



Medication Adherence in America:  
**A NATIONAL REPORT**

2013

**NCPA**  
NATIONAL COMMUNITY  
PHARMACISTS ASSOCIATION



Presenter

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# What is Medication Adherence?

**Medication Adherence:** Extent to which a patient takes their medications correctly.

- Poor adherence can lead to worse health outcomes, expensive hospitalization, or even death.
- ***Costs of non-adherence estimated to be as high as \$290 billion.***



# NCPA's PAMA Initiative

## **Pharmacists Advancing Medication Adherence**

- Five-year program, launched by NCPA in 2011, to advance and improve patient adherence.



Presenter

**Gary Langer**

**President**

**Langer Research Associates**

**@LangerResearch**

**[www.LangerResearch.com](http://www.LangerResearch.com)**



# Research Objective

## **Examine prescription medication adherence in the U.S.**

- Focus on those who use medication most regularly and therefore are at greatest risk if non-adherent
- Quantify non-adherence in a national report card

## **Evaluate demographic, attitudinal and experiential factors that influence adherence**

- Identify possible ways to increase compliance



# Methodology

## NCPA commissioned:

- A nationally representative survey of American adults age 40+ with at least one chronic condition for which they have been prescribed one or more medications to take on an ongoing basis
- 1,020 telephone interviews, Feb. 20–March 10, 2013
- Landline ( $N = 720$ ) and cell-phone ( $N = 300$ )



# Population Profile

- Among adults age 40+, 48% report having been prescribed a medication for a chronic condition
  - Most common: high blood pressure (57%), high cholesterol (47 %)
- 2/3 have had Rx for chronic condition for 6+ yrs
- Four in 10 have seen a doctor at least 5 times in the past year, including 20% with 10+ visits
- While 83% are self-reliant, one in six relies at least to some extent on others for reminders about taking their medications



# Measuring Adherence

Ask if respondents, in the past 12 months...

- Failed to fill or refill a prescription
- Missed a dose
- Took a lower or higher dose than prescribed
- Stopped taking a medication early
- Took an old medication for a new problem
- Took someone else's medication
- Forgot whether they'd taken a medication



