Results
• There were a total of 68 prescribers and 319 patients (41.9% female, mean age 41.9, SD 13.9) that met the inclusion criteria for direct intervention.
• The total pharmacy spend was $223,627 and $249,910 during the 3 month pre and post period respectively, resulting in a 12% increase in total pharmacy spend and a 22% increase (p<0.0001) in pharmacy spend related to antipsychotic medications.
• Average adherence, measured by the proportion of days covered (PDC) over the 90 day time period for antipsychotic medications, increased from 56% to 72% during the post period respectively (p<0.0001).

Methods
• Prescribers were identified and targeted based on pharmacy and medical claims data that showed patients at least 7 days late in filling their antipsychotic medications.
• Intervention methods for consultations included face-to-face visits, e-mail and direct mailings.
• During interventions conducted between December 2014 and March 2015, prescribers were asked to work with patients to understand the root cause of medication non-adherence, offer education, consider prescribing a long-acting injectable, and provide the patient with tools to prompt him or her to take their medication as prescribed.
• Pharmacy claims of identified patients were extracted 3 months pre and post intervention, where the intervention date served as the index date for this study.
• We performed a cross sectional analysis comparing the three month pre intervention pharmacy claims to the three month post pharmacy claims.
• Significance was calculated using the Wilcoxon signed ranked test for paired data. A significance threshold of p<0.05 was employed. All performed tests remain uncorrected for multiple testing.

Conclusion
• Identifying and targeting prescribers based on pharmacy and medical claims data, and performing interventions have produced positive outcomes related to the adherence of antipsychotic medications.
• The observed increase in pharmacy spend, may be an artifact of patients becoming more adherent to their prescribed antipsychotic medications.
• Ongoing research is in process to assess the impact of the intervention on hospital utilization and total medical spend.

References