**Medication Adherence:**

**Discussion Questions for the Educational Module**

(The full module is available at [http://www.cdc.gov/primarycare/materials/medication/index.html](http://www.cdc.gov/primarycare/materials/medication/index.html))

(May be used before or during the presentation)

1. **Discuss the ways that team-based care can improve patient medication adherence.**

   Team-based care involves effective collaboration among healthcare providers of diverse disciplines. The team works towards a common goal of improving outcomes by providing quality health care using a patient-centered approach.¹–⁴

   Team-based care can improve the effectiveness of cause-specific medication adherence interventions by allowing team members to use their individual skills to maximize patient care. Most of the current evidence on team-based care and medication adherence focuses on pharmacists’ roles.⁵,⁶ Systematic reviews have shown improved patient adherence to blood pressure and lipid medications when pharmacists provided one or more of the following team-based care strategies:⁴,⁶–⁸
   - Recommending medication to the clinician
   - Educating the patient about disease, lifestyle, and medication doses, frequency, and timing
   - Completing a drug profile or medication history
   - Assessing the patient’s medication compliance
   - Ordering lab tests if needed

   Research has shown that a patient’s chronic condition can improve when physicians and pharmacists work together using a medication therapy management (MTM) approach treatment plan.⁵,⁶,⁸ Specifically, a six-month trial of physician–pharmacist collaborations demonstrated better control of blood pressure in the intervention group than the usual care group.⁹,¹⁰ MTM is a service or group of services by pharmacists that optimizes therapeutic outcomes for individual patients by identifying, preventing, and resolving medication-related problems.¹¹ Pharmacist-provided MTM services are recognized through pharmacist-only current procedural terminology (CPT) codes for billing, and MTM is used as an abbreviation with the CPT codes. CPT codes provide a standard nomenclature of communication between healthcare providers and payers.

2. **Discuss how changes at the individual and practice levels can improve medication adherence in a population.**

   At the individual level, medication adherence is often affected by condition-related, therapy-related, and provider-related factors, as well as individual physical and psychological issues. Healthcare providers can work together to improve medication adherence in their patients by using the “SIMPLE” strategy:
   - **S** — Simplify the regimen (e.g., adjust the timing, dosage, or frequency of medication)
   - **I** — Impart knowledge (e.g., distribute written information about the medication or health condition)
   - **M** — Modify patient beliefs and behaviors (e.g., assess benefits and barriers to adherence)
P — Provide communication and trust (e.g., actively listen to the patient)

L — Leave the bias (e.g., tailor the education to the patient’s level of understanding)

E — Evaluate adherence (e.g., count the patient’s pills)

The SIMPLE approach requires healthcare providers to focus on communication skills, cultural sensitivity, and patient-centered interviewing.12,13

At the practice level, medication adherence can be improved through patient-centered care practices, which improve access to care and allow patients to be more proactive and engaged in their care; examples include patient portals and automatic reminders. The following system reorganization techniques6 can be helpful in improving medication adherence:

- Meaningful use of health information technology
- Clinical decision support systems
- Team-base care
- Educational interventions (e.g., programmed learning for patients and providers)
- Behavioral interventions (e.g., simplified dose regimens)
- Rewards (e.g., free medications, reduced co-pays)

In conclusion, medication adherence can be improved at the individual level by using SIMPLE and at the practice level by integrating patient-centered care practices with enhanced communication skills between providers and patients.6,12

References