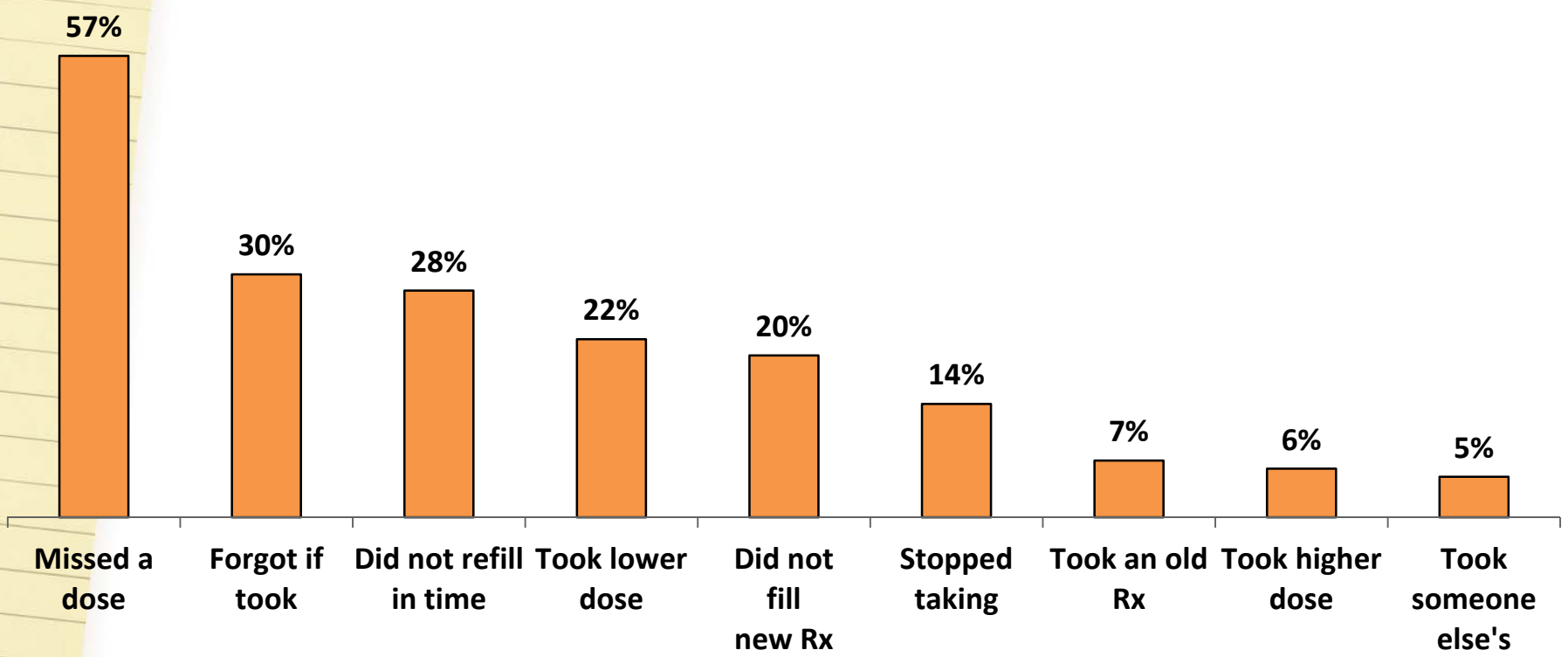
# Results

- About three-quarters concede at least one type of non-adherent behavior in the past 12 months
- More than half report multiple non-adherent behaviors (average appx. 2)
- Non-adherence, if anything, could be understated

...Even as more than nine in 10 say it's important to take their medication exactly as prescribed



# Non-Compliant Behaviors: Past 12 Mo.





# Grading the Answers

Average across behaviors, score = 0 to 100

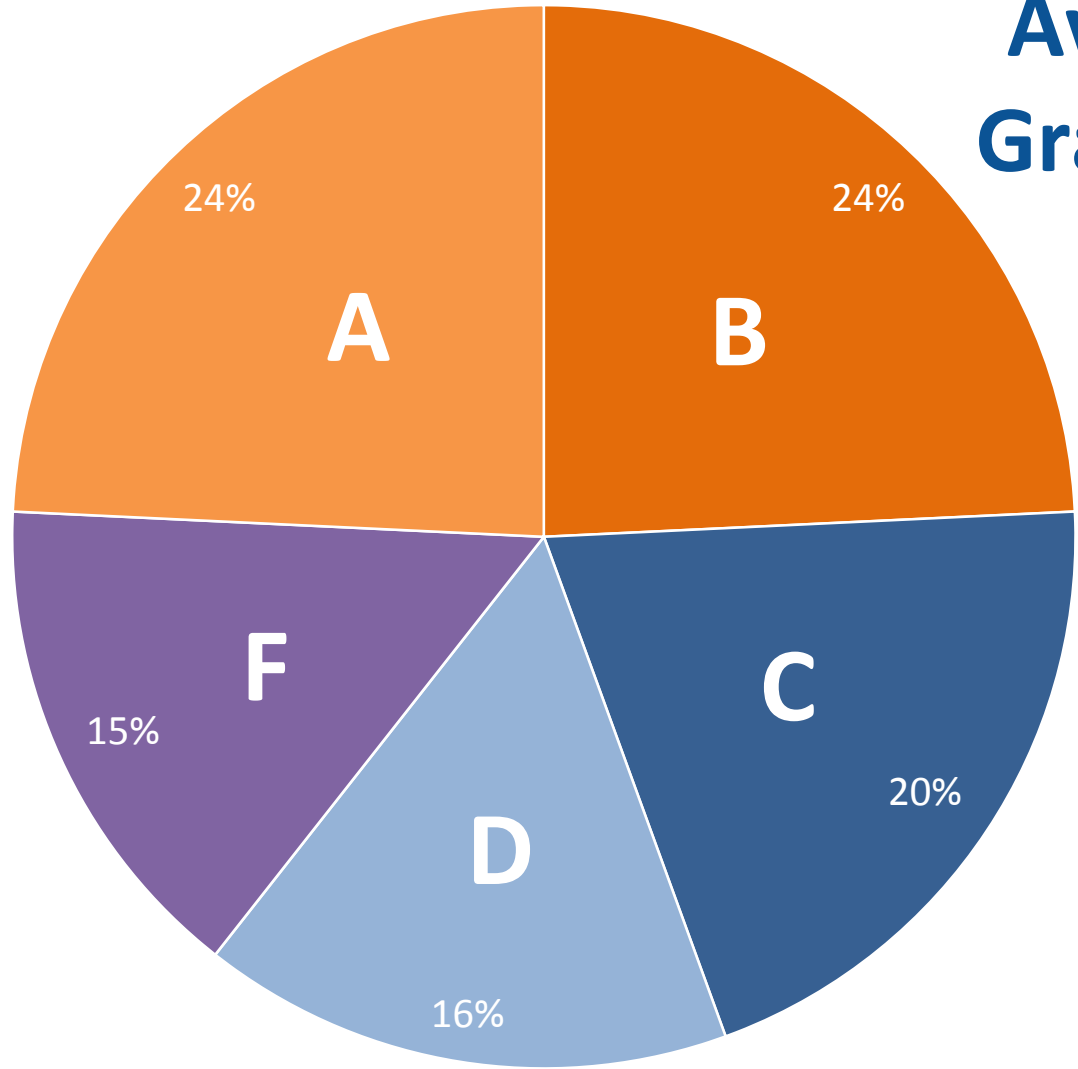
Assign letter grades:

