

WHAT WAS SAID

“The patient can get whatever drug [the doctor prescribes]. We tell people, you make the choice: maybe you have to pay for it, or pay 50%, or go back to your doctor and request a new script. People need to know upfront when they go to the doctor what drugs are covered.”

Suzanne Lepage, product manager,
Manulife Financial

“Before you get dental work, you call to see if crowns are covered. But no one ever thinks that way for medicine because they think everything is covered.”

Gren MacDonald, vice-president, sales & marketing, Green Shield Canada

“It’s the patient’s choice to take the drug that’s covered, or pay on their own. It’s always baffled me that people would want to go back for a different drug: what’s more important, your health or your financial pocket?”

Kathryn Hart, senior benefits specialist,
Federal Express Canada Ltd.

“Most doctors don’t know anything about the cost of drugs they prescribe. You need to do a needs assessment to find out what physicians know about drug plans.”

John Axler, physician, Albany Clinic,
Toronto

THE ROLE OF THE PHYSICIAN

Twenty-eight participants at three roundtables discussed the role of physicians in drug plan management, particularly in the area of patient education. The roundtables focused on the recommendations of a working group, which met three times prior to the conference. Members of the working group were: Christine Stewart (chair), pharmacist; Upe Mehan, physician; Mireille St-Jean, physician; John Axler, physician; Renée St-Jean, pharmacist; Jean Chen, pharmacist; Barbara Martinez, Mercer Human Resource Consulting; Bessie Wang, BCE Emergis.

GENERAL DISCUSSION POINTS

- Physicians don’t know about drug plans and patients don’t want to contradict the doctor when it comes to treatment.
- It’s not the doctor’s role to educate patients about drug plans, and doctors don’t want to prescribe based on drug plan.
- Physicians need to reinforce the main message: that patients are responsible for knowing about their own plan. Physicians can inform patients to check with their employer or insurer about what’s covered, as well as inform them that drug plans may not cover all prescriptions or 100% of all costs.
- By reminding patients in advance that drugs may not be covered, physicians can help things run more smoothly in the pharmacy at the time of dispensing.

“IT’S YOUR DRUG PLAN” CONSUMER BROCHURE

- The brochure is a simple option to help educate patients about how drug plans work.
- While some physicians were receptive to having copies in the waiting room, others felt they had enough patient information materials already.
- Ideally, brochure should be supported with a display unit and/or poster.
- Ideally, a version should be created to present more of the physician’s perspective.

EDUCATIONAL POSTER AND/OR TENT CARD

- A wall poster or tent card on the receptionist’s counter is a simple, effective way to raise awareness of drug plans.
- It could be used in conjunction with brochure.
- The message should be simple and direct, e.g., “Don’t assume your drug plan covers everything—call your employer or insurance company.”

WHAT WAS SAID

“Physicians don’t understand drug plans. In fact for us, the government plan presents a bigger problem than private plans.”

Gordon Riddell, physician, Bracebridge, Ont.

“When we changed the formulary for some clients, we wanted to meet the medical people in our area and communicate. Everyone wanted to come to the meeting, but what we heard was, ‘We don’t give a damn what the plan pays. We’re prescribing what we want’.”

Noel MacKay, senior consultant, The Williamson Group

“In the future, we’ll evolve so we’ll be able to tie patient records with a database which shows past use. This will avoid some administrative problems; for example, past attempts at first- and second-line drugs mean no special authorization is needed for third-line. Technology will change things.”

Ron Gathercole, director, business relations, Atlantic Blue Cross

PHYSICIAN WORKSHOPS

- For those physicians who are interested (and some are), the workshop would help them understand how the drug benefits industry works.
- The workshops would also address the potential impact of drug plan coverage on a patient’s ability to adhere to the prescribed drug therapy.
- Rather than a live workshop, it could be online and/or in powerpoint.
- It would, however, reach a relatively small audience, since most physicians are too busy and/or don’t care to know more about drug plans and their impact.
- It is generally easier to get pharmacists interested and involved, since their day-to-day involvement in drug-plan issues is much higher.

IDEAS FOR ARTICLES IN THE MEDICAL POST, PHARMACY POST

- What do more physicians think about drug plans and their impact on care?
- Show physicians a day in the life of the pharmacist regarding drug plan matters; as well, use this approach to illustrate the challenges of people in the benefits industry.
- Give examples of how drug plan coverage can help or hinder adherence to therapy (would also address the impact of copays and deductibles), particularly for certain disease states.
- Give a status report on technological developments to speed the process for special authorizations.

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