Managing the Cost of Asthma Medications: CAN PREVENTIVE DRUG LISTS HELP?

BACKGROUND:

Our research study examined the experiences and health care decisions of people with asthma and their families. Asthma medications are expensive and we wanted to learn how insurance affected management of asthma costs. We focused on those with high deductible health plans and we examined the benefits and barriers of using a preventive drug list (PDL) to manage asthma costs.

DEFINITIONS:

Deductible: the amount you have to pay out-of-pocket for care before insurance covers the costs

High deductible health plan: an insurance plan where the annual deductible is over \$1,300 for an individual or \$2,600 for a family

Preventive drug list: a new feature of some high deductible health plans where preventive medications are covered at low or no cost before insurance deductibles are met

WHO PARTICIPATED:

We conducted telephone interviews with 22 people who had asthma themselves, were the parent of a child with asthma, or both. All had high deductible health plans with preventive drug lists. Most were female and non-Hispanic white.

MAIN TAKEAWAYS:

Preventive drugs lists can help families with high deductibles manage asthma costs if relevant medications are included on the list and members know they have this benefit. Insurance plans and employers need to educate their members on the use of this benefit, while also working to ensure the benefit is as consistent as possible.

IMPLICATIONS:

Patients should check with their insurance plan or employer to learn about the coverage and costs for their medications, and whether a preventive drug list is available. Even if a preventive drug list is available, asthma medications may not be covered on the list, so patients should work with a pharmacist or doctor to see if there is a lower cost asthma medication that would work for them.

FINDINGS:



Some people reported benefits from having a preventive drug list. They saved money on asthma medications, which could help them stick to their care plans.

"I'm lucky enough to have health insurance that provides for the medications which are my biggest cost, so [managing medication costs] really isn't an issue. If I didn't have [this plan], it would be."

Other people faced barriers to using their preventive drug list. For example, some reported that the coverage for a specific medication would change over time. Others were frustrated because their current asthma medications weren't included on their list or still required a high copay. Still others struggled with non-medication costs that preventive drug lists do not cover.

"[Having a preventive drug list] doesn't really make a big impact if we have an ER cost or a hospitalization cost. The last ER visit we had cost ~\$1500. The last hospitalization we had cost >\$5000."

Finally, lack of awareness was an issue. Many participants did not know they had a preventive drug list, creating a barrier to switching to medications included on the list.

ACKNOWLEDGEMENTS:

This work was supported through a Patient-Centered Outcomes Research Institute (PCORI) Project Program Award (HIS-1602-34331). All statements in this report, including its findings and conclusions, are solely those of the authors and do not necessarily represent the views of the PCORI, its Board of Governors, or Methodology Committee.

For more information contact: Dr. Alison Galbraith, MD, MPH at Alison_Galbraith@harvardpilgrim.org







