

Imaging Panda - Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Interview conducted on March 08, 2023

Topics

Healthcare Industry, Insurance Coverage, Field Reimbursement Manager, Medication Authorization, Patient Compliance, Communication, Information Gathering

Summary

A Tegus Client speaks with a Field Reimbursement Manager at Apellis Pharmaceuticals, Inc. about the challenges of the reimbursement process. The conversation focuses on the different steps involved, including the lack of patient consent and a champion in the office in Step one and Step two. Step three can be time-consuming due to the analysis of barriers, while Step four can be challenging to draw a boundary with sales. However, Step five should not have any major challenges if everything has been done on the reimbursement manager's end. The manager emphasized the importance of documenting progress and preparing for reauthorization, but noted that non-compliant patients can waste time and energy.

Expert Details

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc. and former Access and Reimbursement Manager at Biogen Inc., leaving March 2022. Expert can speak to their experience with field reimbursement at both Apellis Pharmaceuticals, Inc. and Biogen Inc.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc. The expert is responsible for a newly-prescribed retina product. The expert works with administrators in retina practices to educate them about Apellis' patient portal. The expert educates and offers customers on the local market landscape, payer policies, etc.

Prior to Apellis Pharmaceuticals, Inc., the expert was the Access and Reimbursement Manager at Biogen Inc., leaving March 2022. The expert was responsible for a drug that has since been taken off the market. The expert oversaw the Medicare population and CMS to educate customers on the local market landscape and payer policies.

Q: What are your current top 3 goals/focuses in your current role?

A: 1. Help patients gain access to our drug
2. Personal development in this role
3. Provide services (customer and support) to both internal and external stakeholders

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: Regional Field Reimbursement Director.

Q: What are the job titles of the people you manage/your direct reports? (e.g. Regional Account Manager)

A: No.

Tegus Client

Hi. Thanks so much for speaking with me. So today, I am really trying to get a deep understanding of FRM in the day-to-day. So I'll just start off with is a very high-level general question and then we'll dig into this. Can

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you just briefly describe your current role and your day to day?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Day-to-day varies, depending on what I have in the patient portal and what cases I have opened. Normally, once the patient enrolls in the portal once the office rolls the patient in the portal to benefit investigation and the whole process starts to give them access to therapy and a path to therapy.

Tegus Client

So then I'll like the transition. So I understand that you can get looped in at any point of the process whenever a patient needs to start therapy. You can get looped in at the very beginning when the patient is trying to enroll in the hub, the clinic is trying to roll a patient into the hub or you may get moved in much later into the journey where, let's say, prior office been denied and they need help with a denial letter or an appeal or whatever that you can get looped in at any point.

And so what I've done is I've broken down this process into eight steps. So in the very beginning, you have a lot of accounts that you definitely support, and you just have to make a decision, Monday morning, you're starting your day, which account do you want to directly assist in the moment, where do you need to collect that info on the case to help that case?

And then what are the procedures, if at all, as you're helping the health system, a large IDN, if they have any procedures for you just to be able to engage with it. That's what we're talking about in Step one. Which parts of this step are challenging, inconvenient or frustrating for you in your current role?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

If there is no patient consent, no HIPPA consent on the office yes, that's it. That's the most challenging thing. Lack of consent.

Tegus Client

And can you just explain that a little bit? Like why is that so challenging?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

It's challenging because as an FRM, we can't do anything to support the patient if we don't have consent to their personal health information. Everything stops there for us. We can't help the office with at any stage if we don't have that initial consent.

Tegus Client

And I want to just understand this better, like why is it so hard to get the patient consent?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

A lot of times, you're dealing with a drug that may be the patients are primarily Medicare age and the signature is not captured at the time of the office visits. And the doctor may decide at a later date that he wants to prescribe a specific medication, and they don't have, the patient is enrolled like, say, in the hub or through the portal or even a paper enrollment, but they did not capture the patient signature. An older patient may not have access to e-mail or may not be fluent with the. a text message or something like that.

