



The Pharmacist's New Role in Medication Adherence

Executive Summary

Our Clinical Pharmacist team sought to combat the lack of adherence that high risk patient populations show when taking expensive, life-saving specialty medications. Through advance adherence predictors, personalized clinical pharmacist interventions, and a patient-centered integrated care model, the team was able to significantly improve medication adherence by 52%.

Challenges

Medication non-adherence results in an estimated 125,000 deaths and may be the cause of 10% of all hospitalizations in the United States each year. The costs associated with deviations from the medication plan range from \$100 - \$289 billion annually. Twenty to thirty percent of medication prescriptions are never filled and approximately 50% of medications for chronic disease are not taken as prescribed.

"We are excited about the results of this initiative and we hope that we can continue to practice this integrated model to make a difference in the lives of all our chronically ill patients." – Kate Smullen, PharmD, CSP

These statistics, in combination with the trends in specialty medication spending below, reveal an urgent need to focus on integrated medication adherence and pharmacy care:

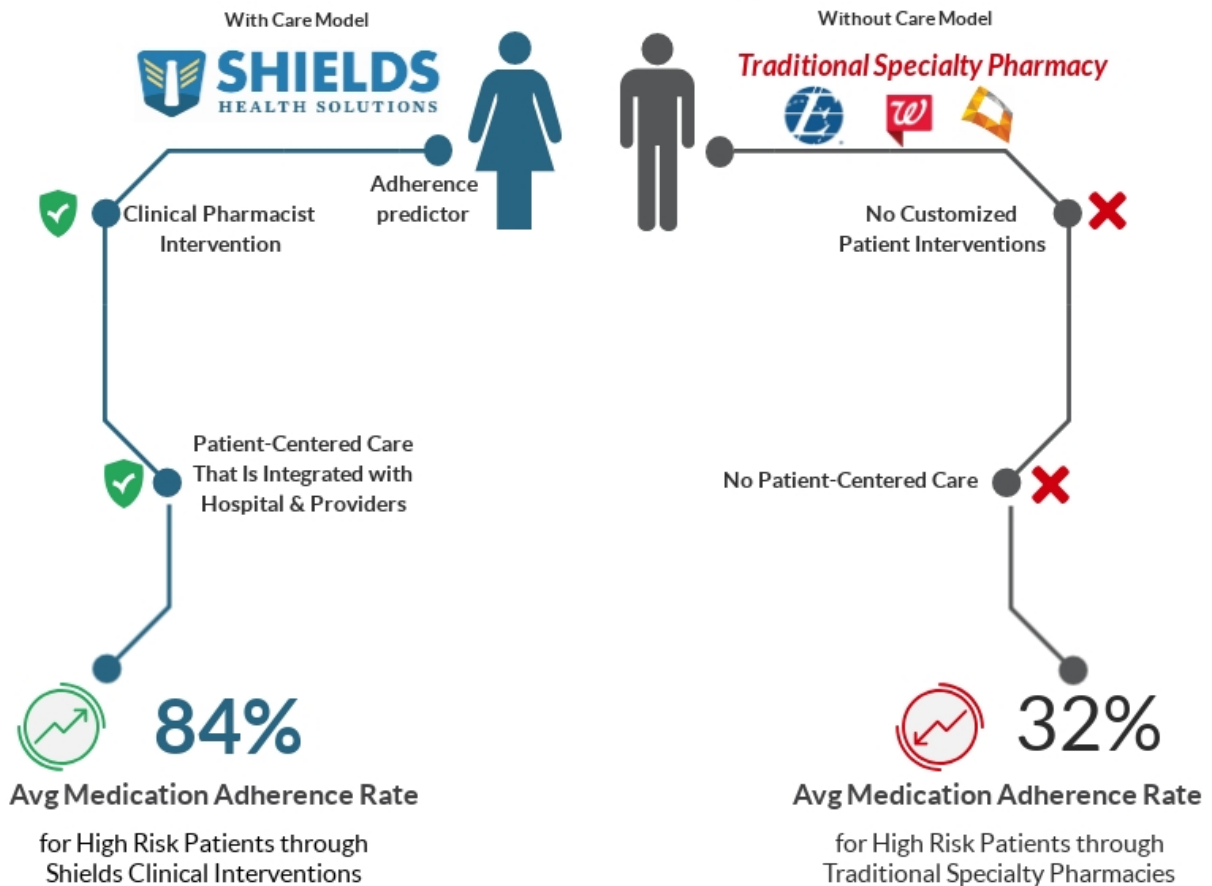
- 73% of the overall growth in medication spending from 2012-2017 was on specialty medicines
- \$140k annually – the current average cost of an oncolytic agent
- \$65k annually – the current average cost of an MS agent

Our Method

Shields Health Solutions, in partnership with world-renowned health systems across the US, is working to address the significant problem of medication non-adherence, specifically for chronically ill patients. We use a combination of:

- Behavioral interviews
- Customized care plans
- Integrated clinic/pharmacy medical record
- Provider updates
- A toolkit of proven adherence interventions deployed by Board Certified Pharmacist

Non-Adherent Patient Population



52% Increase in Patient Medication Adherence through Customized Clinical Pharmacist Intervention

Results and Patient Impact

A review of high-risk, non-adherent patients from multiple partner health-systems (those patients who are predicted to have less than a 32% chance of adherence at the outset of treatment) showed that, with the Shields Health Solutions interventions, **84% of these patients moved to a fully adherent state by month six.**

Shields Health Solutions' commitment to patient care extends beyond the adjudicated pharmacy benefit claim. Through a commitment to patient-centered integrated care, Shields works with our health system partners to decrease the overall cost of patient care and promote wellness via adherence to the prescribed medication plan.

Interventions to Improve Adherence to Self-administered Medications for Chronic Diseases in the United States: A Systematic Review. Viswanthan D, Golin CE, Jones, CD, Ashok, M, Blalock SJ, Wines, RC, Coker-Schwimmer, EJJ, Rosen, DL, Sista P, Lohr KN. Ann Intern Med. 2012; 157(11):785-795.

In Cancer Care, Cost Matters. By PETER B. BACH, LEONARD B. SALTZ and ROBERT E. WITTESOFT. 14, 2012 <https://www.nytimes.com/2012/10/15/opinion/a-hospital-says-no-to-an-11000-a-month-cancer-drug.html?ref=topics& r=0>

The cost of not taking your medicine. Jane Brody. April 17, 2017 https://www.nytimes.com/2017/04/17/well/the-cost-of-not-taking-your-medicine.html?rref=collection%2Fsectioncollection%2Fhealth&action=click&contentCollection=health®ion=stream&module=stream_unit&version=latest&contentPlacement=1&pgtype=sectionfront& r=1

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