Imaging Panda - Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

Interview conducted on March 17, 2023

Topics
Pharmaceutical Distribution, Sales Training, Market Access, Customer Support, Hub Vendors, Efficiency, Cost-Effectiveness

Summary
During a conversation between the Tegus Client and the Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc., they discussed the FRM's role in collecting patient consent, reviewing payer policy, and determining patient eligibility for financials. They also talked about the importance of learning best practices from colleagues, increasing the number of Medicare patients who complete their steps for therapy assistance, and minimizing the risk of receiving PHI and non-compliantly. The Executive Director explained that it can take up to an hour to work through cases and that the sales force is engaged after three unsuccessful attempts to contact the office. They also discussed the tools they use, including Policy Reporter, FRM dashboard, DRG, Veeva, and Tableau. The manager recommended Occam Health as a good fit for their needs and discussed the challenges of dealing with IDNs who have their own SPs and limited distribution networks.

Expert Details
Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals. Expert can speak to their experience leading and overseeing a team of Field Reimbursement Associate Directors at Paratek Pharmaceuticals.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc. The expert is responsible for overseeing all pre-commercialization strategies, including copay, bridge, patient assistance programs, hub management, and field reimbursement.

Prior to Paratek Pharmaceuticals, Inc., the expert was the Senior Director at Ironshore Pharmaceuticals, leaving January 2018. The expert was responsible for overseeing product strategy, including market access, trade, and patient services for a product that didn't achieve FDA approval.

Q: What are your current top 3 goals/focuses in your current role?
A: 1. Effectiveness and efficiencies. What can we do to get the patient on therapy as timely as possible?
2. We just went through and analyzed all of our services last year, so we're activating new strategies, including a new hub vendor.
3. This year, the focus is implementing and attacking the analysis

Q: What is the job title of your boss/the person right above you in your org? (e.g., Directly reporting to the VP of Market Access)
A: VP of Market Access & Trade Relations.

Q: What are the job titles of the people you manage/your direct reports? (e.g. Regional Account Manager)
A: I have 5. 4 field reimbursement associate directors and 1 associate director of trade relations.

Tegus Client

Hi, thanks for speaking with me. Can you describe you current role?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
I'm a manager.

Tegus Client
Perfect, can you describe the product you currently support?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
I have pharmacy benefit and buy-and-bill.

Tegus Client
How satisfied are you at the current time it takes to collect the patient's consent?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
I'm not satisfied at all.

Tegus Client
How important is it for you to minimize the time it takes to review the accurate payer policy?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Probably neutral on that.

Tegus Client
How satisfied are you with the current time it takes to review an accurate payer policy? I'm neutral on that one. How important is it for you to minimize the time it takes to reconcile conflicting data sources?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Probably two on that one.

Tegus Client
How satisfied are you the current time it takes to reconcile conflicting data sources?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
I'd say two on that one as well.

Tegus Client
How important is it for you to increase the frequency of learning best practices from your colleagues?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Neutral.

Tegus Client
How outside are you with the current frequency of learning best practices from your colleagues?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Neutral on that one too.

Tegus Client
How important is it for you to increase the number of Medicare patients to complete their steps for therapy

assistance, how important?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
So it's more important.

Tegus Client
How satisfied are you with the current number of Medicare patients who complete their steps of therapy?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Probably. I have another issue with Medicare.

Tegus Client
How important is it for you to minimize the time it takes to determine a patient's eligibility for financials?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Important.

Tegus Client
How satisfied are you with the current time it takes to determine a patient's eligibility?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Very satisfied.

Tegus Client
How important is it for you to minimize the time it takes to determine the case progress in the enrollment to fulfillment journey?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
It's very important.

Tegus Client
How satisfied are you in the current time it takes to determine a case's progress in the enrollment to feel satisfied?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Two.

Tegus Client
How important is it for you to minimize the risk of receiving PHI and non-compliantly?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Very important.

Tegus Client
How satisfied are you with the current risk receiving PHI?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Good.

Tegus Client

How important is it for you to increase the likelihood of your accounts, understanding how to satisfy your requirement?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
It's very important.

Tegus Client
How satisfied are you with the current likelihood of your account understanding how to satisfy a payer requirements?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Neutral.

Tegus Client
How important is it for you to increase the number of accounts that remember how to vary? How satisfied are you with the current number of accounts, but can you remember?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Not very.

