A Multiphase Initiative to Disseminate Payer Best Practices in the Development of Coverage Policy and Benefit Design for Cystic Fibrosis

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Background:

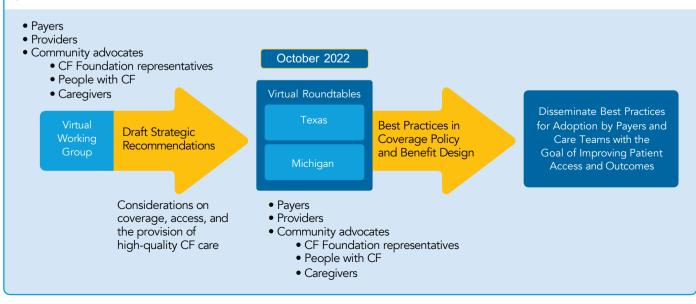
The management of cystic fibrosis (CF) requires multiple therapies, devices, and multidisciplinary care provided by CF Foundation-accredited care centers. Several hours of daily treatments and the rigors of navigating the health care system further contribute to the psychological, financial, and time burden of managing the disease. Managed care professionals play a vital role in affecting access to care for the CF community.

Objective:

Enlist the input of key payer stakeholders, health care providers, and members of the CF patient/family community to identify barriers to appropriate access to care and develop best practices for coverage policy and benefit design.

Methods:

CF Foundation and educational partner, Impact Education, LLC (IMPACT), conducted a virtual working group meeting in April 2022 to elicit the input of 5 payer/purchaser stakeholders, 4 health care providers, and 2 patient/caregiver representatives on the access, coverage, and provision of high-quality care for CF. To further develop innovative collaboration between payers and providers and identify best practices in coverage policy and benefit design, two state-specific roundtable meetings were convened in October 2022 following the initial working group meeting. These meetings were attended by 6 payer/ purchaser representatives and 6 health care providers from Texas and Michigan. Specific topics discussed at the meetings included barriers to care, administrative burden on people with CF, care teams, and payers, financial burden, opportunities for payers and providers to collaborate.



Results:

Throughout the multiphase initiative, the barriers members of the CF community and their providers encounter while navigating health insurance coverage were elucidated. Common themes that emerged included difficulty navigating care in multiple health systems and geographic areas and the complexities of the prior authorization (PA) process. Ongoing communication and collaboration between payer and provider stakeholders—facilitated by the CF Foundation—was recommended going forward, in addition to several PA directed best practices. The most prominent among these were extending the duration of authorizations, bundling multiple CF-specific therapies and supplements under a single PA, and exploring opportunities to enhance adoption of electronic PAs (ePAs).

Identifying Barriers to Optimal Care and Outcomes

	Q Focus Area	Issue or Barrier	Payer Best Practice
1	Provider communication /contact	Payers and providers in CF care centers are disconnected and do not have an opportunity to connect regularly to ensure optimal patient care	A designated payer case manager in regular contact with a member of the CF care center team to consult on prevailing clinical practice, coverage issues, and managing difficult patient cases
2	PA renewal interval	Despite CF being a lifelong chronic condition, payers may require PAs be renewed on an annual or semi-annual basis for chronic therapies, creating burden for providers and patients	Legacy approvals or automatic renewals instated for CF-specific therapies when possible and when they are being prescribed to address the chronic components of the disease
3	PA volume	Patients with CF receive an average of seven treatments and supplements daily, necessitating a number of individual authorizations and increased patient/provider burden	Several CF-specific therapies and supplements bundled under a single PA when possible
4	ePA	ePA has the potential to substantially improve efficiency in the claims submission, review, and denial/appeals process, but it is typically seen as being underused	In addition to establishing the infrastructure for ePA, communicating the availability and value of ePA to providers in network to encourage its use
5	Coverage criteria	Individual payer criteria for coverage of CF therapies differs substantially and may be formulated in-house	Payer coverage criteria aligned with the current evidence and consensus guidelines, including those coordinated through CF Foundation and widely used by accredited CF care centers



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Conclusions:

The recommendations developed as part of this multiphase initiative are intended to improve patient access to care and enhance clinical outcomes in a manner that is cost-effective and ultimately benefits all involved stakeholders. Findings on payer best practices will be disseminated in the form of a white paper and related initiatives are proposed for the future.

Supported By: Cystic Fibrosis Foundation.