



Surveyed Physicians Say Access Challenges Impact Their Care Plans for up to 33% of Patients

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- Physicians report that medication access impacts initial therapy choice for some patients and may require changes to preferred treatment plan

ROCHESTER, Mich., April 20, 2022 (GLOBE NEWSWIRE) -- [OptimizeRx Corp.](#) (the "Company") (Nasdaq: OPRX), a leading provider of point-of-care technology solutions helping patients start and stay on therapy, today announced the results of a survey of 102 specialist physicians highlighting how inefficient access pathways negatively impact patient care. Specifically, the survey found on average that physicians would make a different therapy choice for 33% of patients if medication access was not a factor, and physicians had to change their treatment plan for 26% of patients due to medication access challenges.

The survey, conducted in March 2022, also reveals the time involved and the financial cost to physicians' practices to initiate specialty medication, and further indicates the growing interest of physicians in technology solutions within the electronic health record (EHR) that help ease the prescribing burden. Survey respondents included 21 dermatologists, 20 gastroenterologists, 21 neurologists, 20 oncologists, and 20 rheumatologists.

Karina Castagna, senior vice president of access solutions at OptimizeRx noted, "Pharmaceutical manufacturers devote significant resources to ensure patients are able to have access to life-changing medications, yet this survey shows that patients are still not always getting access to treatments they need. This snapshot should prompt manufacturers to take a closer look at how prescribing burdens on physicians may limit a patient's ability to get started on their doctor-preferred first choice of therapy."

Castagna added, "Enabling efficient digital market access strategies is critical to easing physician prescribing burden. EHR-based solutions present new opportunities for market access teams to streamline prescribing and therapy initiation processes, reducing the impact market access challenges have on treatment choice. Our intelligent platform is built precisely for this – to alleviate pain points along the patient journey, empowering physicians to prescribe their therapies of choice while minimizing the financial burden to both patients and physicians."

Other Survey Highlights:

- Physicians continue to struggle with the time taken, cost incurred, and resources expended to start patients on medications – particularly for specialty brands. 69% of physicians ranked the process of starting patients on a specialty medication as very or extremely difficult.
- On average, physicians reported that they and their staff spend nearly four hours a day helping patients gain access to medication, with an estimated cost to their practice of \$5,800 per month.
 - Dermatologists, gastroenterologists and neurologists reported spending five or more hours a day helping patients gain access to medication
 - Oncologists and rheumatologists reported the highest costs to their practices to help patients access medications at \$6,700 and \$7,900 per month, respectively.
- There is a substantial appetite among physicians for digital access solutions that streamline the therapy initiation process and reduce the burdens of time, cost and resources on the physicians and their staff. But while these digital tools are available, they are not yet a consistent part of pharmaceutical manufacturer's market access strategies, which limit patient access to therapy.
- Physicians are seeking more transparency around formulary coverage and preferred pharmacy information.

Access challenges and a lack of information on patients' insurance benefits impact physicians' ability to prescribe preferred therapies

- The survey found 60% of physicians do not have real-time access to patients' insurance benefit information, but 71% of physicians **who do** have access to this information check it before writing a specialty prescription. As a result, only 39% of physicians routinely talk to patients about affordability options.
- 74% of surveyed physicians do not have a way to know if a patient has filled their prescription.

Physicians welcome technology solutions which ease their patient care burdens

When asked how helpful the following technology solutions would be in their EHR systems, the following percentages of physicians ranked these solutions as "Extremely Helpful" or "Very Helpful":

- A tool to file prior authorizations more easily: 84%
- A technology solution that helps patients easily access copay programs: 83%
- A tool that automates the specialty or hub enrollment process: 81%
- Prescription benefit information to find medication that's affordable for patients: 78%
- Receiving notification when a patient does not fill their prescription: 74%

For additional results from the survey submit a request [here](#).

About OptimizeRx

OptimizeRx is the best-in-class health technology company enabling care-focused engagement between life sciences organizations, healthcare providers, and patients at critical junctures throughout the patient care journey. Connecting over 60% of U.S. healthcare providers and millions of their patients through the most intelligent technology platform embedded within a proprietary digital point-of-care network, OptimizeRx helps patients start and stay on their medications.

For more information, follow the company on [Twitter](#), [LinkedIn](#) or visit www.optimizerx.com.

Important Cautions Regarding Forward Looking Statements

This press release contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. Words such as “anticipates”, “believes”, “estimates”, “expects”, “forecasts”, “intends”, “plans”, “projects”, “targets”, “designed”, “could”, “may”, “should”, “will” or other similar words and expressions are intended to identify these forward-looking statements. All statements that reflect the Company’s expectations, assumptions, projections, beliefs or opinions about the future, other than statements of historical fact, are forward-looking statements, including, without limitation, statements relating to the Company’s growth, business plans and future performance. These forward-looking statements are based on the Company’s current expectations and assumptions regarding the Company’s business, the economy, and other future conditions. The Company disclaims any intention or obligation to publicly update or revise any forward-looking statements, whether because of new information, future events, or otherwise, except as required by applicable law. Forward-looking statements are inherently subject to risks and uncertainties, some of which cannot be predicted, or quantified. Future events and actual results could differ materially from those set forth in, contemplated by, or underlying the forward-looking statements. The risks and uncertainties to which forward-looking statements are subject include, but are not limited to, the effect of government regulation, competition, and other risks summarized in the Company’s Annual Report on Form 10-K for the fiscal year ended December 31, 2020, its subsequent Quarterly Reports on Form 10-Q, and its other filings with the Securities and Exchange Commission.

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