



## Barriers to Advanced Prostate Cancer Care

### Most Frequently Reported Factors That Contribute to Variations in Advanced Prostate Cancer (APC) Care

- Comorbidities - 73%
- Patient Compliance/Choice - 70%
- Health Literacy - 69%
- Patient Proximity to Practice - 67%
- Insurance Status - 65%
- Social Support - 64%

### Top Ranked Barriers Contributing to Disparities in Treatment of APC Patients

- Financial Concerns - 71%
- Lack of Access to Urologist/Specialist - 53%
- Difficulty Navigating Healthcare System - 52%
- Literacy Issues - 50%
- Lack of Patient Compliance - 47%

**N=362**  
**Total Survey**  
**Respondents Across**  
**47 States**

239 Practicing Urologists  
 68 APP  
 42 Residents/Fellows  
 13 Practice Admin/Other

For patients with an initial diagnosis of APC, more respondents perceive lack of screening as very important for those from underserved populations (55%), compared to APC patients overall (40%)

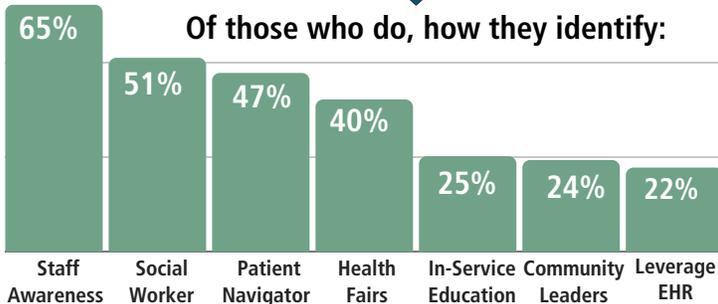
### Subpopulations Representing a Moderate/High Percentage of Respondents' Patient Base

- 75+ Years of Age - 92%
- Lower Educational Level - 78%
- From a Rural Area - 65%
- Uninsured - 59%
- Veterans - 59%
- African American - 56%

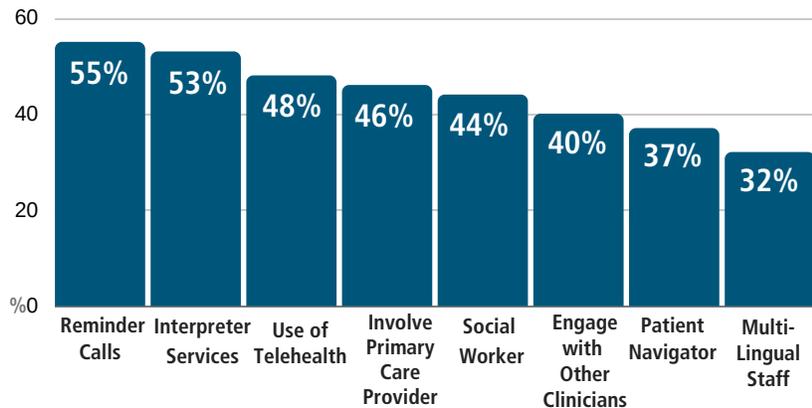
## Identifying and Managing Vulnerable/Underserved Patients

**25%** Of respondents reported their practice does **NOT identify** vulnerable or underserved patients

Of those who do, how they identify:

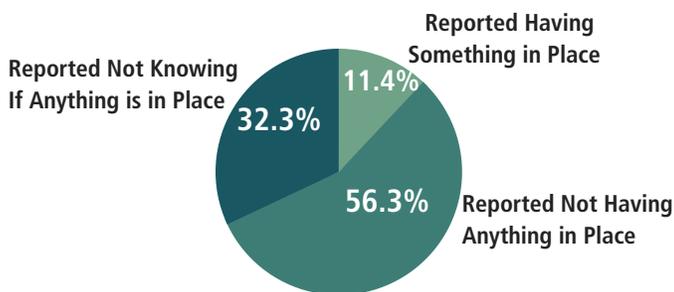


### Urology Practices Reported a Variety of Approaches to Manage Vulnerable or Underserved Populations

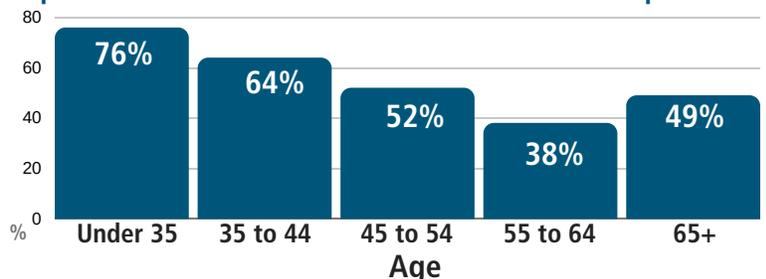


## Prevalence of EHR to Manage APC Patients

Does EHR have something in place to address the lack of meeting specific goals/milestones for APC patients?

