

## SaaS ePrescription Platform Connecting Pharmaceutical Manufacturers with Physicians and Streamlining the Prescribing, Distribution and Administering of Specialty Medications



**Jeff Spafford**  
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Interview conducted by:  
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CEOCFO Magazine

**CEOCFO:** *Mr. Spafford, would you tell us the vision when you started AssistRX and where you are today?*

**Mr. Spafford:** When we started the company seven years ago, it was to solve a specific problem that we had experienced in our previous careers in getting patients access to the specialty medications. One of the things that we had much experience with was taking care of patients who had been prescribed the high-cost medicines. The process in which they go through to get access has over time become complex, burdensome, to everyone involved and as such has taken more and more time and created more frustration. When we started AssistRx, we thought there had to be a better way and we dissected the process and we identified the barriers and then we looked towards technology as a way in which we could address those barriers with the goal of creating a better process. That was our goal in starting out and we were able to do that and we have grown the company not only through adding more and more pharmaceutical clients to our list and more drugs to our platform, but also adding to the functionality of the platform. We call our platform Lassist and it has a number of different function and features that are all working together with the one goal of getting a patient access, and that continues to grow over time.

**“Some patients may have insurance and that insurance benefit varies widely across patients. Some may have full coverage and some may have very limited coverage, some may be government insured and some may be commercially insured. All those different factors will determine which programs and services are available to that patient and their ability to think they want therapy. All that business logic and intelligence is built into our platform so as a user you do not have to think through that, the platforms are going to lead you down those different work flows depending upon the information that you put in and is going to be able to help that unique patient and their experience.”- Jeff Spafford**

**CEOCFO:** *How does a patient engage?*

**Mr. Spafford:** It is more about the prescriber than the patient because in the niche that we focus on which is high-cost biotech medicines, the physician will prescribe the drugs for the patient but rather than the patient taking that prescription and walking into their local retail pharmacy, there is a lot of paperwork and information that has to get passed to other parties that are involved in that patient onboarding experience. The physician historically has filled out what they call enrollment forms and these enrollment forms are drug specific. They then are faxed to various parties whether directly to specialty pharmacy which is a different kind of pharmacy and not a retail pharmacy like a Walgreen's or a CVS. It is a pharmacy that focuses on these high-cost drugs and they add a high-touch clinical model to the dispensing of the medication. In many cases for these drugs, they are limited in terms of the number of pharmacies that have access to them. Part of the challenge is finding which pharmacies have access. The physician will fill out the form and fax it to whomever and that person will then do an investigation and invariably there will be phone calls that request additional information that will delay the process. Additional paperwork will have to be completed whether it is a prior authorization,

patient consent or whatnot. At the end, all that information will then be triaged to a specialty pharmacy which will then reach out to the patient and try to schedule a delivery of the medication. The patient in many cases is in a black hole. They do not understand what is going on and they do not have the visibility to all the work that is happening in the background. As such, you can imagine the level of frustration and the anxiety that comes with this because the drugs that we deal with tend to focus on diseases that are very serious or chronic in nature so oncology is a big aspect of this. Multiple sclerosis, rheumatoid arthritis, hepatitis C, as you can imagine if you have been diagnosed with cancer and you have been prescribed a medicine that costs \$100 thousand a year, you want to understand whether or not you are going to get access to that medicine and you do not want to have to wait very long.

**CEOCFO: *With whom are you intercepting and at what point?***

**Mr. Spafford:** Part of our technology is an e-prescribing module. As soon as a physician treats that patient and prescribes them a medicine to treat their disease, they will use our technology to go ahead and e-prescribe for that medication. In conjunction with an e-prescription comes a lot of other aspects of our platform and that is why physicians like it because they can go to one spot and make sure that they are taking care of all the necessary functions that have to happen in order for that patient to get access. We like to call it that Travelocity of specialty healthcare because a user physician has one login ID and one password and regardless of which drug they are prescribing, they know that they can go that one place and after they enter the information, it is going to get to the right place and the patient is going to have a much better chance of getting on that therapy. It can manage all the business intelligence that goes on behind the scenes.

**CEOCFO: *What is the business model?***

**Mr. Spafford:** The business model is the pharmaceutical manufacturer is our paying customer. It is a SaaS platform but the physician offices are the registered users that will go on and will use the platform to e-prescribe various specialty medications. As they do that, there is a transaction fee that is generated that the manufacturer will then pay.

