

Improving Outcomes and Patient Experience Through Medication Adherence

INTRODUCTION

Medication adherence plays a vital role in ensuring that patients achieve desired health outcomes. But despite its importance in keeping patients well, adherence remains a challenge in South Texas. External factors, which are often out of the care team's control, add an additional level of complexity to keeping patients adherent.

As part of the effort to move away from a service-based model of care to a more proactive outcomes-based model, Valley Organized Physicians (VOP) needed a solution that would address medication adherence barriers. A key part of this solution was to increase engagement with patients after they leave their physician's office.

CHALLENGE

Patients with chronic conditions such as diabetes, hypertension, and hyperlipidemia are at a higher risk for complications. Unfortunately, ensuring that patients are filling and taking their medications has been an ongoing obstacle. Barriers to medication adherence include:

- Medication affordability
- Lack of transportation
- Lack of treatment understanding
- Fear of side effects

To address these needs and concerns, VOP worked with CareAllies, a company focused on helping provider groups transition to value-based care, to develop a Medication Adherence Tracker (MAT). The tracker uses available data to identify high-risk, nonadherent patients to target for interventions.

Access to data and patient identification are essential for success—but they only resolve a portion of the issue.



William Torkildsen, MD

Medication adherence is highly dependent on provider-patient communication. With this in mind, this initiative was also aimed at changing VOP's culture to promote enhanced communication, collaboration, and engagement.

Patients place great trust in their physician; therefore, physician-led initiatives have proven to have a significant impact on changing patient behavior. By placing the reins in physicians' hands and altering processes to ensure two-way communication, the MAT initiative allows VOP to better understand patients' needs, explain the importance of medications, and problem-solve together.

INTERVENTION

VOP worked with CareAllies to design a detailed report that highlights lack of "fill" activity for patients prescribed a set of targeted, quality metric-focused medications. These include drugs for diabetes, hypertension, and cholesterol.

The report is then disseminated through CareAllies' embedded care coordinators (ECCs), who support individual practices with quality initiatives. ECCs play a vital role by managing the process and guiding practices to ensure success.

Since patients are more likely to respond to their physician or their physician's staff, a representative from the practice connects with patients to understand their reason for not filling their medication. Interventions include activities such as:

- Providing medication education
- Scheduling an office visit
- Calling the pharmacy to refill the medication
- Switching to a 90-day supply
- Rescheduling multiple refills for the same day
- Setting up home delivery

"I think it's appropriate that we should be expected to take both a leadership and an ownership position in a patient's medication adherence. As we help improve adherence, outcomes also improve."

—William Torkildsen, MD,
Chairman,
Valley Organized Physicians

In addition, providers now place more focus on medication discussions because of the impact these conversations can have on adherence. By identifying concerns that could affect adherence during all office visits, physicians can proactively address medication barriers before a patient appears on the MAT report.

After outcomes from medication interventions are documented, ECCs relay these outcomes to the pharmacy team. Claims analysis can then confirm whether efforts were successful—in other words, whether the patient filled the prescription. An updated report is then created. This continuous cycle utilizes existing data in new and innovative ways and allows for ongoing improvements to the process.

“Patients often look to their doctor to guide them in making care decisions,” says Esteban Gallardo, PharmD, Clinical Program Manager, CareAllies. “As a pharmacist, I help develop the data to identify patients who may need medication guidance. By sharing this information with VOP physicians, they can connect with these patients to understand and address any barriers they may be facing.”

RESULTS

Through the MAT initiative, patients are educated on the importance of filling their medications, and more convenient methods to fill prescriptions are implemented when available. These efforts and adjustments have been welcomed by VOP patients, many of whom were likely unaware that their problems could be solved.

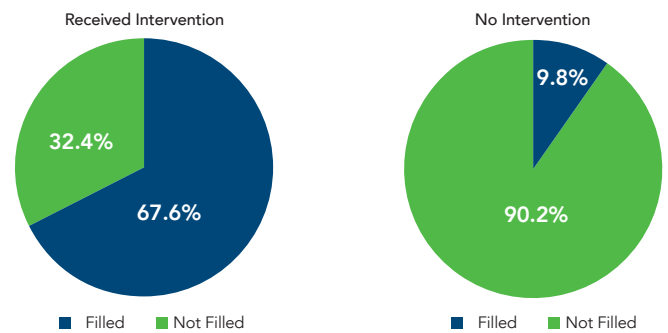
The initiative not only improved patient satisfaction, but a data analysis of 3,539 patients after year one showed that patients who received physician intervention were 20 times more likely to have a prescription filled than those who did not. Patients were also three times more likely to be adherent (per the Centers for Medicare & Medicaid Services standards¹) by the end of the year.

The MAT initiative has continued to prove successful in closing medication adherence gaps and helping patients adhere to their care plans. This has led to an improvement in VOP’s Medicare Advantage and

Part D Star Ratings year over year since these process changes were implemented.

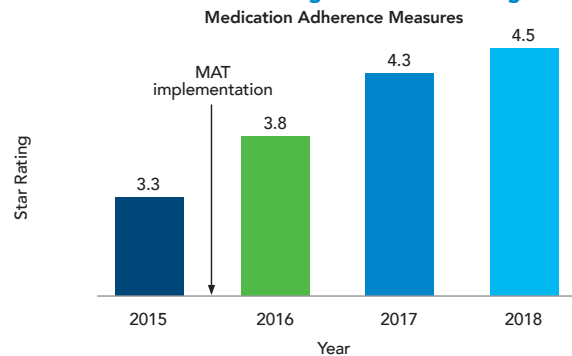
VOP and CareAllies continue to work together to evaluate data and processes to find new ways to enhance the MAT. The more that providers, payers, pharmacists, and other stakeholders can collaborate with each other—and with patients—the bigger the impact on outcomes and satisfaction for all involved.

Percentage of MAT-identified patients who filled medications in year 1*



*Based on 3,539 patients identified for Medication Adherence Tracker initiative in 2016.

Medicare Advantage Part D Star Ratings*



*VOP Cigna-HealthSpring MA Part D Star Ratings for medication adherence measures: Medication Adherence for Diabetes Medications, Medication Adherence for Hypertension (RAS Antagonists), Medication Adherence for Cholesterol (Statins) and Statin Use in Persons with Diabetes (SUPD). SUPD measure added in 2017.

REFERENCES

1. <https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/Downloads/2019-Technical-Notes.pdf>

WHO WE ARE

Valley Organized Physicians (VOP) is an independent physician association located in the Rio Grande Valley region of South Texas. Established in 2011, VOP is composed of a network of primary care physicians and specialists dedicated to driving better health. VOP’s unique model unites patients, providers, employers, and payers to advance care delivery—improving outcomes and offering patients high-quality, affordable care.