Tegus Client
How important is it for you to minimize the time it takes to secure an office champions?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Important, very important.

Tegus Client
Are you with the current time it takes to secure?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
No.

Tegus Client
How important it is for you to increase the likelihood of an account accepting your existence?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Neutral.

Tegus Client
How satisfied are you with the current likelihood of an account accepting yours? How important is it for you to increase the number of patients that understand that actual out-of-pocket?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
It's very important.

Tegus Client
How satisfied are you with the current number of patients that understand?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Very low.

Tegus Client
How important it is for you to increase the likelihood of your accounts to understand the materials you shared?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
It's very important.

Tegus Client
How satisfied are you with the current likelihood is your account?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Not very, it’s a two.

Tegus Client
How important is it for you to minimize the time it takes to share case per hour into your account, how important?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Very.

Tegus Client
How satisfied are you?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Neutral on that one.

Tegus Client
How important is a minimal of the frequency of your accounts sending scripts?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Very important.

Tegus Client
How satisfied are you with the current frequency of accounts sending scripts?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
two.

Tegus Client
How important is it for you to increase the frequency that the patient understands the logistic?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Extremely important.

Tegus Client
How important is it in minimizing the time it takes?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Very important. Let's say, two.

Tegus Client
How important is it to minimize the time it takes to get a patient's response?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Yes, that's very important.

Tegus Client
How important is it for you to minimize the time it takes to help office navigate?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
4-1.

Tegus Client
How important for you to increase the frequency of patients using? Might have not much of that frequency of patients using your to solutions? In the patient access strategy?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Very.

Tegus Client
How satisfied are you in previous patients?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
State home therapy.

Tegus Client
All right. Perfect. Was there anything in there that was confusing or didn't make sense?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Like I said, the majority of these things that were asked, some of those things I deal with every day, so no.

Tegus Client
Well, then I look to switch gears a little bit for the rest of the time. I really want to understand more about a day in the life of an FRM, and I'd really like to get into week that routine. And I'd love to understand it through some examples as much as possible, not generalization. So I'd love to start.

Can you walk me through your day. For example, what time did you start? Where did you start? Was it at home, in the office, what was the first thing you did? What was the multiple software you use? Just kind of walk me through the start of your day and then how did it finish?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
So I manage four field reimbursement people. But I know exactly because I'm responsible for all their activities. But I'll tell you because I structured and trained them. So here's what they do. Their day usually starts about 7:30, sometimes earlier, but let's just go to 7:30. There are certain key aspects of reports that they look at, at the very beginning of the day. One of them would be a hub report, where they're evaluating current cases that came in, maybe coming in over the night, looking at what's being held up, where are they in the process and things of that nature.

They might be digging up the reports and sending them out to the sales force and then sending appropriate e-mails accordingly for that. The next thing that we do, we have other reports on other are patient services such as Bridge. They look to actually see how many Bridge cases were used? Who are getting rejections on a Bridge program from the pharmacy level? And in case we need to get retrain, so they get that and they would send that out.

And then I have developed through part of our data aggregator, we have what I call a field reimbursement dashboard, where we use the limited distribution model for our product from a pharmacy standpoint, and so some of the pharmacies, not all, obviously all did give us a status update.

So they can actually look to see what's in the dating in terms of how long is it sitting there. We have an acute med. That's a bacteria resistant antibiotic. So ours is all about doing everything and trying to get the speed through. So then they would go through that. So I said all that in just a few minutes, but that's going to take several hours for them to complete those particular types of tasks.

Tegus Client

So when they start at 7:30 and you said they look at their hub report, is that an e-mail? Or is that a portal online?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

Yes. It's both. Some of them can be an overall sort of generated report that we get at the end of the day, but at the same time they can actually dive in through the portal and actually dive in to see more specific information from our hub.

Tegus Client

So they'll get the e-mail basically on updates on the different cases that are in the queue. And essentially, I guess troubleshoot. They'll focus on the ones that need assistance. So basically, they determine which ones need assistance.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

And then what the holdup is? What's being held up and why is it being held up and that's why they would start with e-mail and dive in using the case number into the portal.

Tegus Client

How long does that typically take? Is that a 10-minute endeavor? Is that a 30-minute endeavor? Is that a couple of hours?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

It could take, I would say, closer to an hour, maybe slightly over, but probably around the hour, just depends. So there won't review each individual case where there's what I call stickiness or some kind of issue. And then from that, they're going to actually have to come up with where are they going to reach out to the sales representatives?