- A: Completely adherent
- B: Non-adherent on 1 of 9 behaviors
- C: Non-adherent on 2 of 9
- D: Non-adherent on 3 of 9
- F: Non-adherent on 4 or more



# National Report Card on Adherence

**Average  
Grade: C+**





# Understanding Non-Compliance

## **Modeling identifies six key predictors:**

- Patients' personal connection with a pharmacist or pharmacy staff
- Ease of affording medication
- Continuity of care
- Recognizing the importance of taking medication exactly as prescribed
- Feeling informed about health
- Extent medication causes unpleasant side effects



Of These...

**Patients' relationships with pharmacists and doctors are critical.**

- **Connectedness:** Having a pharmacist (or pharmacy staff) who “knows you pretty well” is the single strongest predictor of adherence
- **Continuity:** Always seeing the same doctor is another strong predictor



## The Role of Cost...

### **Affordability is the second-strongest predictor of adherence.**

- A third overall report difficulty paying for their medications
- Among the non-adherent who find it hard to afford, 42% cite “trying to save money” as a major reason, vs. 10% of those who can easily afford their Rx
- Similar pattern for those who lack insurance and for lower-income Americans

## ...And Information



### **Two further predictors reflect the key role of information in adherence:**

- Recognizing the importance of taking medication exactly as prescribed
- Feeling informed about health



