

NCL MEDICATION ADHERENCE CAMPAIGN FREQUENTLY ASKED QUESTIONS | 2013

1. WHAT EXACTLY IS MEDICATION ADHERENCE?

Adhering to medication means taking the medication as directed by a health care professional – whether taken in pill form, inhaled, injected, or applied topically.

Taking medication correctly may seem like a simple or personal matter, but non-adherence is a very complex and widespread problem. Many people never fill their prescriptions, or they may never pick up their filled prescriptions from the pharmacy. Other people bring their medication home, but don't follow their health care practitioner's instructions – they skip doses or stop taking the medicine. There are many reasons why people choose not to take their medication as directed, but the result is always the same – they don't receive the therapy that their health care practitioners have prescribed for them. In many cases, this means missing out on life-saving benefits and a better quality of life, and losing protection against future illness or serious health complications.

2. WHY DO A WHOLE CAMPAIGN ABOUT MEDICATION ADHERENCE?

Nearly three out of four Americans report that they do not always take their medications as directed, leading to serious health consequences and avoidable costs. And as more and more Americans are affected by at least one chronic condition, the costs continue to grow. **The total costs of non-adherence amount to at least \$300 billion a year**, including costs from medical complications and hospital readmissions. Our country needs a comprehensive, integrated campaign with cooperation from a variety of stakeholder groups to raise awareness of this critical health issue. Poor medication adherence is everyone's problem – and it's going to take a united effort to solve it.

3. WHAT IS THE GOAL OF THE CAMPAIGN?

The goal of *Script Your Future* is to raise awareness among consumers and their family caregivers about the importance of taking medication as prescribed as a vital first step toward better health outcomes. The campaign focuses on patients affected by three serious chronic conditions – diabetes, respiratory disease, and cardiovascular disease. It encourages patients and health care professionals to better communicate about ways to improve medication adherence.

4. WHAT KIND OF CAMPAIGN IS SCRIPT YOUR FUTURE?

The campaign is a multi-year, research-based public education effort targeting consumers with chronic conditions, their family caregivers, and health care professionals. The effort includes coordinated national communications and targeted outreach efforts in six cities – Baltimore, MD; Birmingham, AL; Cincinnati, OH; Providence, RI; Raleigh, NC; and Sacramento, CA. Additional cities/regions may be added to the effort as the campaign progresses. Public and private stakeholders help raise awareness by disseminating campaign messages through their networks.

The campaign launched on May 11, 2011 and will continue for at least three years. For more details about the campaign, please visit the web site at www.ScriptYourFuture.org

5. WHAT CAN HEALTH CARE PROFESSIONALS DO ABOUT MEDICATION ADHERENCE?

If you are a health care professional (HCP) and would like help talking to your patients about taking their medications as prescribed, visit our HCP website and main web site at www.ScriptYourFuture.org to learn more about available campaign tools and resources, including journal articles on medication adherence and how it can be improved.

6. WHAT CAN PATIENTS AND CAREGIVERS DO IF THEY HAVE PROBLEMS WITH MEDICATIONS OR QUESTIONS ABOUT MEDICATION ADHERENCE?

If patients have any issues with their medicine that prevent them from taking it as prescribed, they should start by talking to a doctor, pharmacist, nurse, or other health care professional to learn about options or tools that can help. They can also visit www.ScriptYourFuture.org to find tools such as free medication reminders via text messages; sample questions to ask health care professionals; lists and charts to keep track of medicines; interactive videos and fact sheets on targeted common chronic conditions, including diabetes, asthma, high blood pressure and high cholesterol.

7. WHAT KIND OF RESEARCH IS THERE TO BACK UP THIS CAMPAIGN?

Script Your Future was in the making for more than two years and is grounded in solid research on the issue of adherence. The National Consumers League conducted focus groups with patients and health care professionals on the barriers to adherence and a qualitative web survey to measure consumers' knowledge of adherence as well as their adherence levels. In addition, a [briefing paper](#) on medication adherence in the United States was released at the launch. The briefing paper highlights the problem of non-adherence, the consequences of non-adherence, and the need for a campaign to encourage dialogue between health care providers and their patients regarding adherence.