Are they going to reach out to the office staff? Are they going to reach back out to maybe one of the people that manages at our hub. So it really just depends upon that, and that's what can take some of the links that's just the connecting with the other individuals that before the action needs to be taken.

Tegus Client

When do you actually engage the sales force versus engaging the office?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

So if we see that it's been going on and we've made two phone calls with the office and then we also knew where this phone calls go fax blast to them after I think it's after the third call, we engage the sales force. We ask them actually, can you reach out to this office and we also send this report to the sales representatives, but we also follow up with a call and just say, "Hey, so it's a representative, can you call this particular physician's office and let's say the case #4523 is subject to being canceled because no one's followed up with us, and we need this information, just call this number and just give us a case so we can get the information we need.

Tegus Client

If they need to or then they're just contacting the accounts directly. how does that work? Is that phone calls mostly? Is that e-mails?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
So a lot of that has to do with the sales representatives. If we're working with the sales representative, and we know that sales representative prefers to communicate either by phone, text, most of their sales representatives are phone and text, not as much e-mails. Some of the offices that we deal with on a frequency matter. Those could be more e-mail and text more than phone calls. It really just depends if it's a new customer or a new physician that we're not used to in that office, we're more likely just to pick up the phone and start there.

Tegus Client
So when they're working through the cases, it sounds like and they're delegating, whether they're calling the office, they're just working through it. And it's a mixture of phone, text, e-mails. And how long do they spend on that if they spend the first hour, one and a half hours just identifying which cases to assist, how much time are they spending working through that.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
I don't think we're anywhere between 30 minutes to an hour just on working these cases, just depends on what the workload is and what the holdup for.

Tegus Client
So then if we're, let's say, around 10 a.m. now, what happens after that?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
So at that particular point, we have a limited distribution product. Some of the other activities that they actually could be doing is calling some of our specialty pharmacy partners where I was saying like on that Bridge report that we actually had to reach out to say, it looks like you were having some issues actually making the Bridge work all of you faced with, how can we help you?

We might have to do some training, communicating, trying to figure out what was it that was bogging them down. So that's one of the things we do. We also look at our copay report to see if there was any reversals and that kind of thing. We're really hyper focused on making sure that every script that gets written has the best chance to actually get filled.

Tegus Client
So after working through the cases with the clinics or the accounts then, it sounds like they're working through the cases through the pharmacy for your limited distribution network. Is that all through your dashboard or through your data aggregator?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Through the data aggregator, yes, and through reports that we actually get from our agencies of record that are actually doing our Bridge program. We have a different agency that runs their Bridge program with a different agency that runs their co-pay program. I probably need to streamline that a little bit better, but we get different reports on a daily basis that we can look at for that as well. So we're just trying to troubleshoot, sometimes you might have one and sometimes you might not it.

Tegus Client
And when you say data aggregator, what does that mean? Is that just like a Tableau dashboard where you can just see some graphs on what's really going on?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Yes. So a couple went the distribution drugs, all of the data actually set in from our specialty pharmacy

partners goes into our data aggregator. And it's kind of like Tableau. We have Tableau from our sales reports that we actually use. This is more of a dashboard that we can actually see an aging report. So I can say, "Hey, it a CVS Specialty. It looks like it's been in there for two days in the code that it actually is spitting out. It's saying that the physician has been unresponsive on a prior authorization."

So sometimes it will tell us the payer information. So we feel get the policy to make sure that we know and we're trying to help CVS actually get that prescription out. So we'll go back to the office, say, here's the pieces of information they're looking for. Sometimes we'll keep them on the phone and actually get the office to actually speak directly to CVS while we're on the phone with them. In a short time.

I'm sure you've heard this before, we lose when we're trying to actually get the offices communicating with the pharmacies. That's the biggest thing. So a lot of this is just hand holding, trying to get the right person on the phone with the right information to give that information to their pharmacies.

Tegus Client
So they're now troubleshooting the cases with the Bridge program and looking at the dashboard. How long are they stepping on that? I know it might vary, but it's not like a 10 minute thing.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
That doesn't take that long.

