Rethink. Adherence.

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Objectives

- Identify patient barriers to medication adherence.
- Describe the clinical and economic impact of medication non-adherence in diabetes patients.
- Discuss key ways to utilize the entire staff to improve adherence.
- Outline a medication adherence plan for a diabetic patient.
...”$290 billion in avoidable medical spending every year when patients don’t take their medications as prescribed.”

“A reported 125,000 patients die annually of cardiovascular disease alone as a result of nonadherence to prescribed medication.”

-America’s Pharmacist, July 2010
Balkrishnan et al. found that a 10% increase in Medication Possession Ratio for an anti-diabetic medication was associated with an 8.6% reduction in total annual health care costs.

Cost Of Diabetes Non-Adherence could be as high as $11,000 Yearly Per Patient

- There are important variations in the reported costs of diabetes non-adherence, due to methodological differences among studies. Therefore, we do not currently have a complete cost for non-adherence in diabetes patients.
Who Benefits from Medication Adherence?

• **Patients**
  - Patients who take their medications are more likely to maintain control of their chronic conditions

• **Prescribers**
  - Reduces ‘medication stacking’
  - Improves results
    - ‘Pay-for-Performance’ insurance plans

• **Pharmacists**
  - Improves prescription fill rates
  - Sets the pharmacy apart from the competition
Why stop taking your medicines?

Barriers to medication adherence

Cost  Side Effects  Perception
Barriers to Adherence

- **Cost**
  - Many patients cannot afford certain medications because of financial constraints
  - Example: Medicare Part D members
- **Pharmacists play a vital role in optimizing medications to lower cost**
  - Many times, pharmacists are the only healthcare professionals aware of patients who are not taking medications due to cost concerns
Improving Adherence while Decreasing Cost

3 Critical ways to overcome the financial barrier of medication adherence:

1. Perform a drug utilization review
   1. Why are they taking the medication?
   2. Are there any less expensive alternatives that can be used?

2. Look for generic alternatives
   1. Is there another drug in the same class that is available in generic form?

3. Work alongside the prescriber
   1. Be careful in your approach!
Improving Adherence while Decreasing Cost

- Perform a Drug Utilization Review
  - Write down the indication for each drug before making a recommendation
  - Vital step in determining cost effectiveness
  - Example: A patient on Eplerenone (Inspra®)

Clinical Pearl: ‘Reconcile’ each medication before making a recommendation
Barriers to Adherence

• Consider generics
  ○ One of the greatest areas in which pharmacists excel
  ○ Example: A diabetes patient on an Angiotensin Receptor Blocker (ARB)

• Use your clinical skills as a pharmacist to determine the most cost effective medication
  ○ Set yourself apart from the competition by taking a proactive approach in lowering costs for your customers
Barriers to Adherence

• Work alongside the prescriber
  ○ Be careful in your approach!
  ○ Example: Two different ways to deliver an effective recommendation to the physician

• Ensure the prescriber that you are looking after the best interest of the patient
  ○ Develop a relationship with your local ‘target’ physicians
Barriers to Adherence: Side Effects

- Many patients who begin taking medications for chronic diseases stop taking their medications due to effects from the drug
  - Example: A new diabetes patient on Acarbose
- Overcome this barrier by...
  - Using effective first-fill counseling techniques to improve adherence
  - Giving your patients living with diabetes a phone call one week after dispensing a diabetes-related drug for the first time
Barriers to Adherence: Side Effects

- Effective first-fill counseling:
  - ‘What did the doctor tell you this medication was for?’
    - Challenge: Let them speak 80% of the time!
  - Discover their knowledge of the drug and its effects (and side effects)
    - This will maximize your time in the counseling process
  - Fill in the gaps in the patients’ knowledge of the drug

Clinical Pearl: Let your customers know that you want to partner with them to improve their health!
Barriers to Adherence: Perception

- Many patients have preconceived notions about the medication or their disease state that may cause them to stop taking their medications
  - Example: ‘My blood sugar stays below 200mg/dL. Therefore, I only take my metformin when I need it.

- Overcome this barrier by...
  - Counseling your patients on the difference between ‘everyday medications’ and ‘as needed medications’
  - Following up with your patients by identifying when they aren’t filling their ‘everyday medications’ regularly
Financial Considerations in the Diabetes Patient

Did you know...

- The top 1% of diabetic patients will spend $28,000 at the local pharmacy
  - Average diabetes patient at Barney’s Pharmacy: $6,000-12,000 per year
- The average diabetic visits the pharmacy 48% more than the average and spends 43% more
- The average diabetic fills 44 prescriptions per year
- OTC diabetes products generated 3.4 billion in sales in 2010
Medication Adherence and Prescription Drug Revenue Calculator

This calculator is designed to determine the changes in gross profit for a pharmacy after encouraging a higher medication adherence rate. Please input values in the boxes below then scroll down for analysis.

