## **Prescriptions:** real-time recommendations can reduce patient out-of-pocket costs

## Problem

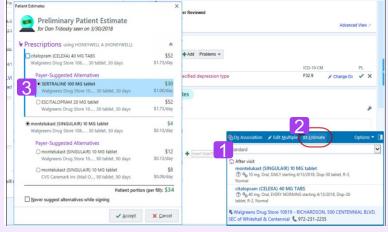
Medications can be too costly for patients, leading to them not fulfilling their prescriptions. Here, we explored if a real-time prescription benefit (RTPB) system could reduce cost.

## Interventions

RTPB systems present prescribers with patient-specific out-of-pocket costs estimates, and recommend lower-cost, clinically appropriate alternatives at the point of prescribing.

Pharmacists are automatically prompted to offer alternatives:

- 1 Original prescription shown to pharmacist
- 2 Pharmacist presses 'estimate' button
- 3 Lower-cost alternative flagged



## Results

RTBP recommendations lead to lower out-ofpocket costs for patients, with mean 30-day cost 11% lower in the intervention group. It was even more effective for high-cost drugs, with a 40% reduction in out-of-pocket costs.

- Practices were randomized to intervention (using the RTBP system) or control (usual care)
- 97 practices (ordering 22,000 prescriptions) were in the intervention group, and 99 (ordering 15,000) were in the control
- The main outcome was patient out-ofpocket prescription cost



30-day out-of-pocket cost was 11.2%





The Rapid Randomized Controlled Trial (RCT) Lab is helping transform NYU Langone into a learning healthcare system by using rapid-cycle randomized controlled trials to test simple, pragmatic ideas. We use our findings to quickly change healthcare practice.