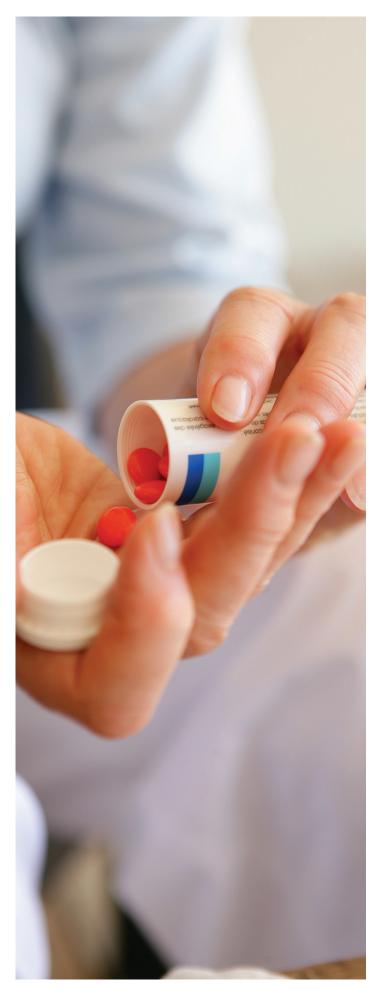


EBOOK

Overcoming Barriers: The Faces of Medication Nonadherence

Drivers, Success Stories and Best Practices



INTRODUCTION

Medication nonadherence, when combined with social determinants (such as socioeconomic conditions, language, literacy, transportation and culture), is one of the biggest issues in healthcare today.

In the U.S., the estimated direct and indirect costs of medication nonadherence have reached nearly \$340 billion. The annual adjusted disease-specific economic cost of nonadherence per person ranges from \$949 to \$44,190.

The rate of nonadherence is only expected to increase as the country's population ages and the burden of chronic disease rises. The latest data shows that almost 70% of patients do not take their medications as prescribed.³ More than a quarter of medication prescriptions are never filled and approximately 50% of medications designed to treat chronic diseases are not taken as needed.⁴

The effectiveness of prescription drug treatment is greatly dependent on patient adherence to a therapeutic regimen. Failure to maintain an appropriate medication regime (i.e., discontinuing therapy or taking less than the prescribed dose) can result in:

- Reduced treatment benefits
- Preventable health complications and disease progression
- Avoidable emergent care, hospitalizations and nursing home admissions
- Employee absenteeism and productivity loss
- Premature mortality
- Greater healthcare costs

TODAY'S DRIVERS OF NONADHERENCE

The cost of prescription drugs is one of the top reasons for patient noncompliance with medication regimes. Cost-related nonadherence is an especially common and critical problem among vulnerable populations in outpatient settings, such as elderly patients, disabled patients and patients taking multiple medications.

Across the board, however, Americans are feeling the pinch of rising prescription drug costs. Total annual healthcare costs for a family of four covered under an employer-sponsored health plan reached \$28,166 last year with \$4,888 going toward prescription medications. And more than one-sixth of the family of four's healthcare expenses go to prescription drugs.⁵

In addition to financial constraints, a myriad of factors (including many social determinants) contribute to medication nonadherence including:

- Forgetfulness
- Adverse side effects
- Fear of negative reactions or contraindications
- Belief that a medication will have a minimal effect or is unnecessary
- Belief that a medication is not working
- Complexity of treatment regimen
- Poor health and/or multiple comorbidities
- Cognitive impairment
- Mental illness
- Lack of care continuity
- Subpar provider communication

- Low health literacy
- Limited English-language proficiency
- Cultural beliefs
- Unstable living conditions
- Lack of patient involvement in the treatment decision-making process
- Limited drug coverage
- Difficulties accessing a pharmacy (e.g., lack of transportation, time)
- Inability to read prescription labels
- Difficulties opening pill bottles
- Vision and/or hearing problems
- Challenges swallowing pills

Reducing nonadherence requires collaboration among all stakeholders, including providers, payers, patients and policymakers. It also necessitates a high level of proactive patient outreach and personalized support to drive positive, lasting behavior change. Ultimately, these efforts can improve clinical and financial outcomes.



In the U.S., medication nonadherence is believed to account for up to 50% of treatment failures, an estimated 125,000 deaths and approximately one-quarter of hospitalizations annually.⁶





The faces of nonadherence

Based on decades of in-depth clinical knowledge and consumer influence expertise, Carenet Health has successfully helped healthcare organizations and their members and patients overcome the multiple impediments that prevent compliance with prescribed medications. With nearly 30 years of working closely with 100 healthcare clients, we currently interact with more than 25,000 healthcare consumers daily and touch over 50 million lives annually on behalf of our clients.