Tegus Client

That makes a lot of sense. So then continuing on with Step one, what makes this step slower time consuming for you?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

If I have to constantly go back and like if a patient, say a patient is enrolled in the process, in the hub, the portal or even on paper. If there's missing information or the enrollment is incomplete in any way, then sometimes with or without consent, the benefits investigation can be run. But if I don't have consent, there's nothing else I can do. I won't even know who the patient is, if the benefits investigation has been run or not,

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that may go back to the office. But I can't lay eyes on it. So that slows everything down for me to support the office.

Tegus Client

And then what aspects of this step are wasteful or can contribute to lower output for you? If at all.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Yes, none that I can think of.

Tegus Client

Let's move on to Step two. So you've now made the decision on which account you're going to dedicate your time to in this moment. Now you need to gather the info. So you need to gather the info on a patient's case from your vendors, whether it's the hub, your copay assistance program, your SPs, you need to gather information on the benefit verification as well as potentially even call the staff in the account to just get more information about the case. What things in this step are challenging and convenient or frustrating?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

A lot of times, there is not a sort of champion in the office. There's not one person, maybe it's a large practice and there's not one person that does all of this, all of the back office that deals with the portal and also too, there is tons of medications. Even if you're dealing with a specialist, they may prescribe several different medications for the same diagnosis for the same procedure.

So it may be important to you to you because it's your medication, but it may not be a priority for them or if they don't have a backup, the person that handles these types of enrollment or that handles the prior authorizations or whatever, they don't have a backup, then there's nothing you can do.

Tegus Client

Why does that make it challenging?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Because you develop a relationship and you develop the best ways to communicate with the office staff. But if you don't have that relationship where you don't have a clear path to communicate is challenging because you can't be everywhere at the same time. So a lot of what you can do, you can do from your home office or you can do by visiting them, but it doesn't do any good if there's not someone there to help you on their end. And some offices are resistant to doing it.

Tegus Client

So my understanding is that having, not having a champion it makes it harder to actually work with the clinic or troubleshoot or I guess, collect information virtually.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Yes.

Tegus Client

And why are they resistant to you helping them out?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Say, for instance, if this is a new medication is time consuming, and we may not all of the information that they need. They may not even be a payer policy. And sometimes it's not their fault. It's a lot of work. And unless an office has someone dedicated to do that work, sometimes things fall through the cracks. And always the expectation is that you should do the work.

Tegus Client

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And what aspects of Step two are slow or time-consuming free?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Say if there is not a policy in place for the medication, then that increases the amount of paperwork and the amount of documentation, the history and it just slows the process down because they may be dealing with a carve-out for a payer or they may be dealing with a patient that's uninsured or underinsured. And so all of those things can contribute to slowing down the process.

Tegus Client

And in your current role, do you cover a new product?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Yes, I do.

Tegus Client

So in this instance, and my understanding is that basically just gathering information from the staff, it's time consuming because they don't actually know what all information you need from them because they're not familiar with this drug. Is that right? Or is it something else?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

No, it's not that they are not familiar with it. Nobody is familiar with it. It's just that there are no policies that dictate what information that they need. What type of documentation they need? What kind of patient history, notes, things like that. And even the proper codes, they may not even be aware of what codes they need to do to build for the medication.

Tegus Client

And what makes that flow for you? So you're there to assist them, to help educate them. But what's time consuming in that process for you?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

What's time consuming is if I don't have access to them or if I have several cases in the same situation where they have patients not so much in limbo, but they say they want to provide the medication for the patient. But without a payer policy, all I can have them do is submit the permit for reimbursement, if you will, or I can have them submit the claim for predetermination. But all of those take time because it's their processes, there's deadlines, there are a lot of things on the insurance companies and that can also slow down the process. Where there is no color.

