

Evaluating the Influence of Technology in Specialty Pharmacy Partnerships

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Background

This case study explores how technology can fundamentally improve collaboration across specialty pharmacy (SP) networks, particularly for patients with complex or rare conditions. Using de-identified data from 737 hub and 197 SP patients in the hematology therapeutic area—across five major specialty pharmacy partners (Accredo, Biologics, Kroger, CVS Caremark, Optum)—the analysis focuses on fill rate and time-to-fill metrics within the hematology therapeutic area. Current care coordination is often slow and reactive, relying on manual processes that delay support for at-risk patients and cause fragmented accountability. Implementing a real-time collaboration portal, integrated with CRM systems across manufacturer patient service teams, enables faster, proactive interventions—especially for complex cases. This approach has been shown to improve specialty pharmacy fill rates by 5–20%, as timely responses increase the chances of patients starting and staying on therapy. This paper examines the benefits and real-world impact of adopting intelligent, tech-driven case coordination systems compared to traditional patient management models.

Objectives

To assess how CRM-based coordination can streamline specialty pharmacy operations and improve fill rates for patients with complex diseases through timely, data-driven interventions.

Methodology

To evaluate the effectiveness of our intervention strategies and their influence on brand performance, we applied a multi-layered analytical approach centered on two key performance metrics: Time to Fill and Fill Rate.

We examined two brands—Brand A (Customer A) and Brand B (Customer B)—using a matched cohort design to ensure comparability across patient populations with similar clinical and demographic profiles. This approach helped isolate the impact of the interventions by minimizing the influence of pre-existing differences between groups.

Patients were divided into two groups:

- Intervention group: Received smart case coordination support
- Non-intervention group: Did not receive support

Each group was further segmented based on Time-to-Fill windows:

- 0–15 days
- 15–30 days
- Over 30 days

We compared Fill Rate and Time-to-Fill across branded programs within both Hub and specialty pharmacy settings. These comparisons were made in both intervention and non-intervention scenarios to highlight the relative impact of the intervention strategies.

To strengthen our findings, we included a control group, allowing us to better determine whether observed improvements could be attributed to the intervention itself rather than external or confounding variables.

Additionally, we assessed CRM utilization among SP partners, focusing on:

- Response rate to interventions
- Speed of execution from intervention deployment to action

This helped us evaluate the efficiency and responsiveness of SP partners in adopting intervention strategies and their role in driving improvements in access and performance metrics.

Results

The study analyzed 737 hub patients and 197 SP patients across three cohorts.

For SP patients using CRM-based interventions:

- The 15-30 day cohort showed 51 control fills from 92 patients (56% rate) versus 64 intervention fills from 105 patients (61% rate), yielding 5% improvement.
- The 30+ day cohort showed 5 control fills from 18 patients (28% rate) versus 40 intervention fills from 84 patients (48% rate), yielding a 20% improvement (48% - 28% = 20%).

For hub patients using enhanced interventions, the 30+ day cohort showed 377 control fills (51.15% rate) versus 473 intervention fills (64.15% rate), representing a 13% improvement. This equates to approximately 95 additional patients (737 × 0.13).

SP partners achieved an 81% response rate within 24 hours. All improvements represent absolute percentage point differences.

Figure 1: A Comparative Evaluation of Hub-Based Typical Interventions Versus Enhanced smart case coordination Interventions

Customers	Hub	SP
Customer A (Brand A)	Enhanced Intervention	Typical Intervention
Customer B (Brand B)	Enhanced Intervention	Enhanced Intervention

Evaluated customers with typical patient management support in Hub and varied SP patient management support (typical intervention without smart case coordination to enhanced intervention with smart case coordination)

Figure 2: Assessing the Impact of Hub (Enhanced Intervention) and SP (Typical Intervention) on Customer A's Engagement with Brand A

Time-to-Fill Bin	Fill Rate	Hub Patient Counts	Hub Patients – No Intervention	Hub Patients – Intervention	Impact of Hub Patient Fill Rate	SP Patients – No Interventions	SP Patients – Interventions	Impact of SP Fill Rate
0 - 15 Days	78.2%	1408			0%			0%
15 - 30 Days	73.3%	681	15%	85%	0%	82%	18%	0%
30+ Days	51.2%	737			13%			0%

Takeaway

Fill Rates

Brand A: Enhanced patient management support in the Hub was supplemented with standard interventions with SP partners (without CRM enabled smart case coordination)

- Traditional SP intervention methods did not yield any measurable positive impact on fill rates for SP patients.
- Only Hub patients with >30-day fills saw improved fill rates (13%).

Figure 3: For Customer B/Brand B, both the Hub and SP operate under Enhanced Intervention

Time-to-Fill Bin	SP Patients – No Interventions	SP Patients – Interventions	% With Intervention	Control Cohort Fill Rate	Intervention Cohort Fill Rate	Impact of SP Fill Rate
0 - 15 Days	324	101	23%	69%	67%	0%
15 - 30 Days	92	105	53%	56%	61%	5%
30+ Days	18	84	82%	28%	48%	20%

Intervention in more high-risk patients than is typical

Takeaway

Brand B: SP partners engaged through smart case coordination

- Fill rates for SP patients improved across all cohorts (5-20%) with the most significant gains realized in delayed and complex cases.

Figure 4: Partner Responsiveness. PBM-owned and independent SPs engage with the platform across programs

SP Partner	Total Number of Inquiries	Total Number of Responses	Response Rate	Median Response Time (Days)
Partner 1	523	464	89%	< 1 Day
Partner 2	2836	2370	84%	< 1 Day
Partner 3	553	441	79%	1 Day
Partner 4	4461	3426	77%	< 1 Day
Partner 5	219	168	77%	2 Days

Takeaway

Partner Responsiveness

- Smart case coordination capabilities substantially increased partner responsiveness across care teams.
- SPs responded to Claritas Rx solution-generated alerts within 24 hours in 81% of cases, enabling faster issue resolution and better care coordination.
- This demonstrates the effectiveness of Claritas Rx solutions in driving FRM engagement and enhancing patient intervention.

Discussion

The findings highlight that technology-enabled, real-time case coordination significantly improves Fill Rates for specialty pharmacy patients. Traditional, manual patient management is often too slow and reactive for the complexities of specialty pharmacy, but integrating CRM-driven, real-time collaboration enables measurable efficiency gains.

As seen in the Figures, Customer B/Brand B's use of these tools led to faster resolution of complex cases and better outcomes than Brand A's conventional strategies.

The study also shows that traditional SP interventions—such as manual reminder calls or emails—are often inadequate without real-time visibility and smart workflow automation. By enabling proactive, targeted interventions and tracking their effectiveness, CRM-driven approaches optimize support for both patients and providers. For example, partner SPs that responded within 1–2 days enabled better FRM team performance, quicker HCP engagement, and faster patient support.

Conclusion

This study demonstrates that CRM-driven smart case coordination, as employed by Brand B, significantly enhances real-time collaboration and patient outcomes by facilitating faster and more effective support across specialty pharmacies and providers. Integrating advanced digital tools streamlines patient care, reduces therapy delays, and boosts adherence, demonstrating the value of technology in creating a more efficient and patient-centered specialty pharmacy model. Continued investment in digital solutions and partnerships will be key to advancing specialty care and enhancing patient outcomes.



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