About Medicom Health

For over 18 years, we've developed health engagement solutions for high-profile health care organizations.

- Today, more than 600 leading hospitals use our digital tools to enrich patient relationships & increase revenues.

Our newest solution is a practical, no-fuss way to reduce Rx costs for patients.

Low Prescription Fill-Rates Hurt Hospitals

- 30% of all new prescriptions are never filled[1]

- 65% of prescriptions are not taken to duration[2]

- Impact of non-adherence:

  - #1 driver of hospital re-admissions (poor outcomes)

  - Lower HCAHP scores (reimbursement)

  - Diminished pharmacy revenue

1. Eaddy MT, Cook, CL, O'Day K et al., "How Patient Cost-Sharing Trends Affect Adherence and Outcomes: A Literature Review," P&T, Vol. 37, #1, January 2012.Text

2. Eaddy MT, Cook CL, O'Day K, Burch SP, et al. How Patient Cost Sharing Affects Adherence and Outcomes/p50/colB/¶5. From http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3278192. Accessed 10/09/14. Expected impact estimated from linear regression model based on studies in review. Impact varies depending on population and intervention affected. In the literature review, 66 abstracts assessed the impact of patient cost sharing and medication adherence. Treatment or disease areas in study included cardiovascular, diabetes, mental health, pulmonary, arthritis, infectious disease and GI disease.

Unaffordable Rx: A Leading Cause of Non-Adherence

22%

of non-adherent patients said *"trying to save money"* was a major reason for not filling a prescription.[1]

$10

increase in cost to patients has been shown to result in a 3.8% drop in adherence.[2]

1.   Eaddy MT, Cook, CL, O'Day K et al., "How Patient Cost-Sharing Trends Affect Adherence and Outcomes: A Literature Review," P&T, Vol. 37, #1, January 2012.Text
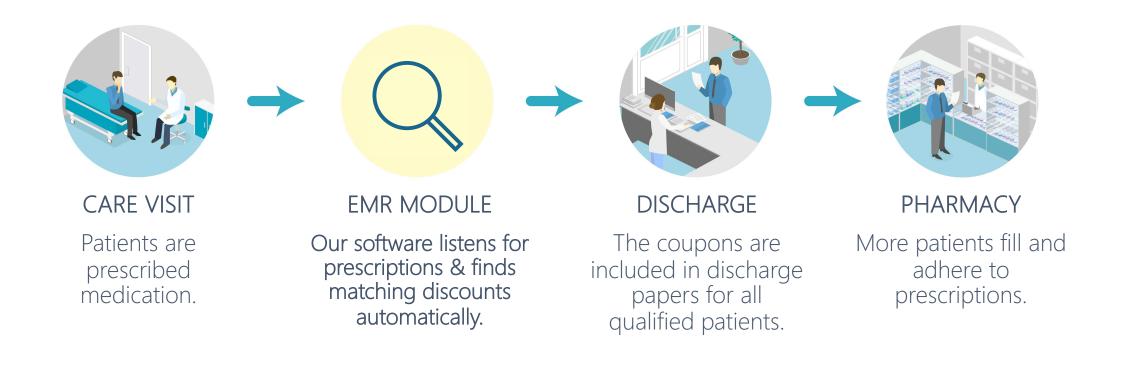
2.   Eaddy MT, Cook CL, O'Day K, Burch SP, et al. How Patient Cost Sharing Affects Adherence and Outcomes/p50/colB/¶5. From http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3278192. Accessed 10/09/14. Expected impact estimated from linear regression model based on studies in review. Impact varies depending on population and intervention affected. In the literature review, 66 abstracts assessed the impact of patient cost sharing and medication adherence. Treatment or disease areas in study included cardiovascular, diabetes, mental health, pulmonary, arthritis, infectious disease and GI disease.

Reducing Rx Costs: DTC Discounts Are a Good Start

- Manufacturers sponsor billions of dollars in discounts annually
  - Current DTC delivery channels are mostly online
- Studies show the discounts can be effective[1], but only if they get used.
- Many patients don't take advantage of them for a variety of reasons:
  - Awareness, technology access or prowess, time/effort, privacy/trust issues

Hospital & pharmacy staff routinely spend
15 minutes per patient finding online discounts.

1.   Eaddy MT, Cook, CL, O'Day K et al., "How Patient Cost-Sharing Trends Affect Adherence and Outcomes: A Literature Review," P&T, Vol. 37, #1, January 2012.Text.pdf

We Have a Better Solution, At Point of Care

CARE VISIT

Patients are prescribed medication.

EMR MODULE

Our software listens for prescriptions & finds matching discounts automatically.

DISCHARGE

The coupons are included in discharge papers for all qualified patients.

PHARMACY

More patients fill and adhere to prescriptions.

