



**AdhereHealth™**  
ADHERENCE RESOLVED

## IMPACT REPORT

# Turning Nonadherent Members to Adherent

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Medication Adherence Strategies for  
Medicare Advantage Part D Star Ratings

More than a third of MA members who were nonadherent in 2019 achieved medication adherence in 2020 through data-driven telepharmacy.

Medication adherence has an enormous impact on healthcare quality, health plan reimbursement and outcomes.

Every year, the healthcare economy **spends** hundreds of billions of dollars on unnecessary medical utilization tied to poor medication adherence. Nonadherence leads to avoidable hospital admissions and readmissions, emergency department visits, and reduced quality of life for tens of thousands of individuals annually.

The Centers for Medicare and Medicaid Services (CMS) provides approximately \$7 billion per year for Medicare Advantage (MA) plans to capture \$500 per member per year in additional reimbursement for higher Star Ratings. Each year, MA plans compete on dozens of quality measures that aggregate to a Star Rating. The medication-related measures make up 52 percent of the overall Star Rating weighting and the adherence measures (e.g., cardiovascular, hypertension and diabetes) are all triple-weighted.

Fortunately, there are proven strategies for increasing MA health plan adherence rates while addressing the underlying social determinants of health (SDOH) that often prevent members from taking their medications as prescribed.

By combining predictive analytics with telepharmacy outreach by licensed clinicians, health plans can close gaps in care, increase access to prescribed medications, and gain measurable performance improvements on key medication adherence metrics.

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# Challenge

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There are many factors that lead to medication nonadherence. Oftentimes, these factors fall outside of the realm of traditional, direct clinical care.

For example, low health literacy rates and unclear instructions can lead to over- or under-dosing. Socioeconomic instability, such as food insecurity, isolation, and lack of transportation, may make it difficult for beneficiaries to access their medications as directed. And daily living challenges, including cognitive decline or physical limitations, can prevent some individuals from keeping up with their medication routines without ongoing support.

Without a coordinated approach and intelligent clinical workflow software, health plans have found it difficult to address these barriers to care. However, increasing pressures from quality measurement and financial accountability are making it even more important to identify SDOH issues quickly and efficiently.

In order to score highly on quality metrics and achieve competitive Star Ratings, Medicare Advantage health plans must ensure that their members are adherent to the benchmarks of proportional days covered (PDC) to achieve medication thresholds throughout the plan year.





To qualify as guaranteed adherent by CMS Star Ratings measurement criteria, qualified members must have refilled certain chronic condition medications for at least 80 percent of the plan year. Target chronic conditions include diabetes, hypertension, and cardiovascular disease. Based on pharmacy claims data, members with these chronic conditions need to stay adherent to their prescribed medications throughout most of the year to meet the requirements of each adherence measure.



**Target chronic conditions include diabetes, hypertension, and cardiovascular disease.**

Continuous adherence is a challenge for all members, but especially those with SDOH factors in their lives. MA plans need to leverage innovative, data-driven strategies to address the nonclinical needs of these members, ensure access to prescription drugs, and foster better adherence habits.

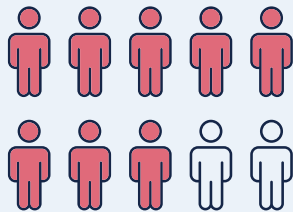


# Solution

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AdhereHealth leverages analytics and intelligent clinical workflow software tools coupled with a coordinated telepharmacy team of licensed clinicians to forge meaningful relationships with health plan members year-round. Robust analytics, intelligent clinical workflow software, and SDOH resolution capabilities are all integrated in the company's proprietary Adhere™ Platform. The Adhere Platform utilizes a patient relationship management (PRM) architecture to ensure there is continuity of care and ongoing support for each patient's unique medication adherence journey to maximize patient experience.

During the first quarter of a new year, the telepharmacy approach should be centered on patients with prior year nonadherence lower than 80 percent PDC. Based on predictive modeling, clinicians use call list output to stratify and target at-risk members with daily outreach to those most likely to fall below the scope of medication adherence quality measures.



