

Syncing up drug refills: a way to get patients to take their medicine

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You have your red pill and your green pill. There's the one you take at breakfast, the one you take before bed and the one you have to take six hours after eating. All told, it is a lot to keep track of. And remembering the refills, all of which often happen at different times of the month, gets so complicated that sometimes you forget - and simply go without.

For the quarter of Americans with multiple ailments, this scenario is very familiar. It is also part of the reason, experts suggest, close to half of people with chronic conditions don't take their medications as directed by their doctors. This noncompliance costs the health care system hundreds of billions of dollars.

But a study published this week in *Health Affairs* suggests a possible fix: syncing up prescription refill timelines for patients who take multiple medications.

"We have so many things going on and so many complexities in our daily lives that reducing one level of complexity, and getting rid of issues related to forgetfulness - that's a huge service," said Jalpa Doshi, an associate professor at the University of Pennsylvania's [medical](#) school, and the study's lead author.

Researchers began with a group of patients who were Medicare Advantage plan members, were taking medications for diabetes, hypertension or cardiac disease, and who participated in Humana's pharmacy mail-order service. They then randomly assigned 2,500 of

them to an "intervention invitation group." Of those, 691 were reachable and agreed to enroll in this "pilot prescription synchronization program." A separate 695 were not contacted and made up a [control group](#) that continued to receive prescriptions as usual.

Patients whose prescription refills were aligned were more likely to follow their medication regimens, with overall rates of adherence increasing by 3 to 10 percentage points between September 2013 and December 2014. For those in the control group, adherence increased by only 1 to 5 percentage points. Improvement was greater for people who, at the start of the study, were already less likely to take medications correctly. For this group, syncing prescriptions boosted adherence by between 23 and 26 percentage points, as opposed to between 13 and 15 in the control group.

These findings come as more states pass laws that support the concept by requiring health insurance plans to cover partial refills of medication, and to charge pro-rated copays when they do so. Such measures make it possible for consumers and physicians to work together to make sure that prescription refill cycles match up.

That policy change can make a huge difference for people on multiple chronic prescriptions, Doshi said - a circumstance particularly common among elderly patients.

"If I'm an elderly person who needs care and support, I need someone to go to the pharmacy, or drive me. That in itself is a huge issue," she said. Even with mail-order prescriptions, remembering when individual ones end and making sure to keep them on schedule is a huge challenge. And if patients aren't getting their medications on the correct schedule, they can hardly take them as directed, she said.

Some independent researchers, however, were quick to point out that

these findings are only a first step and that additional research is necessary. But if these results hold, the approach could help make a dent in unnecessary health expenses and keep chronically ill patients healthier.

They also cautioned against placing too much weight upon these findings. For instance, there's the self-selecting nature of people who had their prescriptions synced. Because they opted into the program, they may have been people already looking for ways to improve their medication habits, said Walid Gellad, co-director of the Center for Pharmaceutical Policy and Prescribing at the University of Pittsburgh. That could have inflated the improvement researchers found.

He added, though, that the practice seems promising.

"Intuitively, it would be great if you could get all the medications at the same time, rather than having to figure out when each one was due" for a refill, said Gellad, who wasn't involved with the study. "It's really patient-centered, and a good way to simplify things."

The study also doesn't link greater medication adherence to patients getting or staying healthier. That makes it hard to measure how much syncing prescriptions would really help consumers, noted Hayden Bosworth, a professor of medicine at Duke University.

But, that said, "with these particularly effective drugs - there's no question that if you take them, you're going to have benefits," he added. Bosworth also was not involved with the study.

Other research has strongly associated better adherence with improved patient health, said Niteesh Choudhry, a professor of medicine at Harvard Medical School, who was also not involved.

Meanwhile, it's still unclear how many patients actually want the service. In the study, only about 28 percent of customers opted to have their medications aligned. That could undermine the practice's potential.

The study's authors attributed that reluctance to what they call "status quo bias" - the idea that people are generally reluctant to deviate from a system they have in place.

Plus, the study only looked at Medicare Advantage patients who got mail-order prescriptions. That's a very specific group, said Choudhry. It's possible that when you extend out, the potential to benefit from prescription syncing changes.

And it's unclear who is most likely to benefit. This study looked at older patients, who are already more likely to adhere to their medications. More research should examine whether younger people - who are worse about taking their pills - could stand to gain from prescription syncing, Choudhry said.

No matter what, Bosworth said, the practice must be part of a larger strategy. Given how many people don't take their medications properly, there's no single silver bullet.

"Medication adherence is one of the largest public health problems we have," he said. "I don't think this is going to get us there, but it is part of the puzzle."

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