We know firsthand that people from all walks of life face barriers big and small when it comes to following their prescribed treatment. These barriers, which often are social determinants of health, can magnify the consequences of medication nonadherence.

For example, individuals who have limited transportation options may not be able to pick up their medications easily, thus skipping dosages. In other cases, language and literacy can impact patients' understanding of why it's important to take their medications as prescribed.

As such, a combination of various strategies is often necessary to ensure adherence.



The following member stories illustrate some of the most common adherence barriers our highly skilled engagement specialists encounter every day. They also demonstrate the power of proven engagement and intervention strategies to break through them.

To protect member privacy, the stories presented here are an amalgamation of member experiences, and personal details have been changed.



Jim: Tuition over prescriptions

Feeling the financial strain from paying his daughter's college tuition, Jim, a 49-year-old nonprofit program manager, started sporadically taking his high blood pressure medications to save money. When money was really tight, he would delay refilling his prescriptions for weeks until he could afford them.

Jim didn't experience any unpleasant or obvious symptoms, so he didn't think it was a big deal to skip his pills every now and then. Although his heart was in the right place, he was unknowingly jeopardizing his health and his family's welfare.

Jim's story is not an uncommon one. Maintenance medications, such as drugs to manage diabetes, high cholesterol and hypertension, are prescribed to millions of Americans each year. To ensure efficacy, these drugs need to be taken consistently.

Carenet Health overcame Jim's cost-related nonadherence by first educating him on the potential risks of not taking his medications regularly, such as a heart attack, stroke or kidney disease.

We then helped him cut costs by switching his brand-name drugs to less-expensive generic ones. Priced 25 to 80% lower than their brand-name equivalents, generic drugs saved the U.S. healthcare system \$265 billion in 2017. Savings for Medicare amounted to \$82.7 billion (an average \$1,952 for every Medicare enrollee) and savings for Medicaid was \$40.6 billion (an average of \$568 for every Medicaid enrollee).⁷



Mary: Splitting pills to save time

Juggling a 50-hour workweek and serving as a single parent of two grade-school sons, Mary rarely had time to stop by the pharmacy to pick up her thyroid hormone replacement medication.

Rather than go completely without her daily dose, she split her pills in two to extend her supply. As a result, she suffered from low energy, brain fog, hair loss and joint pain, which impacted her work performance and made her short-tempered at home.

You can imagine Mary's relief when Carenet Health contacted her about using a mail-order pharmacy. It didn't take much to convince her of the critical importance of taking her medication as prescribed or the convenience and cost-saving benefits of receiving her prescription in the mail.

By seamlessly enrolling Mary in her health plan's free home-delivery program, she received a lower co-payment, automatic refills and a 90-day supply instead of a 30-day one. With just one call, we saved Mary significant time, money and stress. More importantly, we helped improve her overall health and well-being.

In addition to being more cost-effective and efficient, numerous studies have found that medication adherence improves when medications are dispensed via mail order instead of retail pharmacy.



Korina: Scared by side effects

Diagnosed with type 2 diabetes, Korina, a 33-year-old retail store clerk and Medicaid recipient, stopped taking her medication after a few months because it upset her stomach and made her tired. She also worried because she heard the drugs could cause pancreatic cancer. She just couldn't see the purpose in taking it.

Her actions were not surprising; one study found that 30% of patients were not adherent. Furthermore, patients who were new to diabetes therapy were significantly less likely to be adherent to their prescriptions.⁸

Korina did not have an established relationship with a primary care physician. Therefore, she lacked continuity of care and a reliable person with whom to discuss her concerns. Without consistent monitoring and positive reinforcement from a healthcare professional, Korina also was putting herself at risk by not practicing healthy lifestyle behaviors that could help prevent her disease from progressing.

To overcome Korina's nonadherence barriers, it was important to first listen to her concerns, fully comprehend her belief system and give her the emotional support she needed.

We then helped her gain a better understanding of her illness and the possible implications—such as heart disease, vision loss and kidney failure—that could occur by not practicing preventive care measures and not taking her medication. We also explained that she may need a dosage change

or different medication to alleviate adverse side effects. We stressed the importance of establishing an ongoing relationship with a physician to ensure appropriate disease management and optimal health.

By cultivating a better understanding of the seriousness of her condition and instilling a belief that there were benefits to the prescribed treatment, Korina agreed to start taking her medication and to talk with a doctor about other options.

To help coordinate her care, we found a conveniently located in-network provider, scheduled an appointment, and enrolled Korina into a disease management program, all on the same call. To ensure compliance, we contacted Korina 24 hours after her scheduled appointment. Upon learning she was unable to make it due to car troubles, we assisted with rescheduling her appointment as well as coordinated transportation.