# Predicting Drivers of Adherence

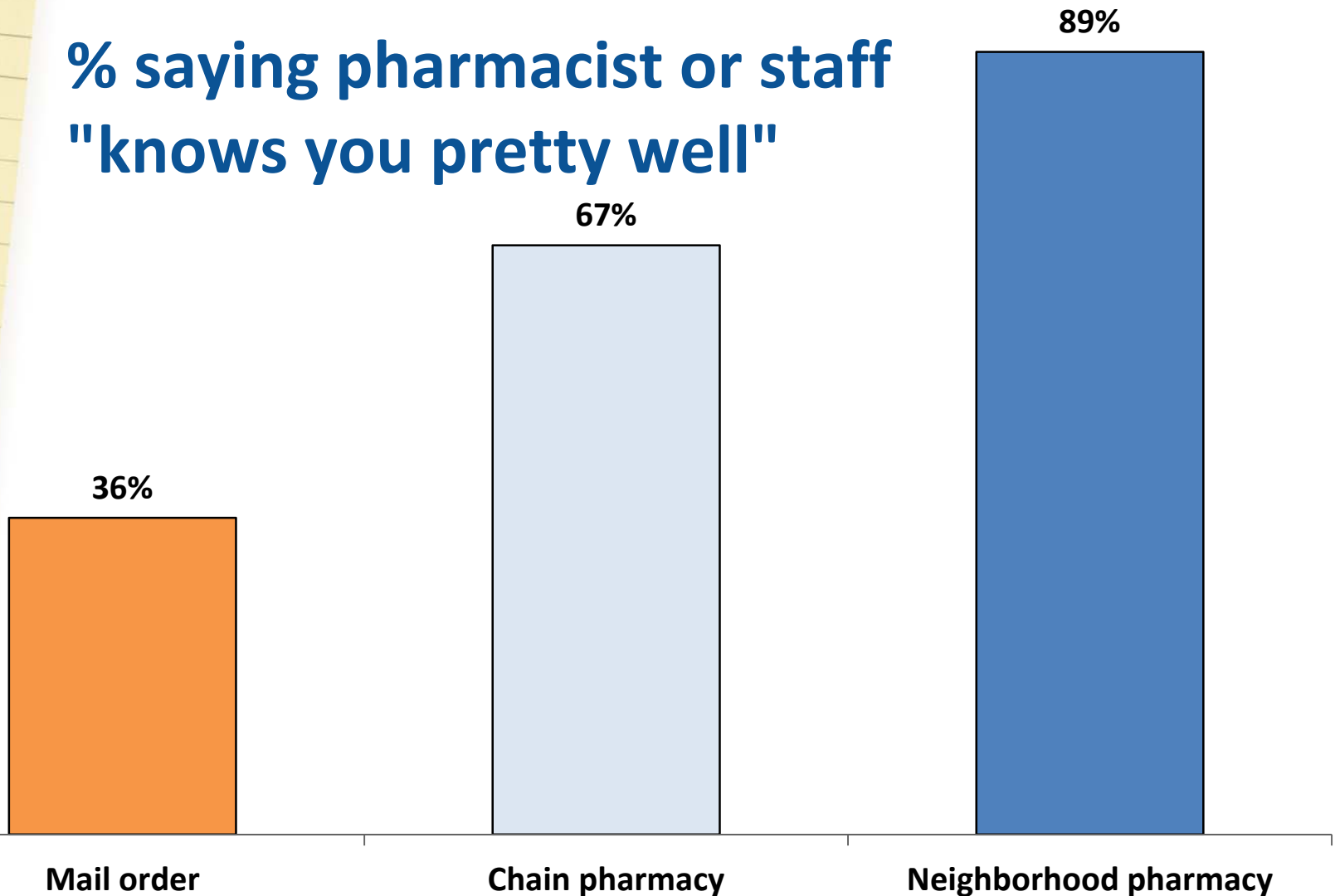
## **Predictors of connectedness:**

- Pharmacy type
- Duration of having an ongoing prescription



# Connectedness by Pharmacy Type

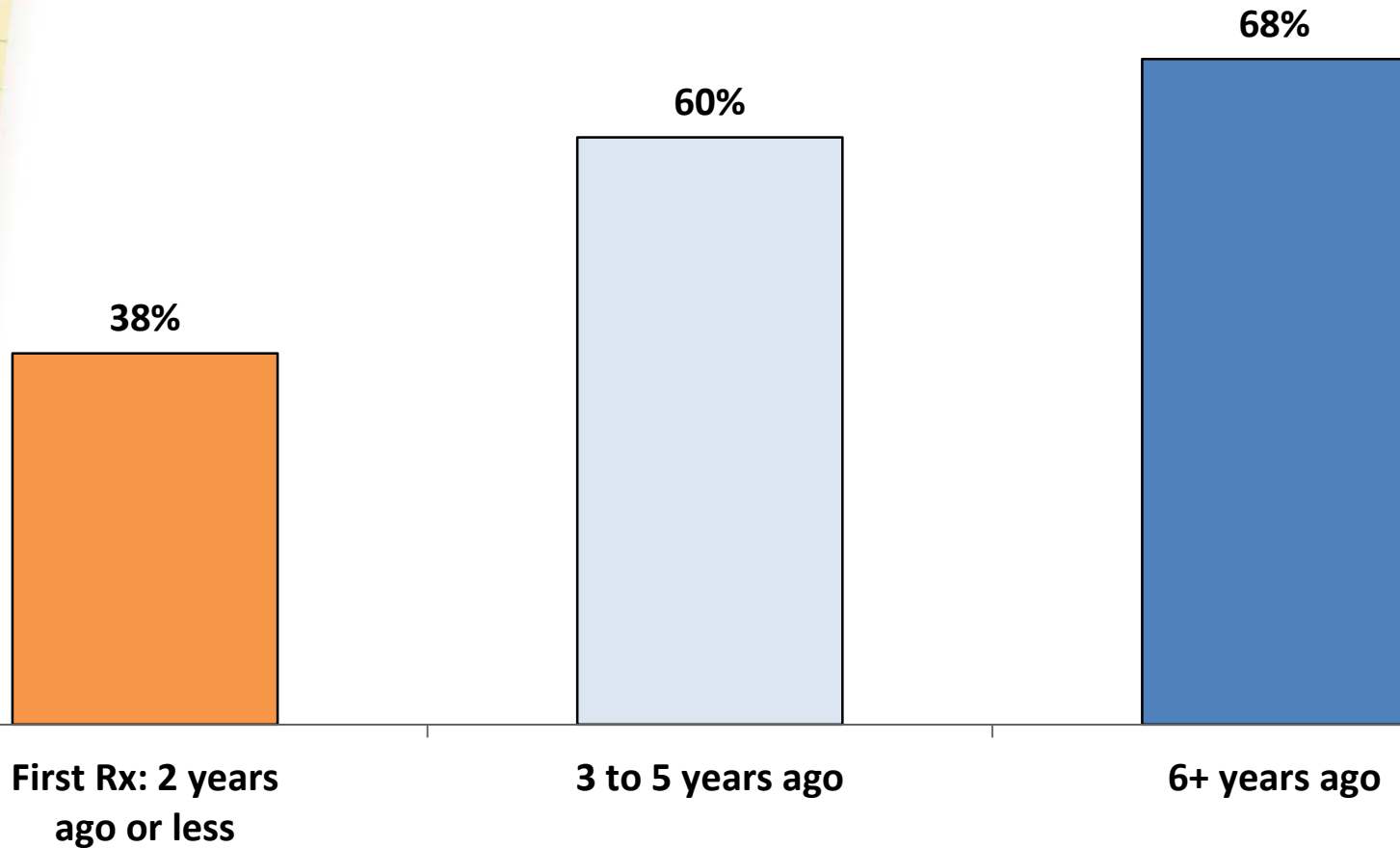
**% saying pharmacist or staff  
"knows you pretty well"**