**Gross profit per prescription**

| $13.13 | In 2008, the average gross profit per prescription drug was $13.13 |

**Number of different drugs prescribed per average patient for chronic conditions.**

| 6 | In 2008, the average patient with a chronic condition consumed 3 different chronic medications. |

**Number of days it takes the average non-adherent patient to refill a 30 day medication.**

| 45 | This number must be greater than 30. For many non-adherent patients it will take 40 to 45 days to refill a 30 day medication. |

**Number of existing patients recruited each business day to join an adherence program.**

| 0.14 | A very good goal is to identify 2 patients each business day that are on maintenance medications. The purpose of an adherence program is to have the pharmacist work with these identified patients to promote perfect adherence beginning on the day the patient is recruited into the program. |
The calculator assumes that the pharmacy is open 365 days a year, and recruits patients for an adherence program on each work day.

Without an Adherence Program

Without an adherence program, each patient over the next 12 months consuming 6 different medications each represent under current adherence standards:

a potential gross profit of: $709.02 before tax

After Implementing an Adherence Program

Hypothetically, if the pharmacist was able to work with existing patients to promote perfect adherence so that recruited patients refilled all their medications on a monthly basis, then each patient measured over a 12 month time frame represents:

$1,024.14 in gross profit to the pharmacy before tax

Thus, each patient enrolled into an adherence program over a 12 months represents the potential for:

$315.12 in additional gross profit before tax
Business Case

A brief business case based on the input values you provided above.

Assume that there are 51.1 patients each on an average of 6 different chronic medications. Without an adherence program, these patients over the next 12 months will bring in:

$36,230.92 in gross profit

If the pharmacy has an adherence program and is able to recruit 0.14 of these patient(s) each business day and once recruited the patients practice maximum adherence so that each patient refills all their chronic medications every month, then starting today, over the next 12 months these adherent patients will bring in:

$44,392.53 in gross profit

The increase in gross profit would be:

$8,161.61 greater than what would occur under current adherence practices

The long term increase in gross profit that would result in promoting maximum adherence for 0.14 patients each day would be:

$32,646.43 over 2 years
$204,040.20 over 5 years
Effective Communication Strategies in the Diabetes Patient

• Speak their language!
  ○ Convey to the patient that your desire is to partner with them to improve their health
    ▶ This is the foundation for all communication you will have

• Keep it Simple
  ○ When you perform your first-fill counseling, refrain from using words such as ‘hyperglycemia’
  ○ Confused patients may be more likely to stop taking their medication
  ○ Be sure they know what each medication is for
  ○ Consider using a Medication Review Form
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Simplify My Meds

- Complete system designed to improve adherence
  - Simple to implement
  - Designed to utilize the entire pharmacy staff
  - May utilize different packaging systems to assist
  - To enroll, contact NCPA
Effective Communication Strategies in the Chronic Disease Patient

- **Use your influence as a pharmacist**
  - Ask your patients how their blood sugar has been in the past month
  - Encourage them and provide a healthy accountability towards taking their medications properly
    - Ask them about their personal health goals (i.e. A1c <7%) and remind them of the importance of taking their medications

- **Simply Ask**
  - Phrase your adherence questions to get the most accurate response
    - Are you taking your medications as prescribed?
    - How many days during the week do you miss or skip a dose of your diabetes medicines?
Effective Communication Strategies in the Chronic Disease Patient

- Simply Ask (cont’d)
  - When a patient presents for a refill of their medications, simply ask, ‘How have your blood sugars been this month?’
  - Inquire about any side effects they may be experiencing

Clinical Pearl: Your customers will become more loyal to your pharmacy as you reveal your desire to improve their health.
Utilizing the Entire Pharmacy Staff

• Utilize your *entire* staff
  ○ Everyone should have a synergistic role

• Technicians
  ○ Identify adherence issues if completing data entry
  ○ Let technicians be your ‘chief encouragers’

• Cashiers
  ○ Key point: They usually connect with your patients more than any other member of your team
  ○ Educate them on your medication sync program
  ○ Let your cashiers become your primary marketers
Additional Tools to Improve Adherence

- **Medication Reminders**
  - Alarm ‘toppers’ for prescription bottles
  - Auto-Refill Programs through your pharmacy software system
  - Call Reminders
  - Text Messaging Reminders
  - *Blister Packaging* or other packaging systems

- While medication reminders may be effective initially, they do not replace the vital interaction between pharmacists and patients
Conclusions

- By improving medication adherence, you can:
  - Improve outcomes
  - Lower overall healthcare costs
  - Improve the bottom line of your pharmacy
- Utilize the tools necessary to improve adherence in the diabetes patient
  - Remember, your influence is the greatest factor in improving adherence
  - Utilize your entire staff to improve adherence