

Background

About 50% of patients with chronic diseases do not take their medication as prescribed, leading to increased hospitalizations, poor health outcomes and escalating costs¹. There are many factors that contribute to non-adherence; thus interventions must be tailored to the experiences of each patient.

Description of measure

Patients 18 years and older who are adherent to their chronic medications for at least 80% of the time during the measurement year. Patients must have filled at least two prescriptions of either of the following categories during the measurement year to be included in the measure:

- Hypertension:** RAS antagonists or ACE/ARBs
- Cholesterol:** statins
- Diabetes:** oral diabetes medications

Exclusions

- ESRD
- Hospice

Tips for best practice

- Prescribe 90-day supply to improve adherence. Some plans offer co-pay costs for 90-day prescriptions (see 90-Day Supply Health Plan Benefits handout for more details)
- Review medications at each visit. Look for opportunities for generic conversion or move to drugs on lower tiers of the health plan's formulary
- Ensure the patient understands why you are prescribing the medication using the "teach-back" method. Emphasize that it is needed even if they do not feel symptoms.
- Use a team-based approach by empowering office staff to address adherence
 - Ask open-ended questions such as, "Some people have trouble taking their medication the way their doctors ask them to. What gets in the way of you taking your medication?"
- Encourage mail-order and minimize polypharmacy