

# Prescription Renewal Fee Policy

## The Preliminary Results

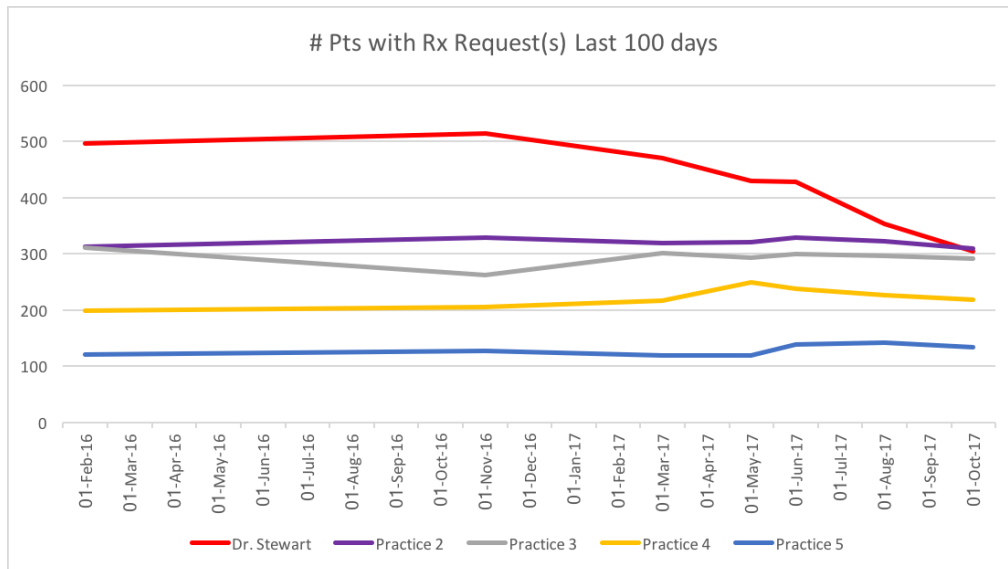
April 6, 2018

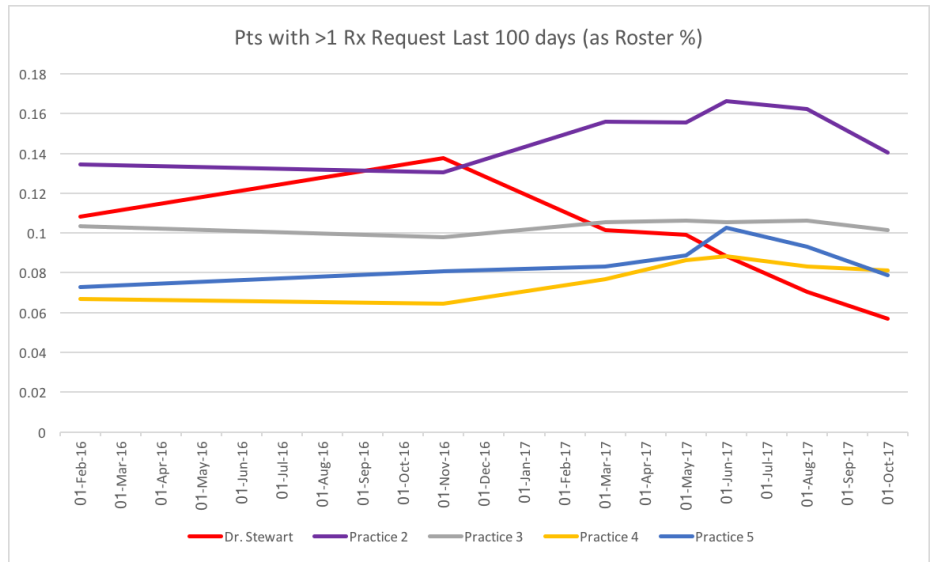
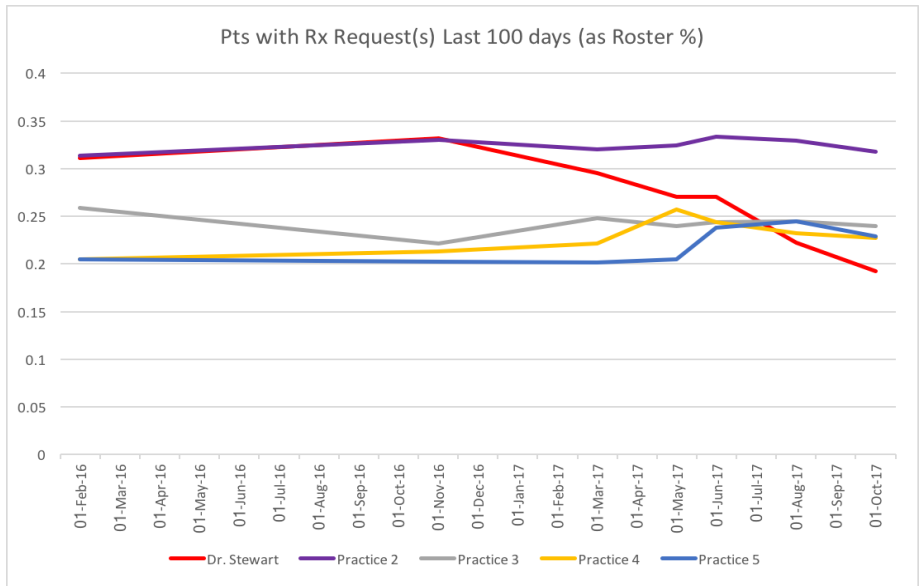
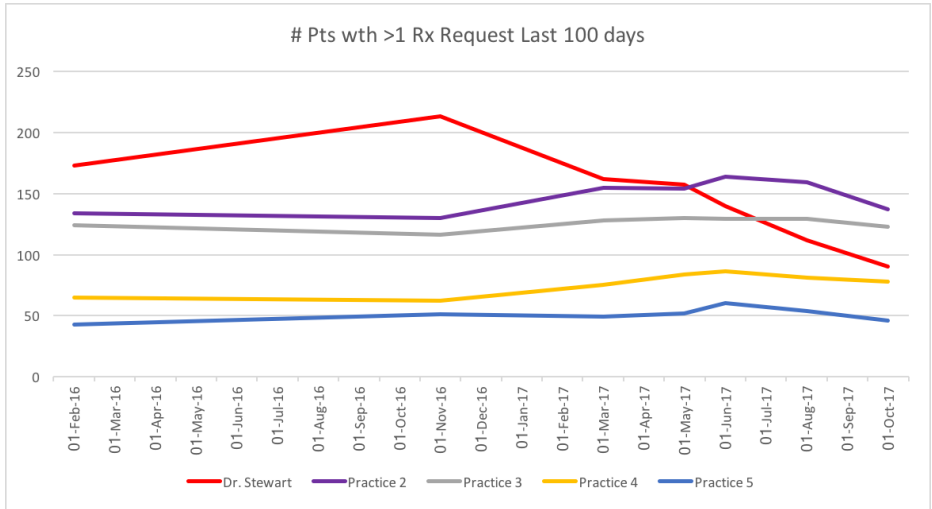
Every single telephone call, fax, email, letter, and request to a medical office form requires the time, skill, and resources of the staff and physician. Hundreds of such requests every day amount to enormous costs to operate a medical clinic efficiently. **Requests for prescription renewals represent an enormous area of this administrative burden and physician time.**

**Beginning in 2016, Dr. Stewart started to track statistics related to prescription renewal requests.** He also organized and led several meetings with staff and the local pharmacy where they brainstormed and trialed different measures to reduce the number of prescription requests.

They tried to synchronize patients' medications so that they all came due at once. They ensured patients have ample repeats on their prescriptions. They tried reminding patients to check for repeats through multiple methods before contacting our office. They tried to encourage patients to call in for all their medications at once, rather than one at a time. They tried to encourage patients to get their prescriptions renewed during visits with the doctor, rather than calling in at a later date.

**These strategies resulted in some small improvements as depicted in graphs below:**





Unfortunately, though, none of these efforts proved to be successful to a satisfactory level. Every day, the office still received an excessive number of prescription requests, even from patients who:

- i. Already have repeats at their pharmacy;
- ii. Call in for one medication one day, and then call in for another a few days later, instead of calling in for them all at once;
- iii. Call in for a prescription even though they just recently saw the doctor and could have asked for it then.
- iv. Misplaced prescriptions that were already given.

