



May 2024

## Addressing Medication Adherence Gaps

Please note, this communication applies to Healthy Blue + Medicare<sup>SM</sup> (HMO-POS D-SNP) offered by Blue Cross and Blue Shield of North Carolina.

Medications are the primary intervention in treating and preventing disease. For most conditions, medications need to be taken 80% or more of the time to see an improvement in clinical outcomes.

Forty to fifty percent of patients are non-adherent to their medications for chronic conditions leading to 100,000 preventable deaths and \$100 to \$300 billion in preventable medical costs per year.<sup>1,2,3,4,5,6</sup>

### How Can We Prevent and Close Adherence Gaps?

#### Be aware of contributing factors that influence non-adherence:

- Cognitive impairment
- Fear of side effects
- Too many medications
- History of non-adherence
- Lack of perceived benefit
- Confusion
- Transportation
- Cost

#### Footnotes:

**1** Kleinsinger F. The Unmet Challenge of Medication Nonadherence. *Perm J.* 2018; 22:18-033. doi: 10.7812/TPP/18-033. PMID: 30005722; PMCID: PMC6045499.

**2** Goptu A, Taitel M, Laiteerapong N, Press VG. Association between Medication Non-Adherence and Increases in Hypertension and Type 2 Diabetes Medications. *Healthcare (Basel).* July 31, 2021; 9(8): 976. doi: <https://doi.org/10.3390/healthcare9080976>.

**3** Brown M, Sinsky CA. Medication Adherence. Improve Patient Outcomes and Reduce Costs. *American Medical Association Steps Forward.* June 5, 2015. <https://edhub.ama-assn.org/steps-forward/module/2702595>. Accessed May 16, 2023.

**4** Eight reasons patients don't take their medications. *American Medication Association.* Feb 22, 2023. Accessed May 17, 2023.

<https://ama-assn.org/delivering-care/patient-support-advocacy/8-reasons-patients-dont-take-their-medications>.

**5** El Halabi J, Minter W, Boehmer KR. Identifying and Managing Treatment Nonadherence. *Medical Clinics of North America.* 2022; 106(4): 615-626. doi: <https://doi.org/10.1016/j.mcna.2022.02.003>.

**6** Kini V, Ho PM. Interventions to Improve Medication Adherence. *JAMA.* 2018; 320(23): 2461. doi: <https://doi.org/10.1001/jama.2018.19271>.

<https://www.bluecrossnc.com/providers/networks-programs/blue-medicare/healthy-blue-medicare>

Blue Cross and Blue Shield of North Carolina Senior Health, DBA Blue Cross and Blue Shield of North Carolina, is an HMO-POS D-SNP plan with a Medicare contract and a NC State Medicaid Agency Contract (SMAC). Enrollment in Blue Cross and Blue Shield of North Carolina Senior Health depends upon contract renewal.

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**Implement a standardized process to identify patients with non-adherence:**

- Ask about adherence at every appointment.
- Incorporate patient questionnaires or patient interviews using open-ended questions into existing workflows.
- Analyze non-adherence reporting or claims to identify patients.
- Leverage your electronic health record to identify patients at risk for non-adherence.

**Be proactive: Tailor the solution to the patient's needs or concerns:**

- Simplify the medication regimen by considering once daily dosing.
- Always educate patients on benefits and risks of taking or not taking their medications.
- Leverage real-time prescription benefit to select lower cost and formulary medications during the electronic prescribing process.
- Consider home delivery (mail) and 90-day supply to prevent refill gaps, avoid long waits at the pharmacy, and minimize transportation barriers.

**Consider medication non-adherence first as a reason when a patient's condition is not under control.**