Significantly better access to discounts means *more* patients use *more* discounts *more* often.
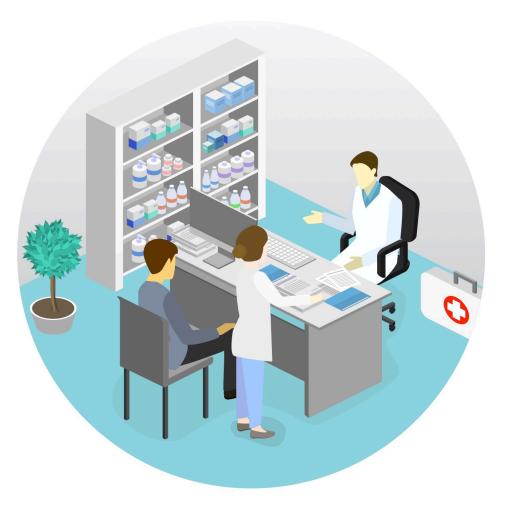
Many Benefits to Healthcare Systems

- Increased adherence (total fills) = *Reduced re-admission/penalties*

- Lower uninsured patient co-pays = *Less risk exposure for bad debt*

- Increased patient satisfaction = *Better care quality metrics/reimbursement*

- Increased first-fills on-site = *More pharmacy revenue*

- Decreased staff time per patient = *Less costs*

RESULT: <u>Significant</u> added value without additional costs.

No Risks, No Direct Costs

- The only (indirect) cost is the few hours of IT time to complete the technical integration.

- The solution starts working instantly.

  - It is invisible and runs post-prescription.
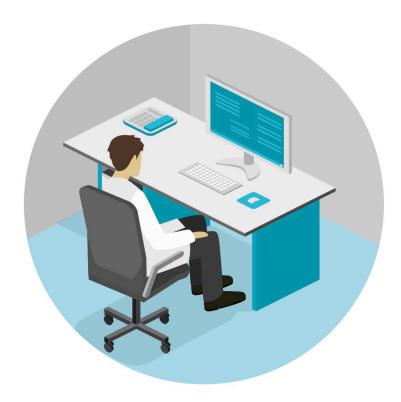
  - It does not influence physician behavior.

Every system we have discussed this with is interested.

Minimal EMR Integration

Solution built on popular *middleware* to minimize the integration effort with most EMRs

- *Redox* is present in many healthcare systems. Regardless, less than a week of total IT time is required.

- Connectivity is based on industry standard protocols *commonly deployed* in health care IT

Discount Details

- Many popular medications

- Acute & ambulatory discharges

- First-fills and/or re-fills

  - Complements "Meds-to Beds"

- Brand names & generics

- Copay reductions & free trials

PULMICORT FLEXHALER® (budesonide inhalation powder, 90 mcg & 180 mcg)

Please print full Prescribing Information

SAVE ON PULMICORT FLEXHALER*
- Eligible commercially insured patients pay no more than $20 up to $50 savings limit on each fill up to 12 prescription fills of PULMICORT
- Cash-paying patients save up to $50 after paying the first $20 on each fill up to 12 prescription fills of PULMICORT

See eligibility details below. Restrictions apply.

PULMICORT FLEXHALER

Savings Card

Emdeon
Therapy First Plus
BIN: 004682
PCN: CN
Grp: EC57009042
ID: 414040560354

Pulmicort Flexhaler®
(budesonide inhalation powder,
90 mcg & 180 mcg)

Present this offer to your pharmacist, along with a valid prescription for
PULMICORT FLEXHALER (budesonide inhalation powder, 90 mcg & 180 mcg).
Prescriber ID# required on prescription.

We negotiate access to the discounts from manufacturers.

Path to Success

Leadership Buy-In

Demo with pharmacy

Demo with all key stakeholders

- Internal & retail pharmacy leadership

- IT or EHR director who can provision IT resources

- Nursing or Case Mgmt

- Other

Phase ends with contract request & assignment of IT Security owner

2 weeks

Approval Process

Medicom Health signs health system BAA.

Health system reviews and negotiates Medicom Health master agreement

Medicom Health completes IT security questionnaire & audit.

Phase ends in signed contract and assignment of IT Project Manager

3 weeks

Implementation

Kick-off Call with IT:

- Medicom Health

- Redox staff

- IT Project management

Weekly status calls

Phase ends with IT release to production environment

10-20 hrs over 4 weeks

Training

Can be simultaneous w/ Implementation phase

Medicom Health provides materials to internal training owners.

Owner identified to receive periodic reports.

Phase ends in Go Live

2 weeks

Next Steps

- Schedule demo with broader audience
  - Internal & retail pharmacy leadership
  - IT Director/EHR director who can provision IT resources
  - Nursing or Case Management
- Schedule call w IT Security owner
- Send contract to assigned contract owner
- Exchange BAA and master agreement

Thank you for your time.