**As shown above, in October 2017, Dr. Stewart's practice alone still had 304 different patients calling in for prescription renewals every 100 days. Furthermore, 90 of those 304 patients were calling in more than once during that same 100 day period.**

*A few important points regarding these numbers:*

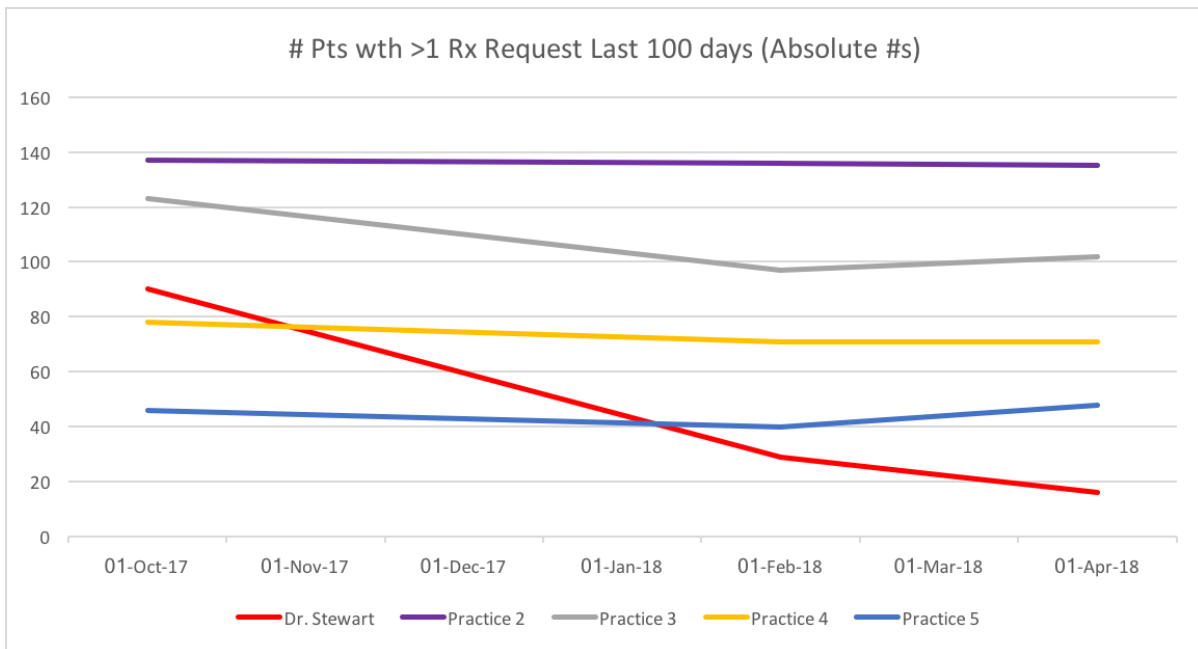
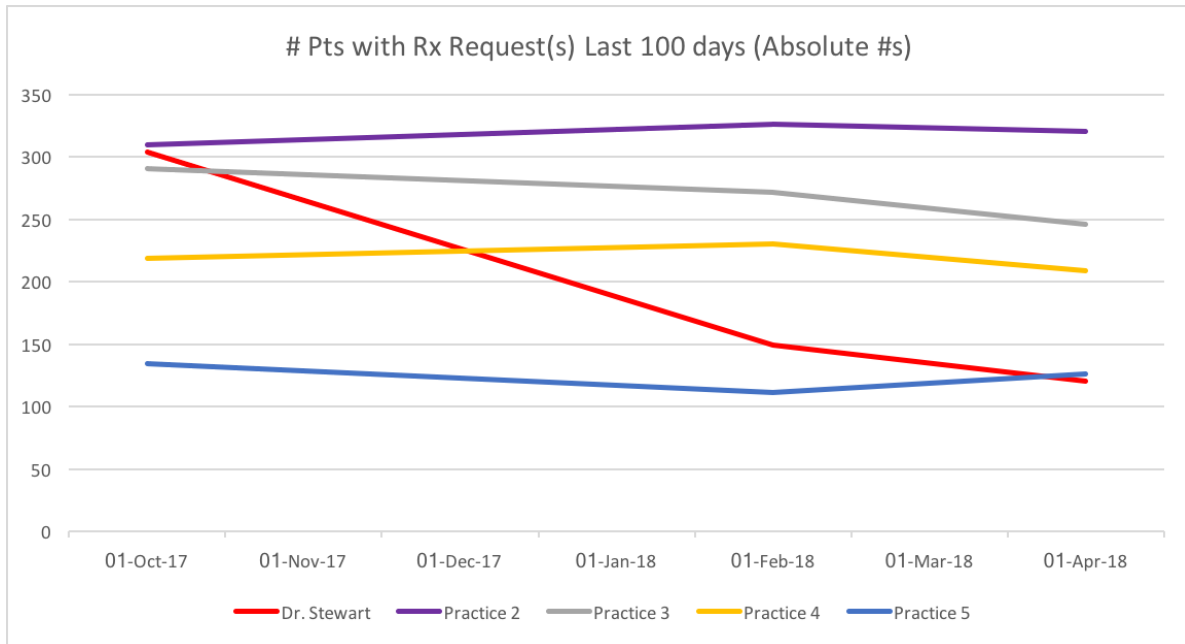
- a) *Every "100 days" equates to only 71 business days due to closures on weekends.*
- b) *These prescription renewals were all over and above those prescriptions renewed in person during visits with the doctors.*
- c) *This cycle repeats itself every hundred days with hundreds more prescription requests.*