Tegus Client

And again, just focusing on this part of gathering information, not actually helping them troubleshoot or anything like that. We'll get to that a little bit. When you're just gathering all of this information, what causes this step to be unpredictable or go off track, if at all.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Say, in most cases, when you gather information is a checklist of some sort of the information that you need. And sometimes they can know from prior experience, what information the payer may be looking for before there's a policy. But in some cases, if it's a new drug and it's a new or a new diagnosis and say it's first-in-class, then they may not know exactly what they need. And all they can do is provide information to the label through the PI.

Tegus Client

You're saying that you can only provide information to the label?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Yes. And in most cases, the commercial payers will follow whatever Medicare does. So until claims are paid through Medicare and the payers and the physicians know what Medicare is looking for that they, all they can do is either throw the at it and give them anything and everything or they can just write the prescription, give them information that's in the label that's in the product insert.

Tegus Client

Got it. And you said PI, is that product insert?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Yes. That's product insert.

Tegus Client

So you have the list of all the info that you can share with them. What makes that be unpredictable then if you have the great easy checklist.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

If you have a checklist, on their end, they may not have all the information, say, in the patient's history. It may be challenging for the person on the other end to get all of the information depending on how many patients they have. And it's, it may seem like we're asking for too much. And again, it's, this is only one medication we're talking about. So the way it seems, it seems to somebody on the other end is you're adding more to their plate.

Tegus Client

Okay, let's move on to Step three. So in this step, you've now gathered the information that you needed and this is really just talking about now analyzing the information. So you're examining the barriers to starting the therapy and then you're examining what are the options that you can provide to help the staff or the patient to overcome the barriers to therapy as well as prepare any of the supporting materials.

Now again, we have been talking about sharing it yet, making contact with them. This is just internally, you're examining all the information and you're trying to decide how can you actually now assist as well as prepare any material to share with them. So in this step, what makes this step or parts of it challenging inconvenient or frustrating?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

For me or for them?

Tegus Client

For you.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

This step seems to me that it almost assumes that say there is a prior authorization. That could be a barrier. There can be other utilization management barriers. They could be step edits. Even though it's not in the label, it's not required, say, the FDA label, the FDA approval of this label letter did not say that they needed some kind of imaging. But the commercial payers saying, well, the patient needs to have tried this and this first, but that's not, there's nothing you can do about those kinds of barriers except give them the information or explain why it's medically necessary.

Tegus Client

So I understand the payers may implement different UM criteria. It may be on-label, it may be off, maybe beyond with on the PI or the FDA studies. And you have to examine those barriers. I just want to understand what's hard about examining this. Is it that you just don't have the tools to examine them? It's really time consuming? What's actually challenging about just examining the barriers?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

It's basically, it's time consuming. You have the tools because you have the product label, you have the FDA approval letter. You have the option of helping them establish medical necessity. And truly, that's what it boils down to. Because if you already, if they've gotten a rejection in any way, usually the rejection is telling them why. And so based on why they are told that, say, the drug or procedure was denied, then you can work backwards from there to help them. So the only barrier is getting the correct information. And sometimes that can be time consuming.

Tegus Client

And what about that can be time consuming just when it comes to analyzing those barriers, if you have all the tools, what about it is really time consuming for you?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Just getting the back and forth and giving them what you have to help them and getting them to do it in a timely fashion because any kind of denial or prior authorization, there's always time limits specified like you need to get asked by this, this, this and so establishing a sense of urgency. You're given all the tools but yes, establishes this sense of urgency.

Tegus Client

And we're going to get into this in a little bit later on Step five when it actually comes to sharing that information. I'm just going to focus here in on Step three when it comes to just examining the barriers, examining the options. I'm trying to understand when it comes to just that analysis piece, what's time consuming for you?