Tegus Client
And then are they just cycling through each of the different reports from each of the different agencies that look at the Bridge program, then they look at the co-pay program?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
I call it a finger on the pulse. We have all these reports that are actually showing us where was the hub struggling with patients from the day before and how can we come in and kind of hover and assist and kind of shepherd those that are kind of going astray. So that's kind of what we do there.

And then the next part that they would do is they have some targeted accounts from a buy-and-bill standpoint. These are positioned in infusion centers or that could be in home infusion companies where we're working with them and making sure that they're not having any issues from the buy-and-bill perspective.

Tegus Client
Can you explain that a little bit? What does it actually look like?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
That product is both tablet and infusion. So a lot of time.

Tegus Client
I totally understand what buy-and-bill is, just like what is the actual process look like?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Yes. So we'll call them up and to just say, have you been successful? Are you getting any hang-ups and sometimes it's to keep a relationship is going and making sure that what we have found out very early with this product is sometimes the office staff, and there's been a lot of turnover in the office staff that actually does it and sometimes they might submit something to a payer and then get a denial, but the denial is really an administrative denial.

They didn't include the appropriate CPT codes or billing codes or whatever it needed. And so most of the time, I'd say 99% of the time, we can review the information and we can actually say, okay, here's the reason why it was rejected, here so you correct it. Now you need to resubmit it, so you can actually ensure that you get reimbursed for your services or for the product. So a lot of times, this is clericals that we spot that are going on with the people that are responsible for the billing to the insurance on the medical side.

Tegus Client

Got it. I'd love to understand this a little bit. So when it comes to these like target accounts, what like does an FRM, just like have a list of like, hey, like the other key accounts. I have their phone number, I'm going to give them a call and make sure everything is okay.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

Yes. That's it. The idea is we look at reach and frequency. So we like for them just to touch up to the billing person at least one time in a given month. That way we shortened it. We have had cases where they're using a lot of the product and then all of a sudden, it just stopped. Or we reach out to the person, we actually find out that they were thinking that the plan was no longer covering the product and not reimbursing them for it. But what we have found out is if we reach out to them once a month, we actually can troubleshoot that and get that fixed before they actually stop utilizing our product.

Tegus Client

And what does that actually look like in practice? Is that like they just have a list of accounts kind of in a Veeva Systems that they just call? Or is it like how do you track all of that?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

That's exactly. You nailed it. It's in Veeva Systems and it's listed as their targeted accounts. They will tell them when they last called all of them and they had their notes in them that actually tells, specifies what we talked about and then they call in. Sometimes we actually felt like that billing person has now left in between the months.

So we actually update that talk to them and sometimes they've never worked with the build reimbursement person before and sometimes they have. And you might have to sell them on why we're here and why are we calling, why are we bothering them about their own work, but we're just there to help support them and try to actually help them not get bought down in something that they shouldn't be. We do use Veeva for that.

Tegus Client

Do you use any other tools to help with that, like anything else?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

On terms of that, we pull a policy and things that are using Policy Reporter. So we use that and then other than the FRM dashboard and DRG. And I mean we have a lot of tools. But probably the ones that use the Veeva just to record the sales call and things of that nature, but they use Tableau, they use the FRM dashboard and then the regular reports.

Tegus Client

And how do you use DRG?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

DRG is because of both IV and oral. So we'll get calls from the sales representatives or working with our national account directors to talk about, hey, this physician is asking about this particular plan, do you know and we'll look it up and help them look up and we'll sort it through. And so the nice thing that had is flexibility is sometimes we're talking about infectious disease physicians and they will say.

I can't get the tablet covered or it's too out-of-pocket, it is too much expense. Then we'll also do a medical benefit to see if we can actually do the IV instead. So that gives us another option to actually do from moving from the pharmacy benefit to medical benefit. So we'll work with the deal from the DRG to look at both aspects of it.

Tegus Client
Did DRG just help you figure out like if it's going to be covered with the medical benefit?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
We use it mainly for pharmacy benefit. Policy Reporter gives us a little bit better on the medical benefit.

Tegus Client
For DRG, just give you data on the pharmacy benefit policy. If I could just give you the specifics.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
The DRG will kind of link us and say, "Yes, it looks like it's covered. It looks like this might be there is a prior authorization, then we might have to switch from there and then go over to the policy." Policy Reporter is brand new for us. We've just only been working that probably for a month now. So we're just getting used to it. There's probably ways that we can actually use Policy Reporter or move away from DRG.