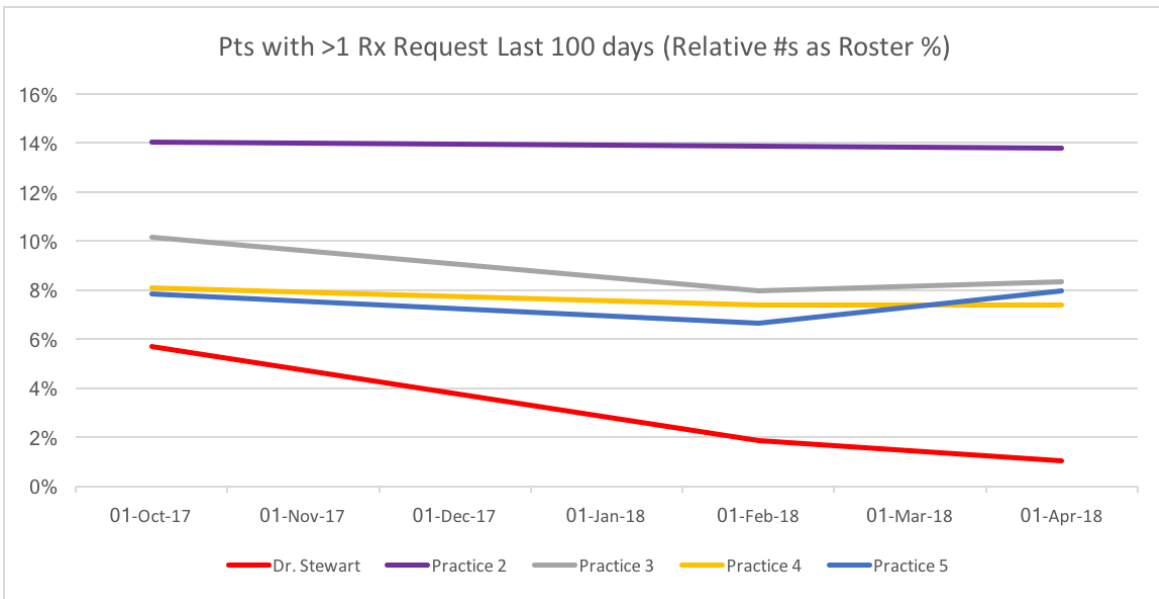
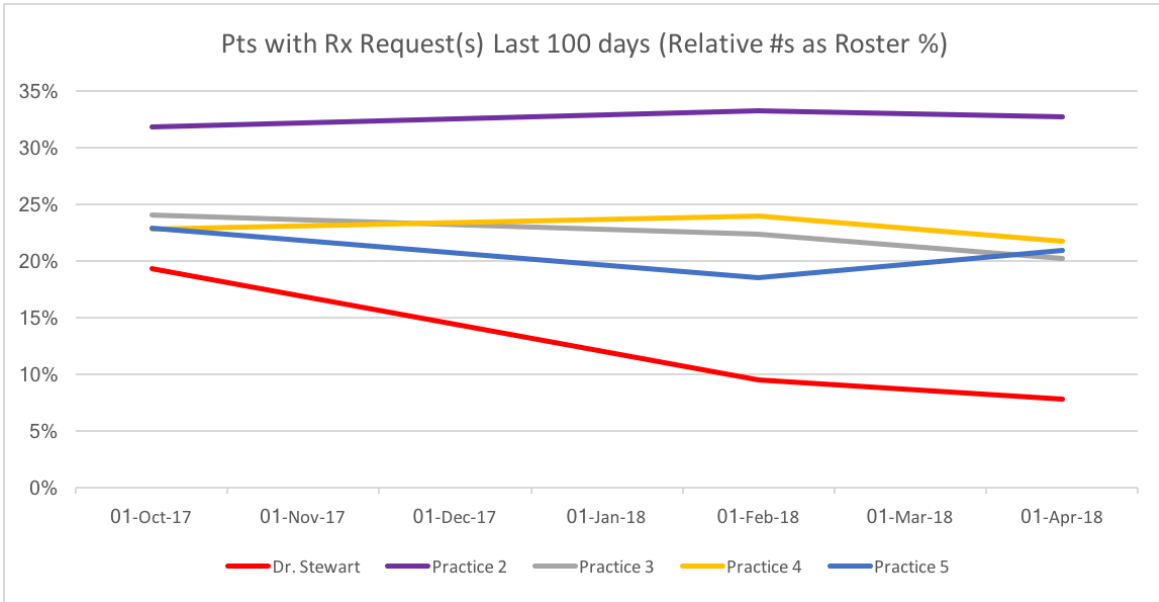
**Therefore, after tremendous consideration, on November 1<sup>st</sup>, 2017, Dr. Stewart started a policy that a \$20 fee would be charged for prescription renewals without a visit to the doctor.**