**CEOCFO: *Are there competing services?***

**Mr. Spafford:** What I like about what we do is that with technology, I always call it the Wild West because there are other companies out there that are trying to solve the same problem but they are coming at it from different avenues and directions. They have what I would consider components of the solution so we compete with companies that will have a prior authorization tool or an e-prescribing tool but no one as of yet has really put this all together in a holistic fashion. The reason we have done this is because in our previous lives we have run specialty pharmacies and we know what it takes to get a patient on therapy. We realize that it is not just good enough to get a prior authorization approved. To get a patient's consent, you have to coordinate financial assistance, you have to ensure that it gets to a pharmacy that can service the patient. All these things are important but unless you get it all done, the patient still does not go on therapy so all your effort is wasted. That is why when we built the platform, we wanted to make sure that it was more holistic in fashion and addressed all the challenges that were affecting these patients. We also understand that a patient who is trying to get access to a cancer medication has very different needs than say a patient who is trying to get access to hepatitis C medication. As such, the platform needed to reflect those nuances.

**CEOCFO: *How does human interaction come into play with the superior technology?***

**Mr. Spafford:** Even though we are a technology company, we realize that technology in this area gets you to the 828. It is the person who is the recipient of the information that comes out of our platform that is going to be able to interface with that patient, educate them on what their options are, offer them various alternatives, programs and services, that are going to be the ones to get them to convert the therapy. Our goal at AssistRx is to get the information as quickly and as accurately as possible to the people who are going to then take that information and use it and interface with the patient and get them on therapy. As a technology shop, it is easy to lose sight of the end goal. One of the things that we tell our employees all the time is that the code that you are writing today, the solutions that we are designing today, do make a difference in patients lives because we can demonstrate the impact that we have. We have done case studies where we have looked at "before and after." Physicians who use our platform to prescribe our medications have a much better rate of getting patients on therapy so there is a much higher conversion rate as well as doing it in a much shorter period of time. We have been able to reduce the amount of time it takes a patient to get on therapy by upwards of 45%. That is important because when you talk to me about the disease states that we are focused on such as cancer, to be able to get a patient drug in hand ten days quicker has a significant impact on that patient's ability to have successful outcome. Even though we are a technology company, our technology is truly making a difference out there.

**CEOCFO: *How many choices might someone have?***

**Mr. Spafford:** It is a complex area today and it is getting more and more complex. We saw this every day when we took care of patients as a specialty pharmacy. They were having to make some hard choices about whether or not they paid

their rent this month and got access to their drug or they did not refill their medication and paid the rent. Those are choices that no person should have to make when trying to treat the disease that they have. There are many options that patients have out there and unless you are well versed in this very special niche within the drug industry, no one is going to know. That is part of the benefit of technology to simplify this for them so that there is a transparency into knowing that these patients exist and their unique experiences. Some patients may have insurance and that insurance benefit varies widely across patients. Some may have full coverage and some may have very limited coverage, some may be government insured and some may be commercially insured. All those different factors will determine which programs and services are available to that patient and their ability to think they want therapy. All that business logic and intelligence is built into our platform so as a user you do not have to think through that, the platforms are going to lead you down those different work flows depending upon the information that you put in and is going to be able to help that unique patient and their experience.

**CEOCFO:** *Would you provide some of the nuances in pricing and access so we can understand where your value-add comes in?*

**Mr. Spafford:** For any given drug, any given patient will have a unique insurance coverage that will dictate how much of that drug cost is reimbursed and how much the patient is going to have to cover. Manufacturers have developed programs and services to mitigate a lot of that patients responsibility to so for example if you are a commercial patient with Aetna as your insurance plan, your co-pay may be 10% or 20%, the manufacturer may have a program that will pick up your balance so that you can afford your medication. If you are a government patient you will not qualify for those programs but yet there are other foundations that are out there that will have alternative coverage for you, which we would then need to enroll you into. It is about trying to identify that patient's specific circumstances and then offering them the most appropriate programs and services that will best help them get on therapy.

**CEOCFO:** *What is next for AssistRx?*

**Mr. Spafford:** Where we see the future going is being able to better impact patient care by providing a 360 degree view of that patient journey. Right now, we are focused on that patient on-boarding experience, so ensuring that the patient is set up to be able to get on therapy quickly and has the best chances to do so. Once they are on therapy, there is this ongoing compliance in the hands piece of this to ensure that the patient remains compliant so that they are taking their drug on time, and if they are not, to be able to intervene proactively to get them back on therapy or to keep them on therapy. By providing the information back to them, so that they can intervene proactively, will then result in better outcomes. We talk about building out a digital railroad here where we are connecting all the various stakeholders that are involved in that patient care. It starts with the physician. It can include the pharmacy and it may include other third parties along the way that have a role to play, but ultimately having that closed loop system so that everyone involved in that patient care has a real-time understanding of that patient's status and is being alerted proactively when a patient is at risk of falling off therapy. We are building that digital railroad and are continuing to integrate with other third parties, providing that by-directional communication back to the physician in their EHR, and creating different ways in which we can message them so that they can intervene or the pharmacy can intervene and being able to measure our impact through data aggregation to analytics.