It's really slow to just read through what the payer is saying, the documentation and really understand what's going on? Or it's really time consuming to figure out what can you actually do to overcome what the payer is saying? What's really time consuming here for you?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

It's not that, it all depends on the nature of the denial. And sometimes it's not even a denial. Sometimes it's just a request for additional information, but just getting down to the root of what's going on and what's being asked can be challenging at times and so because you're not dealing with one case at a time, you're prioritizing and trying to deal with people and meet them where they are in the process.

So I can't say that it's always time consuming, but it is challenging if you're given the information like for the denial of what the prior authorization request is or the additional information, then you can pretty much handle it from that point on and help them to get what they need. A lot of times, you can't just give it to them. But you can help them with like you can help them with the level of medical necessity. You can help them by having a checklist of things that you've heard or seen that may help them get through the process.

Tegus Client

So am I understanding it correctly that really the challenging piece is just getting that letter from the staff, but actually examining it and figuring out how to overcome it isn't actually that challenging for you.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Right.

Tegus Client

Again, focusing in on just Step three here. What causes this step to be unpredictable or go off track for you?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

If there is a break in the communication, or if the office doesn't have the information that you feel that they need to move the process forward or they, or they have other priorities, and this don't just sit and then the time passes and so we have to either start the process over or yes, I think that's basically our only option at

that point is to start the process over.

Tegus Client

What's actually unpredictable here?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

There are a lot of things that are out of your control. You can share the information. You can walk it in, you can give it to them, hand it to home, you can do everything on your part. But what's out of your control is how they handle it. or how they respond.

Tegus Client

Let move on to Step four. So Step four is, you haven't gotten to actually sharing the information. You're just deciding, if you have all the information in front of you, now you want to decide how do you want to overcome the barriers and then finding if you need to share any information with your sales team. To let them know that you're going to make contact with the account as well as confirming that consent on the record if you need consent to make contact with the account. What parts of this step are challenging inconvenient or frustrating?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

I was in sales a long time before I did reimbursement. And for the salesperson the patient is important, but the sale is important. I'm not going to say more important, but their sales is their bottom line. So a lot of the time they want to be involved. And just telling them that there has to be a clear distinction between access and reimbursement and sales.

And so you can't, in any way, allow them is the best way to put it. You can't, in any way, allow them to enter feel with the process. They can come to you and they will come to you and because for them is urgent that the patient gets on drug, but they have to understand.

And I think a lot of it depends on your relationship with the salesperson, helping them to understand the process and what's going on without sharing any kind of patient information with them. And sometimes they can help too because they may have a better relationship with the office than you do.

Tegus Client

And why is it so challenging to draw that boundary with sales?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Despite nature of the difference in our role, my role is to help the patient get access to the medication and help the prescriber be reimbursed properly for. But their role is to generate business and to generate sales. And it all depends, they're paid based on how many say vials they sell or how many patients they get on therapy. But that's now I am incentivized.

We have a totally different set of metrics. But I find that like haven't been on both sides as the field reimbursement manager, I just, with their guardrails around what they can and can't do and what they, what information they can and can't have. They understand once you explain it to them and explain the compliance issues and the legality of it, they understand they may still push the boundaries, but they do understand.

Tegus Client

Let's move on to Step five, is the real meat and potatoes here. You're actually now making contact with the accounts. You're sharing the strategies with them on how to overcome the barrier. You're potentially sharing any supporting materials, whether it's the template, whether it's a link to the policy, whether it's the PI. Any of those materials to help them overcome there as well as just closing the loop, maybe informing your hub or your vendors that you make contact informing the pilot, we made contact, we're making some progress here.

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Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

It does and it doesn't. It's when I'm informing them, it just can't be patient specific. It can be in general. It just can't be patient specific.

Tegus Client

Let's just say in this instance, just that general not patient specifics, FYI. So what makes this step or parts of it challenging or inconvenient or frustrating.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

I don't see anything at this point because we're pretty much locked in with the materials that we have that we can share and the support that we can give. If we've gotten all the way to this point, this is not their first rodeo with the drug. So they understand the payers sometimes even better than you do, and they understand what they need. They just want to know that you can answer their questions.

