access to necessary therapies and improve treatment outcomes and reduce patient burdens. It is our belief that the implementation of these programs can help to reduce disparities and highlight successful models that can be replicated to further advance health equity in oncology care.



Implementation plan:

We implemented a robust and systematic process to ensure that every patient's treatment cost was addressed comprehensively. This process involved identifying suitable foundations, facilitating access to free drugs through voucher programs, and leveraging community resources to eliminate any concerns about the financial aspect of their treatment



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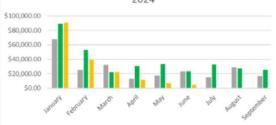
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Monthly Patient Assistance Paid 2022 vs 2023 vs



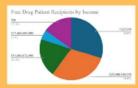
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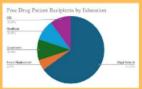
The amount of patient assistance provided at CBCCA, broken down by month. Data shows that assistance drops off after the first quarter due to patients meeting their deductibles. 2024 shows a decrease in assistance due to an increase in insurance coverage. We only have data for the year of 2024 up to June

Free Drug Program (January 2024-June 2024) (for uninsured or otherwise eligible patients)

Procedure Code	Date	Firms Prescribed	Cost per Dose	Tetal Cost	Number of Patients	
Drug A	12/00 mg	2	\$8,531.40	817,062,80		- 1
Drug B	300 mg		\$6,474.71	\$19,424.13		- 1
Drug C	750 mg	7	\$816.62	\$5,716.34		
Drug D	200 mg	30	\$11,025.68	\$330,767.40		- 5
Drug E	400 mg	4	\$22,051.16	\$69,204.64		- 1
Drug F	350 mg	9	\$9,473.99	\$95,395.91		- 1
Drug G	22.6 mg	4	8464.73	\$1,896.92		2
Drug H	100 mg	1	\$324.98	8334.99		1
Drug I	6332 mg	1	5221 9033 74	\$33,935,74		- 1
Drup J	300 mg		5915.90	\$2,745.90		- 1
Drug K	120 mg	0	\$5,399.82	\$32,390.92		
Total		70	\$99,396.71	\$617,670,36		20

Free Drugs completely covered through patient assistance foundations from January 2024-June 2024. 11 drugs were completely covered, of these drugs, 70 doses were included in coverage for a total of \$617,678.36 saved for patients.







This graph shows data from January 2024- June 2024. Of the 20 patients who received free drugs through foundatio

- 65% completed a high school education, 5% completed some high school, 10% completed an associate program, 10% completed a graduate program, and 10% did not report their education status.
- 60% make under \$50,000/year, 20% make \$50,000-\$74,999, and 5% make \$75,000-\$99,999, 15% did not report their income
- 50% of recipients were white, 40% were black, and 105 were Hispanic or Latino.

Since January of 2022, we have tracked patient assistance funding for our clinic and shown an increase in the dollar amount foundations have provided in assistance for our patients. However, in 2024, we have been seeing an increase in insurance coverage for patients which is aiding in the financial burden of patients. This combination of insurance and foundation assistance has resulted in low or no copays, greatly reducing out-of-pocket patient costs.

During the first quarter, we tend to see the largest amounts of patient assistance due to patients having not yet met their insurance deductible. This trend drops off in the following months and reaches a low point in the summer months Over a 6-month span from January to June of 2024, CBCCA has been able to connect 90 patients with assistance programs and foundations that provided \$188,155.73 in drug cost coverage. When comparing the combination of insurance coverage and assistance programs, \$6,196,691.18 of prescribed treatment drugs have been covered, resulting in a copay of only \$109,902.9 for patients at CBCCA from January 2024-June 2024.

Another 20 patients at CBCCA have qualified for free drug programs which covered the entirety of their medication costs totaling \$617,678.36 saved in the first 6 months of 2024

Pharmacist Led Financial Assistance Program: Drug costs vs insurance coverage and assistance coverage (January 2024-June 2024)