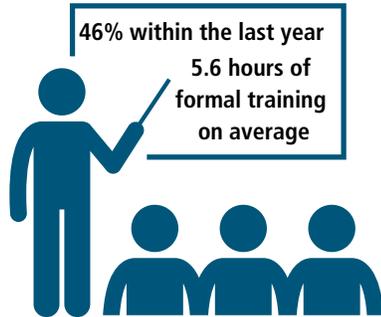
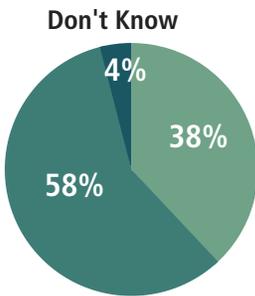


Among respondents who reported not leveraging EHRs, those who are younger indicate they want EHR trigger warnings in place to alert for unmet milestones for their APC patients



# Formal Training on Health Disparities

Less than Half of Urology Healthcare Professionals Reported Having Formal Training in Health Disparities



## Access Barriers and Use of HUB Services in APC

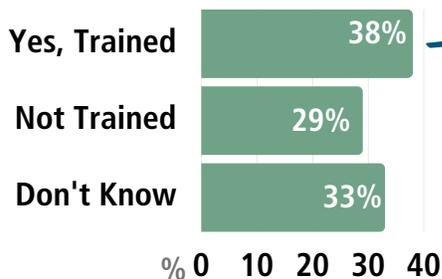
- Most frequently reported utilization management issues in accessing oral oncolytics:
  - Prior authorization - 63%
  - Financial navigation - 37%
  - Copay accumulator issues - 27%
  - Step therapy - 20%
  - Unsure of the specific utilization management issues - 26%

- Per AUA member surveys, awareness of manufacturer HUB services has increased from 44% in 2018, to 50% in 2021.

Reported Use of Manufacturer HUB Services in 2021:

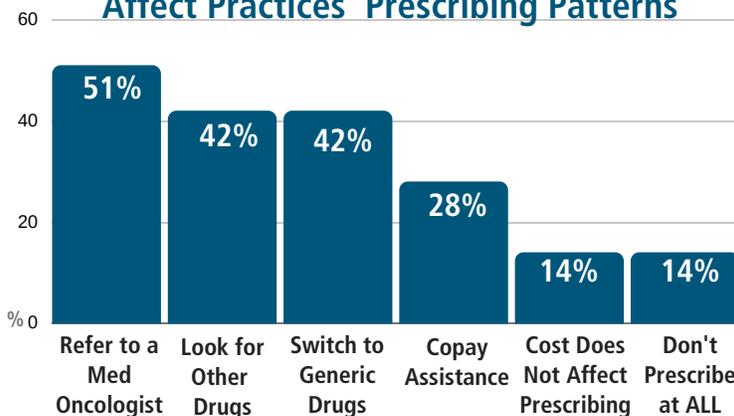
- Prior authorization and appeal assistance - 71%
- Specialty pharmacy referral - 63%
- Copay assistance referral - 61%
- Benefit investigation and copay verification - 60%
- Payment assistance program - 55%

### Respondents Perceptions of their Practices Training to Navigate Financial Hurdles Associated with Oral Oncolytics for APC



Private Practice (46%) respondents are significantly\* more likely than those in academic/hospitals (27%) to feel comfortable navigating these issues.

### How Cost of Urology Oral Oncolytics Affect Practices' Prescribing Patterns

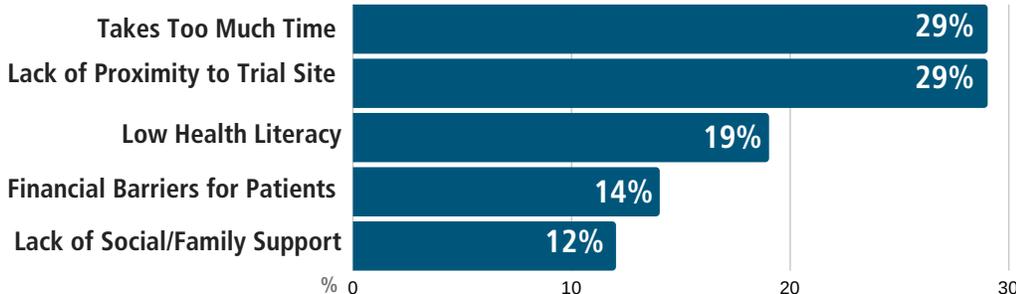


## Awareness of and Access to Clinical Trials for APC



One-third (34%) of respondents indicated they are not very aware of potential clinical trials for their APC patients

### Top 5 Factors That Dissuade Respondents From Offering Clinical Trial Opportunities to APC Patients



\*Significance testing was performed via Z-Test of proportions at the 95% Confidence Level.

This survey was conducted by Pfizer and American Urological Association (AUA), and conducted online through Survey Monkey from 7/21/21 through 10/5/21. The survey was distributed to AUA membership of 12,206 with valid emails. Results are based on responses from 362 AUA members. These results may not be representative of all urologic practices. Respondents included: 239 urologists, 68 NP/PAs, 42 Residents/Fellows, and 13 practice admin/other.

1. Data on File.

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