# Connectedness by Duration of Rx

**% saying pharmacist or staff  
"knows you pretty well"**





# Predicting Drivers of Adherence

## **Recognizing importance of adherence:**

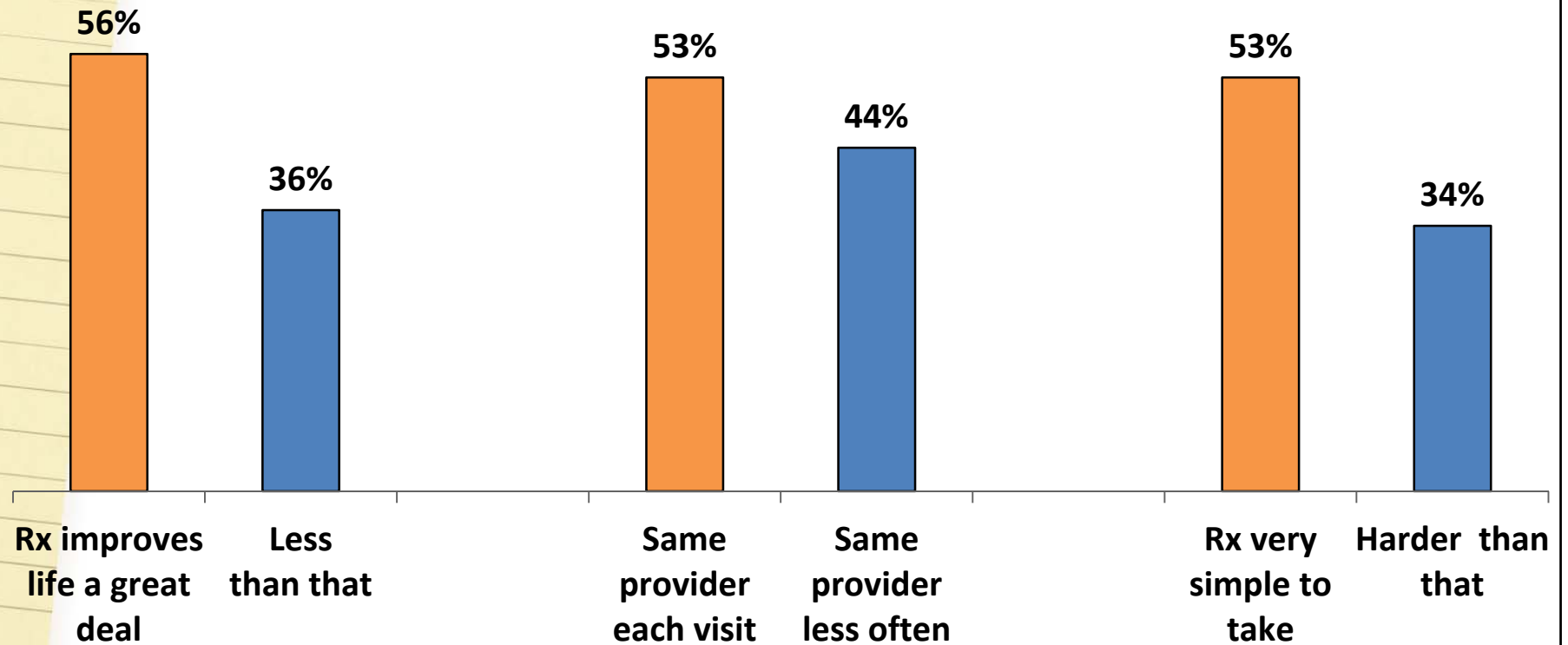
- Effectiveness of medication
- Ease of taking medication as prescribed
- Concern about long-term consequences
- Connectedness with health care facility

