

Drug System Secretariat, Ontario
Ministry of Health, Helen Stevenson

Jeff May of Shoppers Drug Mart



solutions in drug plan management

Searching for drug plan solutions

by Tanya Stuart

Education and communication were two themes that quickly emerged from a conference devoted to improving drug-plan management. Most participants agreed that in order for benefits programs to be sustainable, everyone involved must have all the information necessary to manage—and use—them wisely.

Participants in the sixth annual Solutions in Drug Plan Management conference gathered in Toronto in mid-June to hear and discuss ideas regarding a “Roadmap to Adherence.” Roundtable discussions brought together pharmacists, plan sponsors, insurers, benefits consultants, and managers and representatives from unions and patient groups. Karen Welds, business development manager for the Pharmacy Group at Rogers Publishing and the event’s facilitator, noted that the “shared objective” of the diverse stakeholders was “to improve the health of employees in the workplace, and in so doing better manage the growing costs of drug and other health benefits.”

The event kicked off with a keynote address from Marc Kealey, CEO of the Ontario Pharmacists’ Association, who warned plan sponsors and their consultants to get serious about long-term strategies in adherence and disease management. The event also included a panel discussion with presentations from pharmacist experts in adherence and drug-plan optimization.

Chris von Heymann and Mike Sullivan, principals of Cubic Health, a Toronto-based drug-plan management and clinical-integration company, discussed positioning in terms of successful plan management. Dorothy Pardalis, pharmacist and president of Proactive Health Strategies, recounted successes with the ongoing Essex County Asthma Care Strategy and the benefits of improved adherence in asthma. Barry Bunting, clinical manager of the pharmacy department with Mission Hospitals, North Carolina, and Asheville project coordinator, described the Asheville Project, a real-life partnership between employers and pharmacists that

has achieved significant, documented savings for patients with diabetes, asthma, high blood pressure and high cholesterol.

Roundtable discussions focused on the challenges of implementing wellness and disease-management programs—how to get employees and employers on board; the need to analyze drug-utilization data and target disease-management plans on areas with best potential for payback; and getting employees to change their view of benefits programs from one of entitlement to engagement.

Participants noted that while it makes sense to move towards wellness programs for employees (noting the aging population and the prevalence of chronic diseases such as diabetes and asthma), it’s

still a hard sell to get senior management and executives to agree.

“Senior management wants to see results. Wellness and disability are long-term solutions, rather than quick fixes,” noted Sherry Peister, pharmacy consultant with S.A. Taylor Holdings, Inc. However, there was the acknowledgement that wellness programs would benefit companies by eventually creating happier, more productive employees.

“I don’t think wellness is a retention tool. I think it reduces absenteeism and increases

productivity among the employees. The driving factor is productivity,” said Ken Stewart, manager, pension and benefits, at NCR Canada. The problem is getting the data to prove this, and to show where the wellness and disease-management programs will be most beneficial.

“Once you have the data, it will point you directionally, i.e. we have a utilization problem or it’s just a function of increased costs based on drug increase prices within the mix. So then the next question is what do I do about that?” said Jeff

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Panelists Dorothy Pardalis and Barry Bunting



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May, vice-president, pharmacy, professional affairs, with Shoppers Drug Mart. And while there are companies such as Cubic Health that will help mine this type of data, there is still the issue of attracting employees to targeted programs.

Noted Sandy Warmington, manager benefits Canada at Ikon Office Solutions, Inc., "A lot of partners are working together to provide health and wellness

programs. It's getting employees to accept responsibility for their own health that is the challenge."

Ultimately, most participants agreed on the need for education and communication on all sides. Employers first need access to data that show them which types of employee wellness programs or disease-management programs would have the greatest impact, and the employees need to be educated about their plans, their cost and how they work in order to truly see the value of the drug

SDM pharmacist Kathy Djordjevic and Mike Sullivan of Cubic Health



plan. "I'd like to see the 'e' word change from entitlement to engagement. Employees need to understand the costs," said Steve Boris, benefits manager at Four Seasons Hotels.

In acknowledging how pharmacists can make a significant impact on drug-plan management and wellness programs, Guy Pouliotte, Public Service Health Care Plan Trust, private healthcare plans, summed up the situation: "One of the challenges we've had as a society, employers,

government, members ... the only common thread we have is cost and as long as that is the common thread, we're not going to make progress. We have to find that common theme that will make plan sponsors sit down with pharmacists."

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Study 2	15.0	10.0	12.0	7.0	18.0	12.0
Study 3	18.0	12.0	15.0	9.0	20.0	14.0
Study 4	20.0	14.0	18.0	11.0	22.0	16.0
Study 5	22.0	16.0	20.0	13.0	24.0	18.0

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