

Patient-Assistance Programs: Assessment of and Use by Safety-Net Clinics

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Am J Health-Syst Pharm. 2005; 62 (7): 726-731. ©2005 American Society of Health-System Pharmacists

Abstract

Purpose: Safety-net clinics' use and assessment of patient-assistance programs (PAPs) were studied.

Methods: A multistate telephone survey was conducted on the basis of issues identified during 10 case-study interviews of safety-net clinics serving primarily uninsured and publicly insured patients. Interviewed were pharmacists and other staff taking primary responsibility for helping patients apply to PAPs.

Results: Of 339 survey candidates, 215 provided complete interviews (63% response rate). Ninety-three percent of the completed interviews were with clinics in California, Texas, and Florida. Forty percent of the clinics reported that at least 75% of their patients lacked drug insurance coverage. There was a significant positive relationship between a clinic's likelihood of using PAPs and the percentage of its patients lacking drug coverage. PAPs consumed 12 hours of pharmacist time per month and 99 hours of other staff time per month. Clinics most frequently cited program requirements changing without notice and unrealistic income-documentation rules as potential barriers to PAP use and indicated that consistent eligibility criteria and standardized application procedures were needed.

Conclusion: 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.