## **Being informed about your health:**

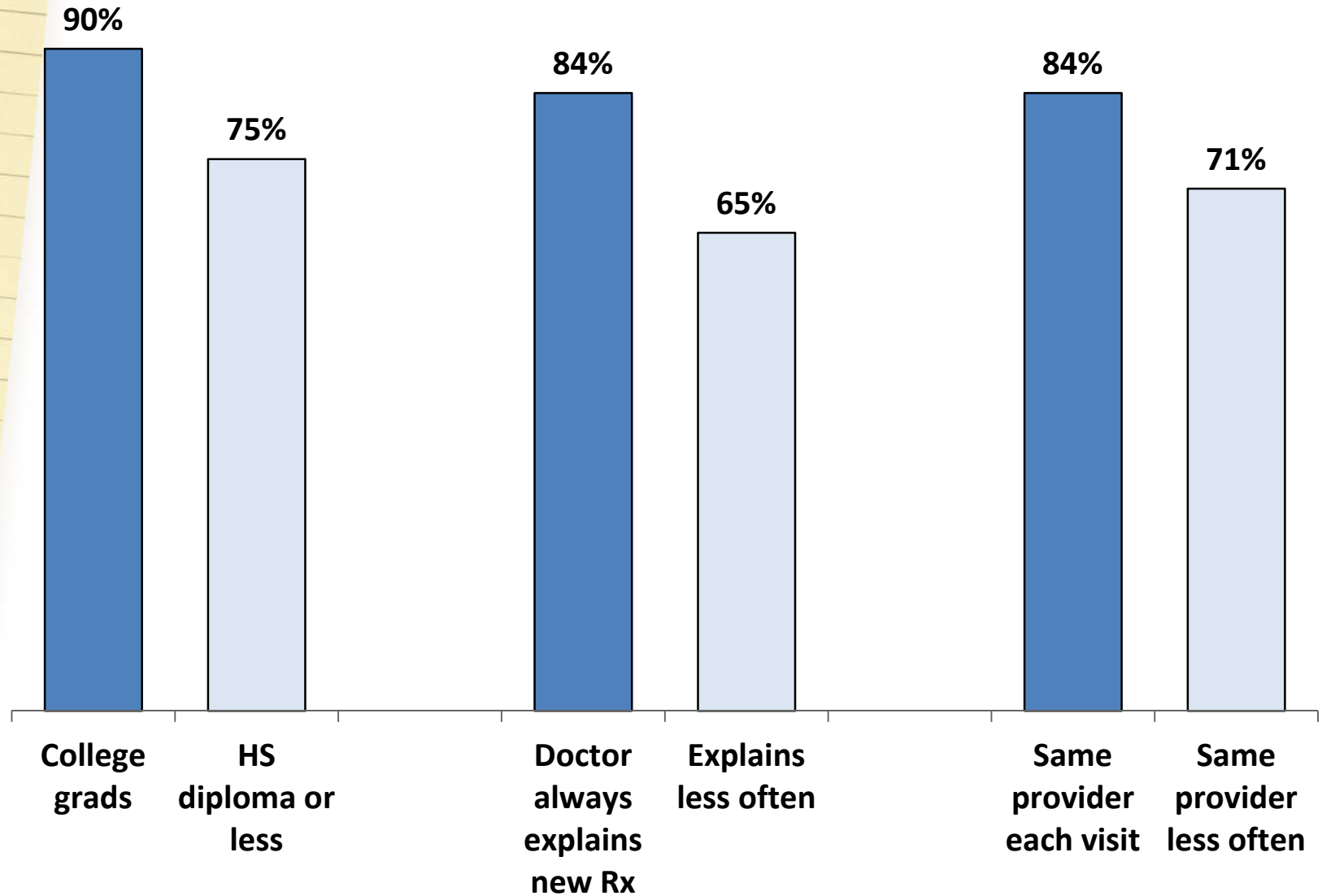
- Education
- Continuity of care
- Extent to which provider explains new medications



