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Administration of Emergency Medicine

RACIAL DIFFERENCES IN BELIEFS OF PHYSICIAN PRESCRIBING PRACTICES FOR LOW-COST PHARMACY OPTIONS

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☐ Abstract—Background: Previous studies have reported that certain populations are sensitive to high out-of-pocket drug costs, and drug noncompliance leads to poorer health outcomes. Objective: Our aim was to measure patient awareness of discount pharmacy options, cost barriers to medication access, and beliefs about health care provider's use of low-cost medications. Methods: This cross-sectional 17-item survey was administered to patients in the emergency department of an urban trauma center in February 2011. Differences in responses by sex and race groups were assessed. A logistic regression model was created to estimate the association of sociodemographic factors and medication use with awareness of discount pharmacy options. Results: Five hundred and fifty-two surveys were analyzed. Among respondents who were prescribed medications within the past year, three fourths of patients felt comfortable asking physicians for cheaper medicines. Slightly more than half were aware of low-cost pharmacy options, and 78% of these respondents correctly listed at least one of these pharmacies. Caucasian patients were more comfortable than African American patients asking for cheaper medicines (82.5% vs. 72.2%; p < 0.05) and were more aware of low-cost prescription programs (63.9% vs. 43.5%; p <0.001). When adjusted for insurance status and current medication use, Caucasian patients were 2.7 times more likely to name a valid discount pharmacy option compared to African Americans (95% confidence interval 1.85-4.07). Conclusions: This study suggests populations may be more uncomfortable initiating a discussion about medication costs and selection of lower-cost alternatives. Health care providers may need to develop communication strategies in which medication cost is addressed with sensitivity and consistency. © 2014 Elsevier Inc.

☐ Keywords—low-cost pharmacy options; cost barriers; medication noncompliance; racial differences; patient beliefs

INTRODUCTION

Repeated investigations demonstrate prescription drug noncompliance contributes to poorer health outcomes, presenting a significant challenge to prescribing health practitioners (1-5). An investigation of >195,000 e-prescriptions demonstrated a primary nonadherence rate of 28% for new medications (6). Previous studies determined that certain populations, such as seniors older than 60 years old and African Americans, were highly sensitive to high out-of-pocket drug costs, significantly delaying initiation of drug treatment for newly diagnosed chronic medical conditions (5,7,8). Seniors without insurance coverage report skipping medications or not filling prescriptions up to 15 times more often than those with insurance (8). Previous reports also indicate negative perceptions toward generic medications and provider communication (8,9). Given the number of

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1. Have you been prescribed any medications in the past year	r? [] YES [] NO
How many different prescription medicines do you take each day?	Daily
How many of your prescription medicines are too expension for you to afford?	vemedicines
Do you feel comfortable asking your physician/doctor for low cost prescription medicines?	[] YES [] NO
5. Do you feel that your physician/doctor does a good job prescribing lower cost prescription medicin	[] YES es? [] NO
6. Do you feel that your physician could do a better job finding less expensive medicines?	[] YES [] NO
7. Are you aware of pharmacies which offer certain medicine lower costs, such as \$5.00 per month supply?	es at [] YES [] NO
If so, which pharmacies do you remember:	
8. How would you find out if a medicine was available from one of these pharmacies? Choose only one: [] Take the prescription to different stores [] Call different pharmacies [] Look up pharmacy drug lists on the internet [] I do not try different pharmacies [] I don't know	
How much do you pay for a one month supply for ALL of your prescription medicines?	dollars
10. Do you ever have trouble paying for your medicines?	[] Every time [] Half of the time [] Sometimes, less than half

Figure 1. Survey questions.

emergency department (ED) discharges with prescription medications and the significant role cost plays in patient adherence, ED prescribers must recognize this significant barrier to successful treatment especially for those who seek care for chronic conditions in the ED (9).

Importance

The National Council on Patient Information and Education estimated prescription medication noncompliance costs United States (US) health care industry \$177 billion annually (10–12). An earlier survey conducted among ED patients determined prescription drug noncompliance was a major reason for an ED visit for 22% of the respondents, and half of those surveyed stated cost of the medication was the reason for noncompliance (4). The

cost of prescription medications can be a substantial barrier to patients and a lever for excessive health care expenditures (2,13).

Objectives of Investigation

The investigators studied an urban tertiary care center ED population's awareness of low-cost pharmacy options and beliefs about physician efforts in prescribing low-cost medications. The investigators hypothesized that the ED population would have high baseline awareness of discount drug programs based on prolific pharmacy advertising throughout the community. It was also hypothesized that there would be no difference between race and sex groups in patient beliefs about health care provider use of low-cost medications. The investigators initiated this

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