Tegus Client

And what makes this step slow or time consuming for you, if at all?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

If I've done everything on my end, and I'm just waiting for them to communicate that, that they've done everything. And also too, the third person is the hub. A lot of times, the hubs have access to things that can help the office as well. So as long as I'm communicating with the hub, they're communicating with the hub, and we all understand and know where we are and even if the patient has to get involved. As long as we keep the communication over, if we're at this point, this is not the hardest part of the deal.

Tegus Client

Step five is sharing that information. It might be the first time. It might be the second time, it can be at any point where you're sharing the information with the staff on how to overcome that barrier. Are any parts of that process time consuming or slow?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

I want to say initially, it may be the first time there's a denial for whatever reason, the first time they are doing maybe with a payer that has a patient that has a carve-out. Sometimes it takes a little more than average. And sometimes you just have to go to query your team to find out if anybody else has had this challenge. And so it can take a lot when you have other things on your plate, but it's a priority. And once you accomplish this step, Step five, then you're able to move forward and you're able to work on other cases, even within this office or this account.

Tegus Client

And why is that first time a little bit slower?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Only because you haven't dealt with it before and you kind of are not aware of the response that you have a response that you expect, but you just don't know. And it's just like with any new drug before there's a policy, you can submit what you think that they need to know, but they can always come back with additional information request, which is fine because then you know.

But if they come back with and sometimes offices assume that, that request for additional information based on how it's worded, they think it's a denial, when it's really not. So sorting through that and making sure everybody is on the same page with where we are, sometimes it can take some time.

Tegus Client

When you said the first time, you mean the first time you're helping an office with the drug or you think the first time as in the first, the new drug, it's a new drug for them?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Look, if it's a new drug, the first time they're submitting to a payer with no policy, if it's the first time.

Tegus Client

Let's move on to Step six. So in Step six, you've shared the information and now you're focused on that they understand whatever information you can have shared with them and or, which is just tracking their progress. Now you've shared it with them, the ball is in their court, and it's up to them to figure it out, and you just have to track their progress.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

At that point, I am sort of taking a back seat because I have the hub personnel to do the day-to-day communicating with them. I'm in the field, and I can do it, but the information is housed at the hub. And that's basically the only way that I share with offices that I can have eyes and that I can support them because I know that I have the hub support as well.

So where I may not have all of the information personally with me, it is housed in the hub. So I am going to work with and count on my hub to update me because the hub is where they could get the necessary prior authorization form. They can get all the information in the hub can also relay everything to me and everything is accounted for in the hub.

Tegus Client

What aspects of this step, if at all, are challenging inconvenient or frustrating for you?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

None. Because you say the account understands. But once they understand, then yes, essentially, the ball is in their court. And everybody has what they need. So there's nothing challenging about that step.

Tegus Client

And what causes this step to be slow or time consuming for you if at all?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Not for me. If they don't do what they need to do in the time we fashion for them, it can be time consume, but not for me. Because at this point, I've kind of moved on and my expectation at this point is to understand what's next. If they've done everything, they understand what they need to do. The hub is their communication with the hub. And I just need to know what's next.

Tegus Client

Let's move on to Step seven. So this is a small step. You gave the clinic or staff for the account on strategy. That strategy doesn't work. Now you have to finger up the next strategy, move on to the next strategy. So for example, they need help with prior ops, they submitted it, but now there is a denial or the request for more information. Or let's say, if the Medicare patient, you told them about different foundations, none of those foundations are have money for the patients. So you need to move on to the next strategy.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

It makes sense. But in my role in any FRM role I've had, we absolutely have nothing to do with the foundation. We allow the hub to take care of that only because we should not know who our company contributes, what charitable organizations of our company contributes to. But if you want to say a specific strategy, say they exhausted all levels of appeal. And everything we tried has not worked. At that point, we're again going back to the hub and seeing what we can do to help them financially or to help them get access to drug, even if it means a foundation or free drug on our part.