Drug.	Number of Parkers	Account 2xiX by Foundation	Brug Name		Immenses	Test	Total Fel	
Druit	1	\$14.0E		Total Bring Carl	Disease	Average		
Dog 2		526/8	Dept	\$1,21465	516,620,61	535.00	\$2.53	
Door 5	1	\$910 86	Deg2	\$1,00539	\$5.104.2K	540.00	\$667.17	
thrug 4	13	\$22,557.92	Drait.	\$1,200.00	\$8,116.52	2435-03	12:0	
Dog 5	1	39.414 W	Digt	5695,710.82	8876,899.72	\$12,691.52		
Ding 6	3	\$225.56	Degt	5-05.089.10	\$447,145.00	29,444.00	5309.29	
Drug 7	i	577.52	Deak	\$75,900.47	\$75,107.76	5221.96	5808	
Divise 4	1	39,454.16	Deal	\$1,119.99	\$60067.62	\$71.52		
Drug 9	1	\$120.20	Dear	\$21,010.67	309,678,69	99,890.18	38 (8	
Dreg 19	i	\$120.00	Degr	50,212,69	18,552.52	\$128.36	\$2,9.69	
Deg H		50.0	Degitt	\$40.00	\$5,020.00	\$130.00	\$8.00	
Deg 12	i	\$1.259.90	Threat-	86/h 1s	9098.88	521.01		
Deg 13	3	8071.65	Deg 17	5271,775.15	MATERIAL DE	51,796.0E	59.04	
Dec 14		MIL (\$1.30)	Dea 17	\$1,993,71	\$20,09.00	\$277.66	\$708.08	
Deg 15	1	\$2,5-2.90	DrgH	\$8,222,544,67	51,275,247,23	SHARES	3229.43	
Ding 1h	- 1	\$7-9 80	Dog D	\$81,616.71	\$60,691.56	32,143.16		
Dag 17	- 1	\$2.754.97	Dele M	\$55.442.6E	517,647.07	5239.46	50.09	
Ding 16	11	\$27,790,18	Deg 17	\$37,615.69	\$17,272.00	52,764.95	58:09	
Dreir 14		50.13-31	Dra III	\$789,609,15	3648,582.66	527,792.16		- 1
Deg 23		SIECK	Disc 19	3089 815 69	\$207,522.66	39,776.63	302.13	
Dregil	- :	\$1,412.73	Dr.g 28	571.655.53	315,295.29	3430	\$92.08	
Day 22	- 1	W.115 %	Deg 21	561,027.46	5/8/(01.76	\$1,462.77	\$8.00	
Deg25	- 1	\$7 × 61	Dea 12	\$10,517.00	\$16,852.00	31,145.%	\$1,19.78	
Dep21	-	\$1,200.00	D0:e71	5135,665.47	STEENING BE	\$195.05	957.68	
thec??		9601417	Dep 24	\$65,819,77	\$10,511.59	\$1,790.00	\$18.08	
Dwg25		92.78	Drg.25	\$140,230,30	\$335,333.54	56,534.12	\$11.28	
		\$2.79 \$1.328.88	13tra-36	\$40,69	\$179,33	\$1.00	5231,3#	
Dag 27 Dag 28		\$1,328.00 \$7,854.00	Deg.17	9.15,494-30	SELECTED	\$3.155.91	18:00	
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Drug 29	-		Deg 29	1175,750,38	2127,443.64	5109.74	590.06	
Daig 18		513.24	Drg.30	\$162.79	501.69	537.24	\$45.05	
Deg31	3	\$3,917.38	Dang H.	\$54,374.30	\$170,000,600	\$5,551.36	\$17,148.06	
Drug 32	1	\$5,694.90	13e at 72	323,330,80	815,856,94	\$5,564.30	38.06	
Dang Fit	- 1	\$1,200.01	Deg.25	1110,175,895	1130,788.99	\$3,287.51	38.08	
Deg74	1	\$2,912.78	Drg 34	\$10,051.73	\$7,399,33	\$2,942.78	58.06	
Drug 15		\$12,890.55	Deg 35	\$114.962.31	5117.524.91	\$12,190.55	58.00	
Dag 55	2	\$1,314.25	Director	\$166,066.47	5171,615.6E	\$3.164.37	53,790,59	
Ding37	1	\$2,474.97	Deg. 17	50,250.85	50,818,315	50,484.65	58.06	
Drag Jib		\$356.00	Deg.35	57,907,12	57,272.16	\$320.00	576.06	
Dag 33	. ,	57,518.93	(3rg, 29	\$5,860,40	\$7,846.73	52,740.01	569.16	
Tirol	90	\$108,195,75	You	\$5,000,000,000	16/00/03/5/45	\$100.137.79	\$100,002.90	

CBCCA has been able to connect 90 patients with assistance programs that aided in \$188,155.73 worth of their drug costs over the first 6 months of 2024.

The combination of insurance coverage and assistance programs has covered \$6,196,691.18 of prescribed reatment drugs resulting in a copay of only \$109,902.9 for patients from January 2024-June 2024.

Summary and Discussion

In summary, with proactive approach to identify financial barriers, search for eligibility and also patient assistance programs as well as following structural algorithms narrated above, we were able to help

- · Over 100 patients with patient assistance to get appropriate medications
- Procure free drugs worth \$617,678.36 (for 20 patients) who had otherwise no resource
- . Generate assistance worth \$188,155.73 for 90 patients for their out-of-pocket liabilities
- · In addition 65 patients received free drugs for intravenous administration

The total number of patients receiving cancer treatment was 439. Essentially nearly 50% of patients needed some type of help for the out-of-pocket support.

- · Not a single patient was turned away for treatment irrespective of their ability to pay
- We incurred a cost of \$250,000 in direct cost for the FTE and other logistics. Indirect cost includes \$90,000 MD time (Dr. Patel), an additional 1000 hours of study time and research and 200 hours of other staff (including business office for calculation for the OOP cost for individual beneficiary depending on the regimen).