

### Medication Care Plans

**The Challenge: Plan sponsors risk not getting full value from drug benefits because plan members with chronic conditions can find it difficult to maintain treatments, which are often a combination of daily medications and new lifestyle behaviours. This increases the risk of poor health, presenteeism, absenteeism and additional benefits costs (including disability).**

- 58% of Canadian adults have at least one chronic condition or disease<sup>1</sup> and 11% between the ages of 46 and 64 take five or more prescription medications.<sup>2</sup>
- Rates of nonadherence for some of the most-prescribed medications are 55% for anti-depressants, 37% for anti-hypertensives and 45% for diabetes medications.<sup>3</sup> Poor adherence can lead to a worsening of the condition, which can in turn lead to additional medications—and more costs to the drug plan.
- A cost analysis of all claims, including disability leaves, for a plan member with poorly managed diabetes totaled more than \$550,000 over 20 years, versus \$25,000 to \$30,000 for a member with reasonably well-managed diabetes.<sup>4</sup>

#### What it is

Pharmacists develop care plans that revolve around plan members' personal issues and goals in order to successfully treat chronic conditions.

#### How it works

Plan members meet regularly with their pharmacists to set and achieve the goals of a care plan. Members use the plan for self care and to share with other healthcare professionals.

#### Benefits

Increased likelihood of best health outcomes for plan members with chronic conditions, which reduces presenteeism and absenteeism and protects the value of drug benefits by preventing drug wastage, inappropriate use and additional spending on drug and disability claims.

**The Opportunity: Plan members with chronic conditions can better manage their health and remain productive by participating in medication care plans with community pharmacists, who work with members to resolve challenges and achieve goals related to treatment, including lifestyle changes.**

Pharmacists typically recommend medication care plans based on annual medication reviews or prescription counseling sessions that uncover drug-related problems or other challenges (such as difficulties with lifestyle changes) that cannot immediately be resolved during a single consultation. For example, a member may have unique challenges with adherence due to fear of stigma in the workplace. An analysis of more than 1,200 medication reviews found that 44% of the initial reviews uncovered drug-related problems, 18% uncovered lifestyle issues and 10% revealed challenges to do with lab work or self-monitoring. Fifteen percent of these issues required follow-up consultations.<sup>4</sup>

The care plan consists of scheduled consultations over a period of time. Such a long-term approach is critical to reinforce behaviour change and ensure the continued effectiveness of therapy, which in turn can prevent complications and/or related illnesses down the road. According to a survey of plan members, 79% would likely participate in medication or disease management reviews with a healthcare professional.<sup>5</sup> In one Canadian pilot project with plan members diagnosed with hypertension, the percentage with controlled blood pressure increased from 26% to 82% after six months of regularly scheduled sessions with community pharmacists. The frequency of exercise increased by 97%.<sup>6</sup> Another Canadian pilot project found that pharmacists who met an average of three times over a 12-month period with plan

**Covered under the healthcare spending account or as a health benefit, pharmacists' healthcare services help plan members stay healthy, productive, and in the workplace**

## Getting Better Value from Drug Plans: Pharmacists' Healthcare Services

members taking antidepressants helped increase adherence rates to 72% from a baseline of 50%; almost half the members (47%) reported feeling more productive.<sup>4</sup>

### How the Service Works

- Pharmacists recommend medication care plans to plan members with chronic conditions after identifying drug-related or other issues (such as personal concerns) that inhibit best possible treatment outcomes. These issues cannot be resolved in a single consultation. A medication care plan often builds upon the initial findings of a **medication review**.
- Working closely with members to understand their unique needs, pharmacists develop a medication care plan to provide ongoing education, resolve drug-related and other issues (such as lifestyle changes), and to help patients set and help achieve healthcare goals.
- Depending on the identified issues, pharmacists and plan members typically meet at least several times over an extended period, which is typically between six and 12 months.
- Pharmacists work with prescribers to recommend changes to medications as required, and/or to recommend lab tests to monitor health outcomes. In provinces where scope of practice permits, pharmacists may adapt prescriptions or order and interpret lab tests themselves.
- Pharmacists also reinforce and encourage lifestyle changes as essential components of treatment, and may refer plan members to other health professionals (e.g., dietitians).
- Plan members receive a copy of the care plan for their personal records and for ongoing self care between appointments, and to share with other healthcare professionals.

### Medication Care Plan



### Types of Services Covered under Medication Care Plans (see Glossary for definitions)

- Medication care plans

### Expected Benefits for Plan Sponsors

- Improved productivity, reduced absenteeism and presenteeism, and better health outcomes for plan members with chronic conditions.
- Reduced drug wastage and better value for drug benefits for higher-cost claimants (i.e., those taking multiple medications and/or medications for chronic conditions).
- Averted spending on additional benefits, including disability, associated with complications or related illnesses that arise from poorly managed chronic conditions.
- Averted spending on drugs associated with undisclosed nonadherence; i.e., plan members do not disclose their nonadherence to physicians, who increase dosages or prescribe more medications because they believe the original prescription was not effective.

*"I used to skip my blood pressure pills. Now I don't."*

*—Comment from plan member after receiving pharmacists' services to improve adherence<sup>4</sup>*

**Covered under the healthcare spending account or as a health benefit, pharmacists' healthcare services help plan members stay healthy, productive, and in the workplace**

## Getting Better Value from Drug Plans: Pharmacists' Healthcare Services

### References

1. Canadian Foundation for Healthcare Improvement. The health care in Canada survey. Conducted by POLLARA, December 2013–January 2014.
2. Rotermann M, Sanmartin C, Hennessy D, Arthur M. Prescription medication use by Canadians aged 6 to 79. *Health Reports* 2014 June; 25(6):3–9. Statistics Canada, Catalogue no. 82-003-X.
3. 2014 GSC Drug Study. An analysis of Green Shield Canada claims data, July 2013-June 2014.
4. *Medication Therapy Management: How community pharmacists can maximize plan sponsors' investments in drug benefits*. MHCSI Managed Health Care Services Inc. December 2014.
5. *2014 Sanofi Canada Healthcare Survey: Healthy Discussions for Productive Employees*. Sanofi Canada. June 2014. Accessible at [www.sanofi.ca](http://www.sanofi.ca)
6. *Impact of Community Pharmacist Interventions in Hypertension Management in Patient Outcomes: A Randomized Controlled Trial*. Ontario Pharmacists Association and Green Shield Canada. June 2014.

**Covered under the healthcare spending account or as a health benefit, pharmacists' healthcare services help plan members stay healthy, productive, and in the workplace**