8. WHY IS THE NATIONAL CONSUMERS LEAGUE LEADING THIS EFFORT?

As America's oldest consumer organization, the National Consumers League has advocated for consumer interests since 1899, providing government, businesses, and other organizations with the consumer's perspective on a range of concerns – including medication information. From this position as an advocate organization, NCL is leading the charge on organizing stakeholders, and so far more than 130 diverse stakeholders have come to consensus on a campaign plan. The National Consumers League will direct and lead the campaign, with ongoing input, guidance, and support from Committed Partners (see main website for a full list).

9. WHAT IS THE GOVERNANCE STRUCTURE FOR THE CAMPAIGN?

NCL is accountable for convening, coordinating and managing all campaign activities, with the advice and support of the campaign Operating Committee. The Operating Committee is made up of the co-chairs from three working groups and government representatives. Under the Operating Committee, there are three Working Groups that meet regularly and represent the perspectives of

various stakeholders: Chronic Condition Outreach, Health Care Practitioner Outreach, and Campaign Evaluation. Various government agencies and adherence researchers provide valuable insight about the extent and implications of non-adherence, and help to communicate important messages. Finally, our Committed Partners work to increase medication adherence by participating in campaign activities, attending meetings, and making financial and/or in-kind contributions.

10. WHAT WILL THE CAMPAIGN MEASURE, AND HOW WILL NCL KNOW IF IT WORKED?

This campaign will measure awareness of medication adherence – nationally and in a few select cities. We conducted a national and target market baseline survey in spring 2011 to measure basic awareness of medication adherence as a health issue, as well as communication between patients and health care professionals, and compare those results to another survey planned for the end of the campaign. By measuring knowledge about medication adherence and the number of people who believe it to be an important health concern, as well as communication with health care professionals, we can measure the reach and effectiveness of our efforts.

NCL will also look at the following:

- Quantitative and qualitative communications metrics - including web analytics and media coverage
- Committed Partner Engagement
- Research and Data Partnerships as possible

Based on these metrics, we will track how consumers have been exposed to the importance of medication adherence. We will be successful if more patients who have chronic conditions are now aware of the importance of taking meds as directed.

11. WHERE DOES THE FUNDING FOR THE CAMPAIGN COME FROM?

NCL has brought together more than 130 public and private stakeholder organizations to develop and implement the campaign. To date, financial supporters include health care professional organizations, federal government agencies, pharmacists and pharmacies, patient groups and pharmaceutical companies. A list of [financial sponsors](#) is available on the website.

12. WHY DOES THE CAMPAIGN FOCUS SPECIFICALLY ON DIABETES, RESPIRATORY DISEASE AND CARDIOVASCULAR DISEASE?

Seventy-five percent of health care spending goes toward care for people with chronic conditions. The importance of medication adherence can apply to any condition, but for this campaign we chose to focus on three chronic conditions where adherence is especially important to good health outcomes. Diabetes, respiratory disease (asthma and COPD) and cardiovascular disease (high blood pressure, high cholesterol and heart disease) are chronic conditions that affect millions of Americans and cost hundreds of millions of dollars every year to treat, but which also have an established medication component that can help prevent complications and future illness.

**13. HOW WILL *SCRIPT YOUR FUTURE* ADDRESS THE BARRIER OF COST OF PRESCRIPTION MEDICINE?
HOW CAN PEOPLE BE ADHERENT IF THEY CAN'T AFFORD THEIR PRESCRIPTIONS?**

There are many reasons people do not take their medication as directed – and cost is certainly one of them. But from our research, which informed the *Script Your Future* campaign, cost is not the primary barrier. We did find, however, that conversations between health care professionals and patients are critically important, no matter why someone is choosing not to take prescribed medicine. That is why we are focused on raising public awareness about the issue of medication non-adherence and its consequences and encouraging dialogue between health care professionals and their patients. If people have questions about cost, we have provided links and tools on the campaign website www.ScriptYourFuture.org.