The other thing that we actually do is that field reimbursement is sometimes our representatives will find a new target and they'll tell us the top five plans or top 10 plans and we're trying to tell them, yes, that's good coverage. I know that's not the ideal target to actually go after. Because a lot of times, our sales representatives will go like a pathless resistance. They'll talk to anybody who wants to talk to them, but that might not always work out from getting scripts through it.

Tegus Client
So like in other words, you know which payer policies you have like good access with. And so coordinating with the sales team to target accounts that have a high payer mix with those accounts that you have high access with.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Correct.

Tegus Client
So then going back to just like the routine, like how much time is spent by targeting these key accounts and checking in with them? Is that again just another 30, 40.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
It's probably 30 minutes per day. If it's 30 accounts and you can do one per day or in you can out and get through it. If not, it doesn't take long for that.

Tegus Client
So then how does the rest of the afternoon gets spent?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
The rest of the afternoon can be consisting of doing training with some of our pharmacy partners. It could be doing training with their sales representatives to better understand how things are going, where things are getting bogged down by a prescription didn't go through working with those offices as well in some of the situations. We spend a lot of time training our sales representatives on market access and why something didn't happen or how it works that way. So there's a lot of time spent on those kinds of things as well.

Tegus Client
Can you explain like when you say training them, what does that mean?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Yes, it could be Zoom. It could be a conference call. It could just be a phone call. And we have two different

salesforces. We have a community-based sales force and we have a hospital-based sales force. And a lot of times, our hospital reps are at a much higher level. They understand market access, a little bit better than others. It's not that easy and some of our representatives on the community side are very black and white.

It said this one was we're covered and there's no prior auth, why is the physician actually saying you had the prior auth. Well, there's always outliers. There's always exceptions, and we walk them through when you look at the employer group, we talk to them about them, we help them understand.

We make sure that they understand all the patient services that are really available. There's a lot of that. Lot more than once you think. Sales representative always understand and there is a little bit more complex because of our pharmacy and medical benefit, but some of the representatives, they feel like they're out there selling and then they want to be able to give the physician 100%. And doctor, if you write it, it will go through with OPA.

And then when it comes back and it has a PA, they get all flustered and we're like, okay, you have to understand there's employer groups, and they have carve-out. And so sometimes it's always not that clear. And so we'll explore that carve-out and help them better understand it. It could be an employer group that's in their area that they weren't aware of.

Tegus Client
So the sales team really just wants to understand how they can sell it as much as possible.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Yes. And usually, they learn, they take that. They got it can better understand. The sales force might be good to go back in there and explain it to the physician, okay, even though this was part of the ESI, prime uses ESI and this situation ESI doesn't typically have a PA but for this employer group they have a carve-out and so it then did need a PA. Do you see a lot of patients with this type of employer group, yes. So here's what you would do if you get that in the future. It's not a big deal. Just send it over this information to the pharmacy, the pharmacy will help and do that for you.

Tegus Client
And so again, just going back to the training, so it sounds like it's a Zoom call, it's a conference call. And like do you just show them slides? Or are you actually just going through DRG or Policy Reporter with them and actually going through the actual policy? Like how do you have to train them?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Yes, all of the above. We have all those things that you're talking about. We do have slides that we use depending upon whichever, or whatever the issue is that we're trying to train them on. We'll show them DRG and kind of walk them through and help them better understand. We probably don't use Policy Reporter that would absolutely blow our representatives mind. They wouldn't understand that, we do use DRG to help them analyze their business a little bit better.

Tegus Client
What do you mean by that? Like that would blow your mind?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
On the Policy Reporter?

Tegus Client
Yes.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Yes, it's a lot of detail. Sales representatives are bottom line. Give me the bottom line. I need to know, okay, it's got to PA, they've got a step through one product. This is a product. They don't read all the different

elements. So don't say if they can do this. They want the bottom line. So if I was to show them a policy that could be five to 10 pages long, that doesn't help the representatives. They just want the bottom line.

Tegus Client
And how long is that usually that training? Is that like a 30-minute hours' worth of training?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
So it depends on how many reps that they have or accounts that they might do. I think it's been an hour doing that depending on the conference calls and things that they would now that day. Again, they're returning e-mails and phone calls from the things that they did in the morning and that still following up on some of those cases, trying to make sure these cases are stand out. Friday at 3:00 is always the horrible day because our medication, we're trying to get every patient out as soon as possible.

