

WHAT WAS SAID

“We need to identify the true costs so management can know ‘yes, area X is costing us X dollars.’ The employer needs to understand cost issues up front since it is a lot easier to make decisions if you look at it as a business issue which affects LTD, absenteeism, etc. Then the employer can build a business case.”

*Roy Pullman, president,
Crosslinks Health Consulting*

“Be prepared for slow change: it took a long time to recognize that smoking is bad... You need to do something short term and long term. Short term includes restricting access and shifting cost to employees. Long term includes shifting attitudes and investing in long-term savings. Compliance, information tracking, and a willingness to take health- risk assessments are all part of it.”

*Cathy Fuchs, president,
White Willow Benefit Consultants Inc.*

“The employer could send the employee home with a case study of what happens if you don’t take or finish medications. Provide them with information on compliance. This could even go into a newsletter.”

*Susan Healey, senior consultant,
Cowan Wright Beauchamp*

**ADHERENCE AND DISEASE
MANAGEMENT IN A MID-SIZE
EMPLOYER ENVIRONMENT**

Twenty-four participants at three roundtables discussed the challenges and opportunities associated with disease management and benefit plan design in medium-sized companies. Using a case study as a starting point, they examined practical strategies covering a wide range of issues, from developing sound baseline measurements to designing effective education programs for employees.

MAJOR DISCUSSION POINTS

- A combination of short-term and long-term strategies and a mix of incentives and deterrents are necessary to improve patient accountability and drug plan compliance.
- Specific recommendations include: developing a reliable tracking system to measure absenteeism; creating wellness programs to promote lifestyle changes; surveying employees to determine their needs; and properly educating employees about drug costs, changes to benefits and non-drug healthcare options.
- The benefits of a disease management plan won’t be seen in the short term, but will be evident five or 10 years down the road. Quick-fix solutions do not provide sustainable savings.

CHALLENGES AND OPPORTUNITIES**I. Define the baseline**

- Hard data help mid-size employers position themselves for change and build a business case that will target areas with the biggest return on investment.
- That said, compliance is difficult to measure accurately, and absenteeism shouldn’t be examined without also looking at the reason behind the absence. Presenteeism is even more difficult to quantify.
- To develop effective disease management programs, plan sponsors need to define a baseline for measurement, including current data and “do-nothing” projections of absenteeism rates, member and dependent demographics, benefit usage (by person, age and gender) and usage of employee assistance programs.
- The baseline should take into account industry comparisons, aggregate data on compliance and results from employee surveys.

WHAT WAS SAID

“Even follow-up phone calls are very useful. A lot of times, people drop their new therapies early on—for instance, mental illness medication is often abandoned because of the side effects.”

*Christine Ling, director external relations,
Ontario Pharmacists' Association*

“I think most people won't be motivated by dollars to become healthy. They'll be motivated by how they feel.”

*Chris Bonnett, president,
H3 Consulting/Business Health*

“If the cost of stage one is minimal, employers might be willing to try implementing a [disease management] benefits program. Employers have to start off with small programs and build up to extensive programming.”

Robert Reid, partner, Aultis Solutions

2. Maintain privacy

- Privacy rules not only restrict the data available to employers, but also make it difficult to target people for compliance programs while respecting their confidentiality.
- Solutions include having employees register for wellness programs through a third party, such as benefits consultants or pharmacists, and scheduling lunch and learns on sensitive topics, such as depression, outside the office.

3. Achieve buy-in

- Employees can be encouraged to accept benefit plan changes using strategies such as pilot groups, health spending accounts and internal wellness surveys (the results should always be communicated to plan members).
- Senior management must buy in as well—and have reasonable expectations. Investing in disease management is a long-term proposition. Executives must also be proactive, addressing stress drivers in the workplace and favouring programs that will benefit the most number of employees.

4. Keep costs in check

- Wellness projects don't have to be big investments—step counters (to encourage walking), wellness newsletters, and lunch and learn seminars can be effective and inexpensive. Pharmacies and organizations such as the Heart and Stroke Foundation can supply facilitators to deliver presentations.
- Starting small is the best approach for mid-size companies.

4. Educate and communicate

- Communication strategies must overcome barriers in location, if the company is geographically dispersed, and sometimes language. The message must also reach beyond employees to their dependents.
- Education could include one-on-one counselling with healthcare professionals, such as pharmacists, over a period of several weeks. Group sessions can work well for common subjects, such as stress management.
- Communication of corporate initiatives must extend to local pharmacists, who can help to improve compliance rates by making follow-up calls and tracking refills.

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