

Quality Provider Program: Primary Care

Medication Adherence: Frequently Asked Questions

Q: Why does this measure matter?

A: Patients are often reluctant to tell their healthcare provider that they do not take their medications. Unless a patient's medication-taking behavior is understood, therapy may needlessly escalate costs to the patient and healthcare system, and cause potential harm to the patient. Medication nonadherence can lead to unnecessary hospitalization and emergency room visits.

Medication adherence in chronic conditions impacts measures used to establish the Star ratings for Medicare Advantage (MA) plans like Select Health Medicare. Lower medical expense costs and higher Star ratings affect an insurance plan's ability to offer richer benefits to members and potentially lower premiums.

Addressing medication nonadherence is critical for patient health and safety. Research indicates that those with chronic conditions consistently suffer poor health outcomes and higher rates of hospitalization due to low medication adherence.¹

Q: What is Select Health doing to help?

A: Outreach measures to Select Health members for medication adherence include:

- We encourage patients to take advantage of pharmacy refill reminders from the Select Health patient portal, *MyHealth*.
- MA members get reminders that they can receive 100-day supplies from retail pharmacies or Intermountain's home delivery pharmacy (which will fill a 100-day supply for the same copay as a 90-day supply, giving the member 10 free days of medication).
- The Select Health Pharmacy team proactively calls MA members who are between 50–79% compliant to see what their barriers are to filling prescribed medications. The team sends mid-year letters to members who are at 85% or less compliance.

Q: What are national strategies for improving medication adherence?

A: National strategies include:

- Following these eight steps to improve medication adherence:
 1. Consider medication nonadherence first as the reason a patient's condition is not under control.
 2. Develop a process for routinely asking about medication adherence.
 3. Create a blame-free environment to discuss medications with the patient.

COMMON BARRIERS TO ADHERENCE

Discuss and make recommendations regarding:

- Conflicting information received from a second provider
- Health literacy
- Conflicting information received through self-research
- Unrealistic expectations
- Financial burden and transportation
- Lack of motivation
- Remembering to take medications
- Not using pharmacy benefit provided or not filling using the insurance benefit

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Medication Adherence, Continued

4. Identify why the patient is not taking their medicine.
 5. Respond positively and thank the patient for sharing their behavior.
 6. Tailor the adherence solution to the individual patient.
 7. Involve the patient in developing their treatment plan.
 8. Set patients up for success.
- Using a patient-centered approach to care that stresses:
 - Multifactorial patient education (e.g., face-to-face education, help with online resource navigation, etc.).
 - Effective communication using health literacy principles and teach-back strategies.
 - Active patient involvement in medical decision making.
 - Cultural sensitivity (training module available). For example, if a patient with diabetes has a preference for herbal remedies, explaining that metformin is derived from the French lilac might improve their acceptance of the therapy.
 - Simplifying the patient's drug regimen by reducing the number of pills a patient is required to take each day (e.g., once-daily therapy rather than twice daily). In a meta-analysis comparing adherence rates for single daily dosing versus additional doses, researchers found that there was a 10% decrease in adherence that occurred with each added daily dose.³
 - Writing prescriptions exactly how you intend patients to take them. Pill-splitting may result in under-reporting for adherence measures.
 - Educating patients about the advantages of using their pharmacy benefits.

References:

- 1 Network for Excellence in Health Innovation. *Thinking Outside the Pillbox: A System-wide Approach to Improving Patient Medication Adherence for Chronic Disease*. NEHI-US.org. <https://www.nehi-us.org/publications/17-thinking-outside-the-pillbox-a-system-wide-approach-to-improving-patient-medication-adherence-for-chronic-disease/view>. Accessed December 28, 2022.
- 2 Brown MT, Bussell JK. Medication adherence: WHO cares? *Mayo Clin Proc*. 2011;86(4):304-314.
- 3 Claxton AJ, Cramer J, Pierce C. A systematic review of the associations between dose regimens and medication compliance. *Clin Ther*. 2001;23(8):1296-1310.

Q: What tips/strategies do high-performing clinics recommend?

A: To remind patients to take medications, high-performing clinics recommend:

- Using a weekly pillbox
- Asking the pharmacy to sync prescriptions
- Getting medications packaged at the pharmacy
- Using a calendar and writing down the day, time, and dose of each medication
- Matching medication schedules with daily routines
- Using reminder notes and alarms
- Asking if the pharmacy offers refill reminders

Q: If a patient is nonadherent, are they nonadherent to all their medications or just one?

A: It depends. Patients may be adherent to one medicine and nonadherent to others, depending on their beliefs and understanding about each medication.