That's a big thing. And they would be doing that throughout the afternoon. And we also call hospitals that might be using our product or we're bringing them on board. They've actually been a for formulary. We're talking to them about how to use our hub. We're also training their pharmacies on all the different patient services that are readily available for them. So they can be doing that for an hour in a given day, too.

Tegus Client
So then it's afternoon is doing some trainings, maybe an hour's worth following up on any accounts or cases that they didn't hear back from? And then how does the day really going to be finish?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
I typically talk to all of my field reimbursement team after 5:00 to at least step in to 6:00. I try not to bother them. They mainly call me and say, "Hey, here's what went on." This is what happened today and then we'll fill in. But we're done by cut off time has already happened. There's nothing that we can do typically after 5:00. We can still ship out from our hub until 8:00. But for the most part, payers already closed, you can't get any prior authorizations improve. So pretty much everything kind of slowed down a lot about 4:30, 5:00.

Tegus Client
Got it. So then they essentially sign off at that point?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Usually. Two in the East Coast, one in the West Coast and two in the more central. So different time zone that we cover.

Tegus Client
And is that a pretty typical schedule for FRM?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Very typical. For our FRM. In other products that I have worked on oncology, they could be following a particular office with a particular patient and working on that case for a month or like we had some orphan drugs that we've worked with. And they might have 100 patients and they're not just trying to follow and make sure that everything is good almost 100 patients depending upon where they are. But this product is a little bit different that's because you're dealing with the pharmacy and medical benefit.

Tegus Client
And then what about for you, someone who's a manager of FRM, what was your yesterday like?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Mine's a lot of checking in seeing if they need help or support. I focus on all of our programs and say, what's working, what's being efficient, what's not being. We currently have switched our hub, it is managed by a new company now and the reason why it's because we're more electronic, so much of the information that

the analyst missing information because their old vendor was using fax.

In the Spring, we're moving to an electronic enrollment form, which should limit the ability for them to actually submit incomplete information. It automatically does it via BB immediately within just a few seconds and then also, we'll initiate a VA. We're using less people at the hub and more technology to push through things through quicker. So my job has been a lot like looking at what we're doing throughout the day.

And then what are the additional reports, how can we make what is more information that would help them make better business decisions and streamlining this and make it more efficient. So that's the bulk of what I do as well as I'm meeting with the head, the national sales directors and the head of marketing, and we're talking about marketing tools and how to better communicate some months a little bit different.

Tegus Client

I guess are you essentially reviewing vendors as well and like trying to select new vendors?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

Yes. Or are the new products and services that we can actually have. I'm looking at anything that can make enhance hours, make hours better, make it faster, make it leaner, make it more cost effective. I'm also responsible for running our co-pay program, our Bridge program, in addition to the hub and I'm responsible for all this. I'm also responsible for the product and the channel as it relates to being soft in all the pharmacies and everything else as well as the data aggregator falls within me too. It's a lot.

Tegus Client

I'd love to switch gears a little bit and I'll talk about hubs. I know you kind of alluded to this a little bit. In your eyes, obviously, the hub market is heavily consolidated with like the big two or the big three, but there are some new players. I'm just curious, like from your perspective, who are the most interesting hub vendors in your eyes today?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

So we left one of the big ones because we just weren't pleased with that. They kind of stuck and they were good for when we first started, AssistRx is a really good one. They do nice work, we didn't go with them. We went with a smaller more boutique, just because of their structure. I can tell you, Occam Health is who we're actually using mainly because of their system that they actually use is a little bit more custom.

And so you can make it really work for your own and how you want your reports to come and how you want everything to work is more centered around the product instead of centered around the system that you're trying to make work for you. I would say AssistRx, we looked the trial card and spend a lot of time talking about the one and I actually was pleased with theirs. Sometimes they put you on their systems like, well, you can use this as a shared service. We're in acute med and we're trying to get it out quickly. Shared services doesn't really work for us. So they kind of lost the business because of that. We're using Occam Health and so far, it's been really good.