*The complete details and rationale can be found [HERE](#)*

As of April 6<sup>th</sup>, 2018, after only five months, the policy has proven to produce astounding reductions in the number of prescription requests.

The following graphs depict the numbers of prescription requests, comparing Dr. Stewart's practice to other clinicians in the same office who did not implement the policy:





**The following table summarizes the latest data:**

Apr 6, 2018

	# Patients - Last 100 days				Min # Requests*	Roster Size
	At Least 1 Rx Request	2 or more Request	3 or more Request	4 or more Request		
Dr. Stewart	120	16	1	1	138	1549
Practice 2	320	135	54	35	544	979
Practice 3	246	102	41	16	405	1221
Practice 4	209	71	32	13	325	962
Practice 5	126	48	28	9	211	602

\* based on min of 1, 2, 3, or 4 requests as above; not account for any pts with 4+ requests

## **Prescription Renewal Visits:**

The primary intent of charging a fee for prescription renewals was never to collect revenue from patient. Instead, the policy was implemented in order to decrease the administrative burden of avoidable prescription requests.

Instead of paying a fee, patients were guaranteed a “Prescription Renewal Visit” prior to medications coming due (noting that standard office policy of allowing at least two business days for prescription renewals, or in this case, an appointment). Otherwise, the fee would be waived.

Naturally, this would result in a certain number of increased patient visits to the clinic.

Dr. Stewart also tracked the number of such visits that were booked strictly to renew prescriptions:

**In the last 100 days, Dr. Stewart had only had 94 visits  
booked strictly for Prescription Renewals**

## **Additional Points:**

When patients come in for Prescription Renewal Visits, Dr. Stewart is able to renew *all* of the patient’s medications at once and emphasize that they now have repeats on all of them for the next year. Thus, the same patients will not be returning, nor calling in for renewals, every three months.

An additional benefit to the Prescription Renewal Visits is that Dr. Stewart is able to quickly advise patients if they are overdue for other tests, saving back and forth messages, or future recalls, by staff.

During these visits, the physician can still at least generate a small amount of compensatory revenue in capitated models via shadow billing and taking the opportunity to address smoking cessation and/or other patient care and billing opportunities.

Patients are admittedly still learning the new system.

**Thus, further improvements in results are expected over the next six months.**