**Nonadherence  
lower than 80% PDC**



**Prescription claim  
within the last  
three months**

To be sure identified members are at-risk and have not simply discontinued the medication, they must have had a prescription claim within the last three months of the previous plan year. A proactive telepharmacy outreach at the beginning of the measurement period is designed to make sure higher-risk members start off strong and remain compliant throughout the whole cycle instead of waiting until it's too late to meet the measurement threshold.

Using the Adhere Platform's clinical workflow software, licensed clinicians use analytically-infused motivational interviewing techniques to engage members regarding their barriers to care - all via telepharmacy. The nationwide telepharmacy team identifies each barrier with discrete member input for immediate or future follow-up. With this information, the team can improve medication access through medication synchronization to reduce the number of refills and trips to the pharmacy, directly enrolling patients with complex medication routines into compliance packaging solutions, arranging home delivery of all medications, solving for food insecurity, coordinating transportation to providers, or immediately connecting members with their health plan case management team so members can take advantage of available benefits.

Telepharmacy clinicians are trained to immediately provide answers to questions about how to take medications correctly, how to change or transfer prescriptions between pharmacies, and how to manage any side effects. Many SDOH issues require a follow-up that leverages the Adhere Platform's discrete data documentation of each item and triggers future telepharmacy outreach. For example, if a patient was supported with access to a food bank or Meals on Wheels program so that they can now turn their attention to medication adherence related issues, the Adhere Platform will automatically trigger a follow-up in 10 days to ensure the food insecurity issues were overcome. Each member's individual experience is a step towards better medication adherence.

For vulnerable members with complex conditions and multiple prescriptions, these detailed clinical support conversations may occur multiple times a year, averaging 12-14 minutes each, to ensure the ongoing customer experience builds momentum in the adherence journey for optimal health.

This holistic, ongoing experience is especially valuable during COVID-19, when members are looking to reduce unnecessary person-to-person contact and avoid interactions at physician offices and pharmacies. Ensuring that members have full access to their medications during a time of serious stress on the healthcare system – and society at large – is vital for maintaining adherence. Further, in 2021, the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) customer experience survey measures doubled in aggregate weighting to be 32 percent of the overall health plan Star Rating.

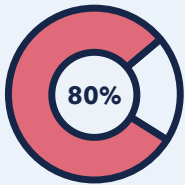


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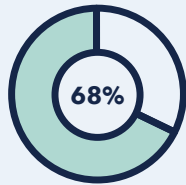
# Results

AdhereHealth took a representative sampling of 4,471 members associated with 4,921 individual medication adherence measures. Some members had multiple prescriptions, each of which is measured separately.

The members in this cohort were guaranteed nonadherent (GNA) for plan year 2019 and had a prescription fill or claim that qualified them for inclusion in plan year 2020 adherence measures.

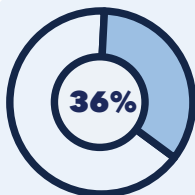


Shown year-over-year improvements in PDC



Moved from nonadherent to guaranteed adherence

Of the 4,921 measures evaluated, 80 percent showed year-over-year improvements in the percentage of days covered (PDC) in the 2020 measurement period. Sixty-eight percent of measures showed enough improvement to move them from the guaranteed nonadherent category into guaranteed adherence for 2020.



Attained perfect adherence in 2020





# Conclusions

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Medication adherence has been a perennial challenge for Medicare Advantage plans, but personalized, data-driven strategies are making it possible to deploy effective solutions. With a streamlined PRM system that enables detailed targeting of at-risk members to guide proactive, compassionate outreach by experienced pharmacy professionals across meaningful touchpoints, AdhereHealth is helping alleviate social determinants of health (SDOH) issues to support medication adherence and ensure a positive customer experience. This intelligent, proactive telepharmacy approach is already producing dramatic results for health plans and their members, and the impact will continue to grow with the growing importance of customer experience management.

Ongoing improvements in medication adherence rates translate to better outcomes for members and hundreds of millions of dollars in savings across the entire care continuum. By investing in solutions that address the social determinants of health alongside clinical concerns, health plans can close gaps in care, reduce avoidable costs, improve the member experience and provide quality outcomes for their vulnerable populations.







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