Tegus Client

What about a company like what's it called the PharmaCord. Are you familiar with them?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

They are good. They all offer very similar services and everything else. It just depends on like when you're a small pharmaceutical company, you might be looking at price as you might be looking at the unique technologies that actually might make it a little bit. And some of them have like little niches that you can use. What does McKesson has and Cardinal has their own. So there's a bunch out there. We met with probably 11 different ones a couple of years ago before we know then that Occam seems to be the right fit for us.

Tegus Client

Can you explain the shared service part? What do you mean share service do?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Yes. So a lot of times, what we want is people that are dedicated to your program, meaning they are only answering calls that deal with your product. Some of the other companies will pitch shared services, and that means that you might have a group of people answering phone calls and helping patients, but they might be doing it for three or four companies.

And so I think that's very difficult for the shared service individuals to actually remember, this product has two different patient services. Well, this product has three. Is this product the one it's acute? Or is that probably the one that's acute? It's a lot of balance of your sharing services and you're dealing with trying to be efficient and speed. It's okay if you've got a product that doesn't have to be there quickly or you're dealing with adherence models. That's a completely shared services would work ideally for that. It doesn't work for our products.

Tegus Client
So just to clarify, you don't want like a case manager and like the hub team to be covering managing multiple different companies? Or is there just even multiple products of your company?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
They can handle a couple of products, the more that they touch the same type of patient, the faster they are, the quicker they can make decisions, and that's been our experience. What we actually have found is if you get a team of 30 people and they've got four different products, they're actually doing, it's hard, they don't get a good cadence or a rhythm on how to actually do your product effectively. Might be a little bit different than what you're doing and some of the things you're getting because mines in the Q product. We're trying to actually get the product in the hands of patients by no more than two days.

Tegus Client
Is it an infused antibiotic?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Yes. Infused or tablet. Or it will look like tablets. Why weren't they preferred, it's bioequivalent. Why wouldn't you want the tablet? The only reason why we actually have the infusion sometimes can do with buying physicians make more money with that, but sometimes that's to do with patients portability of the product.

Tegus Client
And then my last question is, how do you deal with IDNs who have their own SPs and they want to dispense drugs to their own SPs, but you have a limited distribution network? Like how do you actually navigate that?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.
Yes. Balance in the vertical integration, like you mentioned, Optum and having UnitedHealthcare and they're trying to force it. Pharmacy benefit has changed a lot, especially with pharmacies, they're getting squeezed. Most of the time, what we have found is we can get the override and get them to go. It's just convincing them. I can tell you in those situations where we've actually opened a pharmacy because they had to have it.

They closed it. And they actually said, we would rather just transfer it because we're getting killed from a reimbursement standpoint. We're just not able to dispense this because it's just causing us too much. So most of the time, they're actually willing to give it over there. But the majority were able to do override.

Tegus Client
So number one, some IDNs essentially, they don't even want to dispense it at their own because it's just so expensive for them. They're losing money.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

They're losing money. It'll be not contracted as well with ESI or some of the others in ESI might be charging at 20% just in the sense of the product. No, you just got to take care or they will coordinate it with you. Where some of the IDNs now that their pharmacies aren't able to turn around the script. And that means that the patient could be readmitted to the hospital, and that's a big no-no for them. So.

Tegus Client

So yes, that's what I was trying to get at, like for some of these, antibiotics is going to be really important to stock rehospitalization. So in that instance, you're saying they can dispense it in their own pharmacy. And what do you mean you can just override it.

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

So a lot of times what we have noticed many of them do, they will look at a script. If they make money off of it, they'll dispense it, not they'll throw it over to one of our Walgreens Specialty or CVS Specialty or Kroger Specialty, they'll throw it over to us. But they'll really kind of cherry pick the ones that are best for them.

Tegus Client

And then what's the overriding? Is that just getting a medical exception from the payer?

Executive Director of Trade Relations and Patient Services at Paratek Pharmaceuticals, Inc.

So, let's use Accredo, for instance, like there are certain plans and they say, no, you have to use Accredo for this. There's no other way. We're like, well, Accredo doesn't have access to the product. So we'll get the pharmacy on the phone and we'll get the plan on the phone and we're like it's a limited distribution model. Accredo doesn't have access to the product, and therefore, you need to give a grant to override and I would say 90% of the time they grant the override. They'll say, okay, we'll give you the override for a onetime fill that's fine for us because most of our prescriptions are just onetime fills.

Tegus Client

Thank you so much for your time today and have a good rest of your day.
