

## 2013 Healthcare Benchmarks: Improving Medication Adherence

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## Abstracts

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The cost of medication non-adherence is great: in 2009, the New England Healthcare Institute (NEHI) blamed medication non-adherence for \$290 billion in 'otherwise avoidable medical spending' in the United States alone each year.

Last year, the NEHI reported that a significant portion of hospital readmissions of Medicare patients — a metric closely examined by CMS and private payors — is caused by medication-related adverse events.

2013 Healthcare Benchmarks: Improving Medication Adherence provides actionable information from more than 100 healthcare organizations on efforts to improve medication adherence and compliance in their populations.

Now in its third year, this annual analysis of medication adherence initiatives documents the impact of these programs on adherence and compliance levels, medication costs, ER visits, hospital and skilled nursing facility admissions, risk of death, and other areas of concern.

New in the 2013 Edition:

Comparative 2010-2013 data on key medication adherence metrics;

Expanded data on the increasing role of the community pharmacist in medication adherence and related reimbursement;



A look at the frequency of home visits and telephonic follow-up in these programs;

A broader examination of tools, technologies and program components, including the growing use of mHealth;

Health coaching as opportunity for medication management and reconciliation;

Dozens of effective work flows, tools and processes in use in medication adherence programs, in respondents' own words;

and much more.

Download the executive summary of 2013 Healthcare Benchmarks: Improving Medication Adherence.

Medication management has long been a key to-do on the hospital discharge checklist. But now efforts to educate patients and health plan members about proper use of prescribed medications is moving upstream to the medical home, community clinics, and even in the home.

This 50-page resource provides all-new metrics and measures on current and planned medication adherence programs as well as program elements, lessons learned, challenges and benefits and early returns from successful medication adherence initiatives.

This exclusive report analyzes the responses of more than 100 healthcare organizations to HIN's third annual Industry Survey on Improving Medication Adherence administered in January 2013, presenting data in more than 50 easy-to-follow graphs and tables.

This report provides qualitative data from overall respondents and also drills down to responding hospital and health plan views on:

Current and planned medication adherence programs;

Populations and conditions targeted by medication adherence efforts;

The top strategies to improve medication adherence, including metrics on the



use of financial incentives, medication packaging, motivational interviewing, pharmacist counseling and patient aids;

Inclusion of the pharmacist on medication adherence program team, including retail or community pharmacist involvement;

Trends in reimbursement for efforts related to medication adherence, including patient education and medication reconciliation/review;

Technologies and data sharing utilized by medication management programs;

The top five tools to assess and monitor medication adherence;

Availability of medication adherence programs in the primary care office, at hospital discharge, during home visits and other points of care;

Statistics on health professional contact with patients for the purposes of improving medication adherence (by PCP, nurse practitioner, pharmacist, health coach, and case manager);

The impact of medication adherence programs on patient compliance with care plans, ER visits, hospital and nursing home admissions, adverse drug events, member/patient satisfaction and ROI and other metrics;

The complete January 2013 Medication Adherence survey tool;



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