# Adherence as “Extremely Important”



# Understand “Great Deal” About Health





# Summary

## **This national report card finds troubling levels of medication non-adherence:**

- Millions of Americans are departing from doctors' instructions in taking their medications
- Overall C+ is highly problematic given the risks
- One in seven, more than 10 million adults, get a failing grade
- Personal risk and systemic costs are high
- Aging population holds the prospect for increased non-adherence



# Summary

## **Key factors influencing adherence include:**

- Having a personal connection with a pharmacist
- The affordability of medication
- Having continuity of care
- Believing it is important to follow Rx instructions
- Feeling informed about one's health
- (Not) having medication side effects



# Recommendations

## **Predictors suggest pharmacists and care providers can play a critical role by:**

- Establishing a personal connection with patients
- Teaching the importance of adherence
- Inquiring about and seeking to mitigate side effects
- Helping patients cope with costs
- Encouraging/providing health information



Presenter

**Paul DelPonte**  
**Director of Programs, Operations &  
Development**  
**National Alliance for Caregiving**  
[www.caregiving.org](http://www.caregiving.org)



# How Pharmacists Can Help

**Pharmacists can help patients and caregivers overcome barriers to follow medication regimens.**

- Report reinforces the role of pharmacy services like medication therapy management (MTM) and synchronized-refill programs like Simplify My Meds.™



# How Pharmacists Can Help

## **Independent Pharmacists are well-suited to boost patient adherence through connectedness:**

- Patients who primarily use an independent community pharmacy are 33 percent more likely to say the pharmacy staff “knows them pretty well” than customers of national chain pharmacies & more than twice as likely as customers of mail order pharmacies.



# Policy & Stakeholder Implications

- ✓ Congress should enact the Medication Therapy Management Empowerment Act (H.R. 1024/ S. 557).
- ✓ States should adopt legislation that gives patients a choice in pharmacy services and prevents them from being forced into mandatory mail order plans.
- ✓ Plan sponsors should support access for patients and caregivers to the pharmacy that best meets their individual needs.

*...continued*



## Policy & Stakeholder Implications (cont'd)

- ✓ Payers should not rely solely on fill rates as an indicator of quality as these metrics can produce unnecessary waste, costs to the system.
- ✓ Payers should remove existing barriers and encourage greater adoption of medication synchronization services as a standard of care.

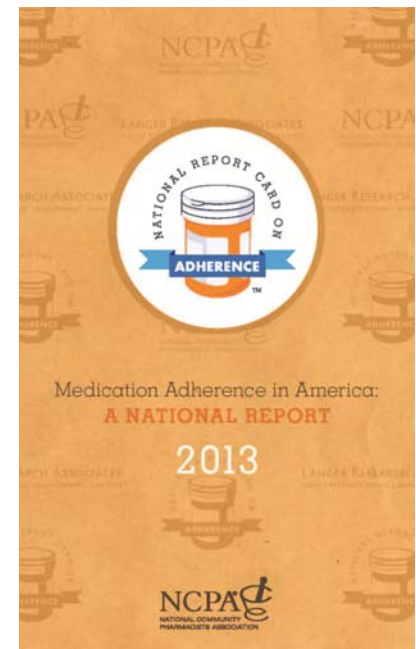


## More Information

Visit [www.ncpanet.org/reportcard](http://www.ncpanet.org/reportcard)

View/download copies of:

- Full Report
- Implications for Policymakers, Plan Sponsors, Stakeholders
- Webinar Recording (allow 24 hours)
- Speaker Slides
- Speaker Bios





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