14. HOW CAN THE CAMPAIGN BE BOTH NATIONAL IN SCOPE AND FOCUSED IN CERTAIN CITIES?

We know medication adherence is an important issue all over the country, so this campaign will involve a national survey and national media to raise awareness about adherence. We will also work with national partners, including health care organizations and practitioner groups, to share campaign messages and resources through their networks across the country.

Our efforts in specific cities will reflect the national messages while complementing existing local medication adherence efforts and providing additional supports, such as local coalitions committed to improving adherence. What we learn from our work on the local level can help inform and improve the national campaign.

15. HOW DID NCL CHOOSE THE CITIES FOR THE CAMPAIGN?

We used specific criteria determined by the campaign stakeholders to help identify cities where the campaign can have the greatest impact. These criteria included media market size, local prevalence of target chronic diseases, geographic diversity, demographic diversity, local presence of partner organizations, and local presence of other complementary efforts or organizations related to medication adherence. For our six initial cities, we chose Baltimore, MD; Birmingham, AL; Cincinnati, OH; Providence, RI; Raleigh, NC; and Sacramento, CA.

16. HOW CAN MY ORGANIZATION GET MORE INVOLVED IN LOCAL CAMPAIGN ACTIVITIES?

The first step to getting more involved in this campaign is to become a Committed Partner – a sign-up form is available [here](#). If your organization is located in one of the six target cities (see above), NCL will connect you with the campaign coalition in your area to learn more about participating in specific campaign activities.

**17. WHAT DOES IT MEAN TO BE A STAKEHOLDER OR COMMITTED PARTNER OF THE CAMPAIGN?
HOW DO I BECOME ONE?**

Stakeholders are any organizations, agencies, and companies that have an interest in improving health and want to help improve medication adherence. Committed Partners are stakeholders that have officially signed on to demonstrate their support for the campaign, whether by contributing in-kind through participation in working groups and expert input or through financial contributions.

Committed partners agree to honor and follow the campaign guiding principles, which you can access [here](#).

Campaign Partners also realize valuable benefits from their participation, such as shaping the campaign through membership in working groups and committees and gaining access to messaging and materials for distribution to their constituencies. If your organization is interested in joining the campaign, you can access the sign-up form [here](#).

18. HOW WILL *SCRIPT YOUR FUTURE* PUBLICLY RECOGNIZE THE CAMPAIGN'S COMMITTED PARTNERS?

The National Consumers League relies on its Committed Partners to promote and extend the reach of the *Script Your Future* campaign – and we publicly acknowledge their participation in campaign materials and on our [website](#).

19. HOW CAN COMMITTED PARTNERS COMMUNICATE WITH EACH OTHER AND RECEIVE CAMPAIGN UPDATES?

There are a variety of ways for Committed Partners to communicate and receive updates about the campaign – including a monthly e-newsletter, customized social networking site, and regular calls/meetings. All of these resources are available to Committed Partners only.

20. HOW IS THE GOVERNMENT INVOLVED IN THE CAMPAIGN?

A number of government agencies have pledged their support for this campaign, and will assist NCL in advisory roles and by helping to disseminate adherence tools and resources. The Agency for Healthcare Research and Quality provided the initial planning funds for the campaign; NCL is also working with the Department of Health and Human Services, Food and Drug Administration, FDA Office of Women's Health, and the Office of the Surgeon General. Surgeon General Dr. Regina M. Benjamin, is deeply committed to the issue of medication adherence and has been a keynote speaker at campaign events, and has made public service announcements for the campaign.

21. IS THE CAMPAIGN SAYING THAT MEDICATION IS THE ONLY WAY TO KEEP HEALTHY? SHOULDN'T THIS BE ABOUT ALL THE OTHER THINGS PATIENTS DO TO STAY HEALTHY?

No. We understand that medication is just one component of managing a chronic condition. That's why the campaign creative puts the focus on the patient, rather than the pills. It's also why the campaign messaging will always say that taking medication as directed is just part of managing a chronic condition.

However, this campaign is about medication adherence. The campaign goal is about improving awareness about adherence, specifically, so we need to keep the focus on that aspect of chronic disease management. To try to address other aspects such as physical activity, healthy eating, etc., while important, will be confusing and dilute our message.