

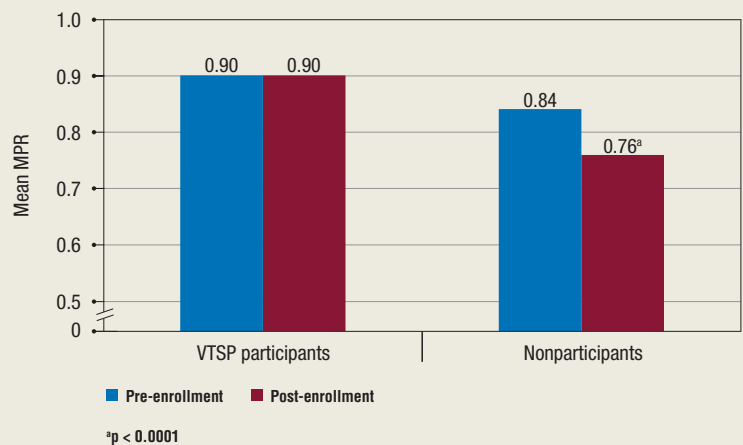
Case Study

Voluntary Tablet Splitting Program (VTSP) Reduces Costs and Maintains Adherence

Results at a Glance

- Savings on prescription costs yielded an average return on investment of 5-to-1 for clients who offered the Walgreens Health Initiatives VTSP in 2007.
- The average savings on prescriptions per year for participating members was \$93.78.
- Participants are more likely than others to keep taking their maintenance medications as prescribed. Participants maintained a medication possession ratio (MPR) of 0.9 while the MPR for others dropped from 0.84 to 0.76.

Comparison of Mean MPRs



Business Challenge

The costs of some expensive maintenance medications are similar regardless of tablet strength. For these medications, a lower-strength tablet can cost the member and the plan as much as a higher-strength tablet. This can be viewed as a cost-savings opportunity rather than a pricing challenge. The number of people who take their maintenance medications as prescribed tends to decrease over time, especially for asymptomatic conditions.¹ Some have questioned whether tablet-splitting programs contribute to that problem.

Our Solution

Walgreens Health Initiatives offers the VTSP for qualifying members taking selected medications. They purchase half the quantity of “double-strength” tablets and split them in half. This can reduce prescription unit costs by as much as 50 percent. For example, if members are taking one tablet daily of Lipitor® (atorvastatin) 40 mg, a cholesterol-lowering medication, they will split one tablet of Lipitor 80 mg and take one-half tablet daily. The member and the client can both benefit from the savings; the member pays a lower copay and the plan incurs lower drug costs.

To determine effects of the VTSP on adherence and persistency, we followed a group of 445 members taking a target medication, including selected cholesterol- and blood pressure-lowering medications and antidepressants, for nine months before VTSP enrollment and nine months afterward.²

Results and Program Savings

- Savings on prescription costs yielded an average return on investment of 5-to-1 for three clients who offered the Walgreens Health Initiatives VTSP for at least nine months during 2007.³
- The average savings on prescriptions per year for participating members was \$93.78.
- The percentage of members participating in this program for the three clients included in the study was 3.5 percent, 8.1 percent and 8.5 percent, respectively.
- Overall, medication adherence for members who participated in the VTSP, as measured by the mean MPR, remained unchanged at 0.9 nine months after program enrollment. In other words, VTSP participants received 90 percent of the medication that was prescribed for them during this period.
- In contrast, the mean MPR for members who were taking the same medication but were not enrolled in the VTSP decreased significantly from 0.84 to 0.76 during the same period.
- Persistency—the percentage of members who continued to take their medication without any 60-day-or-longer interruptions—increased from 87 percent to 90 percent for VTSP participants. At the same time, persistency declined significantly, from 87 percent to 64 percent, for those not enrolled in the VTSP.

Benefits

- Yields a savings of up to 50 percent per tablet-splitting prescription
- Targets high-cost maintenance medications
- Allows members to take an active role in reducing out-of-pocket costs through the use of copay incentives
- Offers a patient-friendly practice that may result in shared cost savings for plans and members
- Has a positive effect on medication adherence and persistency
- Promotes adherence to medication therapy, helping to reduce disease progression and the incidence of disease-related complications, which in turn helps control costs

A Note on Methodology

Deidentified pharmacy claims data were used to measure changes in adherence and persistency over a nine-month period before and after program enrollment. Members who were taking at least one of the target medications for a minimum of 60 days in the previous 100 days before identification were included in the study. Adherence and persistency of members who were eligible for the VTSP but declined enrollment were also evaluated for comparison purposes. Members without continuous prescription coverage throughout the study period were excluded.

Notes

1. Benner S, Glynn RJ, Mogun H, Neumann PJ, Weinstein MC, Avorn J. Long-term persistence in use of statin therapy in elderly patients. *JAMA*. 2002;288(4):455-461.
2. Ko M, Sanchez-Cosio R, Khandelwal NG, Jiang J, Jung E. Impact of an incentivized voluntary tablet splitting program on adherence and persistency. Poster presented at: Academy of Managed Care Pharmacy's 20th Annual Meeting; April 16-19, 2008; San Francisco, CA.
3. Individual ROI results depend on member utilization of medications targeted by the VTSP, their respective savings potential, member participation rates, benefit design and client fees.

Let us model and estimate the Voluntary Tablet Splitting Program's cost savings based on your targeted medication utilization and benefit design. Call 800-926-6779, email whi@walgreens.com or visit us at WalgreensHealth.com/pbmcs.