

Replenishment Program



PROVIDING A RELIABLE, NO-COST SUPPLY OF MEDICATIONS TO CLINICS

Direct Relief's Replenishment Program is an innovative approach to distributing pharmaceuticals and medical supplies to community clinics and health centers. Direct Relief has developed partnerships with multiple healthcare manufacturers that donate needed medications and supplies, and leverages economies of scale to offer these products to safety net clinics and health centers through a single source at no cost. The program offers an alternative to navigating individual Patient Assistance Programs (PAPs).

HOW IT WORKS

The Replenishment Program provides medications at no cost to eligible clinics and health centers that meet the enrollment criteria. Once a clinic is enrolled, all program medications dispensed to qualified patients are replenished bottle for bottle based on the past month's drug usage.

WHY IT'S BETTER

Traditional patient assistance programs (PAPs) provide prescription medicines to low-income, uninsured patients and are an essential element of the nation's healthcare safety net. To access these PAPs on behalf of their patient population, clinics must interface with each separate pharmaceutical

company to enroll individual patients and receive requested medications. In a hectic and fast-paced clinic environment, PAP enrollment requires significant investment of time and administrative functionality. Separate and distinct PAP requirements can create an unintended barrier to access of medication and a delay in care.

While there is no argument that assistance programs increase access to medication, and are critical to improve care for underserved patients, there are challenges associated with traditional PAPs. Direct Relief's Replenishment Program is designed to enhance efficiencies of both clinics and existing PAPs to ultimately improve patient health outcomes.

Benefits

Direct Relief's Replenishment Program has substantial benefits for patients, safety net partners, healthcare companies, and public health:

FOR PATIENTS:

- ▶ Increases access to medicine at the point of care
- ▶ Reduces wait time for prescriptions
- ▶ Improves health outcomes and medication compliance

FOR SAFETY NET PROVIDERS:

- ▶ Improves efficiencies with a single process and point of access
- ▶ Reduces administrative burden and related costs

FOR HEALTHCARE & PHARMACEUTICAL COMPANIES:

- ▶ Reduces administrative burden
- ▶ Improves efficiencies
- ▶ Expands benefits from charitable investment

FOR PUBLIC HEALTH:

- ▶ Strengthens the safety net
- ▶ Increases access to care
- ▶ Improves health outcomes

"[The program] provides brand name and consistency of prescriptions, and we do not have to wait the six weeks for the medications to arrive."

- TERRY HAIR, *Director of Pharmacy,*
ChapCare, Pasadena, CA

A survey of safety-net clinics indicated that PAPs help fill a major gap in health insurance coverage but that consistent eligibility criteria and application procedures are needed.

—American Journal of Health-Systems Pharmacy

Traditional Patient Assistance Programs

Over 475 separate PAPs
Wait time of up to 8 weeks
Individual patient enrollment
Prescriptions on a per patient basis
Time-limited period

VS.

Direct Relief Replenishment Alternative

Single point of access
Immediate access to medication
Clinic-level validation of enrollment
On-going and consistent stream
Easy and streamlined process for clinics



“Due to the economy, we have had more patients who were recently laid-off. With this increased patient load, we were able to continue to provide the same level of care since our paperwork and packages have decreased due to the replenishment program.”

—SHARON NG, Pharm.D., *Pharmacy Director*, Venice Family Clinic, Venice, CA

CRITERIA for PARTICIPATION

- ▶ Federal non-profit tax exempt status
- ▶ Qualified facility that provides health care to patients regardless of their ability to pay (i.e. FQHC, FQHC-LA, free clinic, community clinic, charitable pharmacies)
- ▶ Compliant with State Board of Pharmacy regulations in dispensing medications
- ▶ Computerized dispensing capabilities
- ▶ Medical Director with current state license and DEA number
- ▶ Effective processes and controls to perform and document patient eligibility screening
- ▶ Ability to retain records for at least three years, including patient application and supporting documentation such as patient proof of income and dispensing records
- ▶ Assigned clinic staff (involved with medication orders) for ordering and corresponding with Direct Relief
- ▶ Ability to maintain medication management policies and procedures specific to program requirements, including: patient screening, dispensing to qualified patients, order request through drug utilization reporting and record retention
- ▶ Submit to quality management audits to demonstrate medication dispensing compliance with program requirements