

# The Impact of Patient Assistance on Access, Medication Adherence and Quality of Life

## ACCESS TO TREATMENT AND MEDICATION ADHERENCE

Financial support from patient assistance programs helps patients begin and adhere to medically-necessary treatment. The most convincing evidence that these programs bolster access to treatment comes from patients themselves.

In 2018, the Patient Access Network (PAN) Foundation, a charitable patient assistance program, conducted a survey of 1,459 patients who received financial assistance from PAN to cover the out-of-pocket costs for their prescription medications.

### BEFORE RECEIVING FINANCIAL ASSISTANCE

More than four out of ten patients reported skipping doses or taking smaller doses of their medications because they couldn't afford to take the full dose prescribed by their healthcare provider. Access to prescription medications is especially difficult for people with low incomes. Among those who received financial assistance from PAN and had annual incomes less than \$25,000, 54% said they skipped doses or took smaller doses of their prescribed medications.

### AFTER RECEIVING FINANCIAL ASSISTANCE

After receiving financial assistance, 93% of patients said they were much more likely to take their medications as prescribed. Healthcare providers and pharmacists agreed with their patients: more than 80% said that financial assistance makes it more likely that patients will take their medications as prescribed and improve their health.

### WHAT THE RESEARCH SHOWS

Data from the PAN Foundation's 2018 patient survey mirrors what researchers have known for a long time—high out-of-pocket costs prevent people from accessing medically necessary treatments. Published research from the Kaiser Family Foundation (KFF) shows that nearly half of Americans say they are somewhat or very worried about being able to afford prescription medications. Twenty-one percent of Americans report that they, or someone in their family, did not fill a prescription because of cost, with that figure rising to 30% among people with low incomes and 44% among people in poor health. KFF also found that high out-of-pocket costs reduce medication adherence. Sixteen percent of Americans cut pills in half or skipped doses of their medications due to cost, and this rises to 25% among people with low incomes and 35% among people in poor health.<sup>1</sup>

Additional research confirms that high out-of-pocket drug costs limit access to treatment for patients with a wide variety of health conditions.<sup>2,3,4</sup>

## QUALITY OF LIFE

Financial support from patient assistance programs improves the quality of life for patients and their families, makes patients feel that their health is more likely to improve and helps patients and their families better manage other expenses.

### PATIENTS REPORT SIGNIFICANT IMPROVEMENTS IN THEIR QUALITY OF LIFE

Nine out of ten patients who received financial assistance from the PAN Foundation said it improved their quality of life, decreased stress for the whole family and had a positive impact on their family. In addition, 84% of patients reported that the financial assistance increased their ability to pay other medical bills.

### PROVIDERS SEE THE BENEFITS OF CHARITABLE ASSISTANCE

Healthcare providers and pharmacists recognize the positive impact financial assistance has on their patients' well-being: over 90% reported that financial assistance decreases stress for and has a positive impact on patients' families, improves patients' quality of life and increases their ability to pay for both medical and non-medical bills.

### WHAT THE RESEARCH SHOWS

Research validates what patients and providers reported in the 2018 PAN Foundation Survey: financial stress is associated with reduced adherence to treatment.<sup>5,6,7,8</sup> Patients with reduced financial burden for their out-of-pocket medication costs are better able to adhere to their prescribed treatment. This support reduces stress and improves the quality of life for patients and their families.

## THE SAFETY NET FILLS A CRITICAL GAP

Even with financial support from patient assistance programs, patients report ongoing concerns about the cost of their treatment.

- 83% of patients who received financial assistance still worry about the financial problems they will have in the future because of the cost of their illness or treatment.
- Four out of five patients said their out-of-pocket medical expenses were higher than expected.
- 40% of patients have concerns about keeping their jobs because of their illness.
- Only 10% of patients are certain they have enough money in savings, retirement or other assets to cover the cost of their treatment

### WHAT THE RESEARCH SHOWS

Published research from the Commonwealth Fund, the National Council on Aging and the Annals of Internal Medicine demonstrates the extent of economic insecurity among older adults, the extreme difficulties patients face accessing needed treatments, and how healthcare costs impact the underinsured.<sup>9,10,11</sup>

Patient assistance programs ensure that individuals with inadequate insurance coverage can access needed prescription medications.<sup>12</sup> Until policies are enacted that ensure patients can access needed treatments, patient assistance programs will continue to play a critical role in the healthcare safety net.

## REFERENCES

- <sup>1</sup> DiJulio B, Kirzinger A, Wu B, Brodie M. Kaiser Family Foundation. Data Note: Americans' Challenges with Health Care Costs. Available at: <https://www.kff.org/health-costs/poll-finding/data-note-americans-challenges-with-health-care-costs/>.
- <sup>2</sup> Hoadley J, Neuman T, Cubanski J. The cost of a cure: Revisiting Medicare Part D and hepatitis C. Health Affairs Blog, November 3, 2016. DOI: 10.1377/hblog20161103.057356.
- <sup>3</sup> Doshi JA, Li P, Ladage VP, Pettit AR, Taylor EA. Impact of cost sharing on specialty drug utilization and outcomes: a review of the evidence and future directions. *Am J Manag Care*. 2016 Mar;22(3):188-97.
- <sup>4</sup> Li P, Wong Y, Jahnke J, Doshi JA. Association of high cost-sharing and target therapy initiation among Medicare patients with metastatic renal cell carcinoma. *J Clin Oncol* 2016;34(15 suppl):4562-4562.
- <sup>5</sup> Patel MR, Piette JD, Resnicow K, Dowalski-Dobson T, Heisler M. Social determinants of health, cost-related non-adherence, and cost-reducing behaviors among adults with diabetes: findings from the National Health Interview Survey. *Med Care*. 2016 Aug; 54(8): 796–803.
- <sup>6</sup> Zafar SY. Financial Toxicity of Cancer Care: It's Time to Intervene. *JNCI* 2016 May; 108(5). doi: 10.1093/jnci/djv370.
- <sup>7</sup> Doshi JA, Li P, Pettit AR, Armstrong KA. Association of Patient Out-of-Pocket Costs With Prescription Abandonment and Delay in Fills of Novel Oral Anticancer Agents. *J Clin Oncol*. 2018 Feb 10;36(5):476-482.
- <sup>8</sup> Goldsmith LJ, Kolhatkar A, Popowich D, Holbrook AM, Morgan SG, Law MR. Understanding the patient experience of cost-related non-adherence to prescription medications through typology development and application. *Soc Sci Med*. 2017 Dec;194:51-59.
- <sup>9</sup> Schoen C, Solis-Roman C. On Medicare But At Risk: A State-Level Analysis of Beneficiaries Who Are Underinsured or Facing High Total Cost Burdens. Available at: <https://www.commonwealthfund.org/publications/issue-briefs/2016/may/medicare-risk-state-level-analysis-beneficiaries-who-are>.
- <sup>10</sup> National Council on Aging. Economic Security for Older Adults. Available at: <https://www.ncoa.org/news/resources-for-reporters/get-the-facts/economic-security-facts/>.
- <sup>11</sup> Shrank WH, Choudhry NK, Fischer MA, Avorn J, Powell M, Schneeweiss S, Liberman JN, Dollear T, Brennan TA, Brookhart MA. The epidemiology of prescriptions abandoned at the pharmacy. *Ann Intern Med*. 2010;153(10):633-40.
- <sup>12</sup> Johnson PE. Patient assistance programs and patient advocacy foundations: alternatives for obtaining prescription medications when insurance fails. *Am J Health Syst Pharm*. 2006 Nov 1;63(21 Suppl 7):S13-7.