Tegus Client

If option one doesn't work. What aspects of that step are challenging, inconvenient or frustrating for you?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

It's frustrating, if we've done everything that has been requested in a timely manner and the patient still is denied. Like I guess, if we started this whole process from Step one and the patient was in the appropriate patient, the patient with on label and everything. If everything they requested and everything we tried did not work, I'm going to say we exhausted everything, every level of appeal.

Then at that point, we're going back to the hub, and we're going to have the customer or the account export either whatever kind of foundation support they can give, whatever kind of financial programs we have that can support them as well because that's really our only, that's our backup. That's our only option at that point.

Tegus Client

And so that makes sense. And what makes this step slow or time consuming?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

It's really not slow, and I don't think it's time consuming because again, everything has a timeline, whether it's 30 days, 60 days. And if we've gone through everything and we've exhausted it, with this also, on the sales side, there is some savings like samples. Let's say the company has a program where, again, if it's the appropriate patient and the patient falls within all the guidelines, they may give them medication for 90 days while we work on it. But if after 90 days, we've exhausted everything then it reverts back to the hub.

Tegus Client

Let's move on to the last step, Step eight. So I understand that for many of these specialty medications, they're not a one and done. Patients might be on them for a long time. Often you may have to receive them, something must be reauthorized. And so what this step is talking about is you now need to store the information about that case somewhere so that it's ready for the next time you have to help that account. What makes this step challenging, inconvenient or frustrating for you?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

This step really isn't. If we've gotten to this point and we say we've got an optimization for the medication. Then usually, we know that the authorization is good to say, even if it took three months or six months. Well the hub is responsible for pinging the hub, pinging the account to say, hey, a re-op is necessary.

But before they even do that, they set expectations around what the re-ops could look like. We have to show some progress. We have to show that the patient was compliant and taking the medication. And these are the things that they're going to be looking for before they reauthorize it. And we can't just assume that there's going to be continuity of care. We have to prepare on the front end so that when that three months, six months rolls around, we're ready.

Tegus Client

But I'd like just to understand like what aspects of that are actually challenging for you? It sounds like there's a lot there.

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

There's a lot there, but it's really not. It's certain expectations, it's just letting the account now beforehand. We have a three-month authorization. In this three months, you need to document that the patient was compliant with the drug. They came in every time they were supposed to we need to document whether or not there was any progress in their condition or not. And we also need to document anything that will help us with the reauthorization.

Tegus Client

And what makes this step slow or time consuming for you?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

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Nothing. At this point, I'm out of it. I'm out of it after I've given them all the information. And the thing too is a lot of these questions or these steps assumes that assume that maybe the person in the account is new, but they've dealt with this before. And so they know to expect but what they expect from us, from the FRM. And they see the company, the hub, we are the face of the hub, they expect that we will let them know when the reauthorization is due. And I don't think that's unfair expectation.

Tegus Client

And then last question here is what aspects of this depth are wasteful or can contribute to lower output for you, if at all?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Now only if the patient isn't compliant, then we have wasted a lot of time and energy. And patients are not compliant for a lot of reasons. But again, that's out of my control.

Tegus Client

Can you explain that a little bit? What you found there?

Field Reimbursement Manager, Retina at Apellis Pharmaceuticals, Inc.

Say if the patient is on a chronic medication, and they don't see any value or they don't see any progress or their expectations are not met, if it's like monthly or every other month or two months or a weekly injection, and they don't come in because after month one, they don't see any change, then we've gone through this whole cycle for nothing. Because they won't be reauthorized if we can't prove that they were compliant.

Tegus Client

Perfect. Well, enjoy the rest of your day, and have a great rest of your week. Thank you so much.

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