Studies have consistently shown that patients' understanding of their conditions and treatment is positively related to medication adherence. In fact, patients who understand a medication's purpose are twice as likely to fill a prescription than those who don't understand the purpose. However, more than 60% of patients leave their doctor's office misunderstanding their doctor's medication directions. 10

Carenet Health understands the integral role physicians and patient education play in medication adherence. We collaborate closely with individuals and their providers to establish an informed, ongoing relationship and effective two-way communication.



George:

Forgetfulness drives hospitalizations

Since his wife died a year ago, George, an 82-year-old grandfather and Medicare beneficiary, had a hard time remembering to take and refill his five different medications for his hypertension, heart disease and arthritis. He was also confused about what time he should take each pill and which ones needed to be taken with food. As a result, he either overdosed or underdosed, landing him in the hospital multiple times.

Various studies have demonstrated the substantial cost-savings of medication adherence among Medicare recipients. One study revealed that the use of prescription drugs significantly lowered Medicare spending for inpatient hospitalizations; for each additional prescription filled, hospital costs decreased. Another study found that diabetic patients who adhered to their prescribed drug treatment had lower cumulative healthcare costs over three years, with Medicare savings exceeding the cost of the drugs.

To help George stay on track with his medications, we enrolled him in a mail-order pharmacy with automated refill reminders. We also shared adherence strategies with him and his adult son, such as creating a daily chart, using a pill organizer or automatic pill dispenser, wearing an alarm, signing up for text/email reminders and taking the pills in conjunction with part of his daily routine, such as before breakfast.

Lastly, we sent a request to George's health plan to mail him educational materials on each of his conditions and reminded George that he could call our 24/7 Virtual Clinic anytime he had a question or concern.



More than 60% of patients leave their doctor's office misunderstanding their medication directions.¹⁰



CASE STUDY:

How Retail-to-Mail Pharmacy Outreach Met 106% of Client's Member Enrollment Goal

CLIENT CHALLENGE

To reduce medication adherence obstacles, lower costs and improve clinical outcomes among its Medicare population, a prescription drug plan collaborated with Carenet Health. The goal: Educate its members on medication adherence importance and the benefits of 90-day prescription fulfillment via mail-order pharmacy in order to ultimately enroll them in mail service.

Enrolling members into the plan's mail-pharmacy service would save them time and money while improving adherence by providing convenient at-home delivery of a less-expensive 90-day supply.

The health plan targeted a key segment of its Medicare population: members with at least one prescription who would experience significant cost-savings over a 90-day period if they switched from obtaining their monthly prescription via their local pharmacy to receiving a 90-day supply via mail.

SUCCESS STRATEGY

Leveraging its proprietary Intelligent Engagement™ model, Carenet Health implemented a personalized engagement approach—powered by in-depth knowledge of the Medicare market, consumer influence expertise, best-practice channel contract strategies, a highly skilled and trained team, and sophisticated healthcare customer relationship management (CRM) technology.

Each interaction by Carenet Health's engagement specialists included several linked measurable objectives:

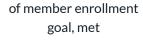
- Outlining the benefits of medication adherence
- Sharing effective strategies for remaining adherent
- Educating patients on the cost-savings and convenience factors of receiving a 90-day supply via mail
- Providing a toll-free phone number for enrollment in the health plan's mail pharmacy
- Capturing current primary care physician and other information to update the health plan's records

Due to the CMS guidelines, Carenet Health's engagement specialists were not allowed to convert members to mail delivery on the initial education call. Therefore, it was imperative that members fully understood the benefits and ease of switching, so they were compelled to take action and independently call Carenet Health's mail-order enrollment team.

To also meet CMS requirements and ensure mail-order fulfillment, the team executed a multi-step process daily to obtain prescribing physician authorization for each member who enrolled in the service. When needed, numerous attempts were made to secure physician approval and authorization obstacles were resolved whenever possible.

RESULTS







outreach interaction rate



Thousands of members were converted to mailorder service over a three-month period



Pleased with performance, the plan expanded the program to reach more members the following year



Best practices summary for comprehensive medication adherence engagement

From the faces of non-compliance and the success stories related to those individuals, we can ascertain a list of medication adherence engagement best practices.

- Engage with people regarding their goals, needs, preferences and concerns
- Counsel on the purpose, administration and duration of therapy
- Identify adherence barriers and social determinants of health that may be at play, and discuss effective strategies for overcoming them
- Offer cost-saving solutions, like generic drugs and mailorder pharmacy
- Unite members with providers and coordinate their care
- Equip people with the information and confidence they need for shared-decision making with their providers
- Educate on other available resources, such as telehealth clinics and healthcare advocacy and navigation services
- Empower people to take a more active role in their health







About Carenet Health

- Decrease unnecessary resource utilization

CONTACT US FOR MORE INFORMATION

Call us at 800.809.7000 or email marketing@carenethealthcare.com, or visit us at carenethealthcare.com.

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