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Diabetes medication program continues

By Jean Dolega

Human Resource Communications

An innovative University pilot program, called MHealthy: Focus on Diabetes, concluded at the end of 2008. The program allowed faculty, staff and dependents enrolled in the U-M Prescription Drug Plan who have any form of diabetes to receive some of their medications with no co-pays or reduced co-pays. More than 3,500 members participated.

Due to the preliminary success of the pilot and to allow time for further study, the diabetes drug cost-reduction program will continue for three years — with some modifications — as part of the U-M Prescription Drug Plan administered by SXC Health Solutions.

The pilot program, which began July 1, 2006, was the first in the nation designed specifically to evaluate the impact of targeted co-pay reduction for preventive medications. Although several companies have reduced or waived co-pays as part of employee health promotion or disease management programs, and at least one has reported cost savings linked to such programs, until now the specific impact of reduced drug co-pays had not been measured.

While all members of the U-M Prescription Drug Plan are eligible to receive insulin and diabetic supplies with no co-pay, participants in the Focus on Diabetes program were charged no co-pay for certain drugs that control blood sugar, lower blood pressure, cut the risk of heart and kidney problems and ease depression. All of the drugs chosen for no co-pays have been shown to help prevent diabetes complications that can be debilitating or fatal. Co-pays for other drugs in the same classes were reduced by 50 percent or 25 percent.

Under the modified program effective Jan. 1, active faculty and staff and their dependents using a prescription for insulin or an oral anti-diabetic medication automatically will be enrolled in the cost-reduction program. Participants will receive reduced co-pays on prescriptions for oral anti-diabetic medications, anti-hypertensive medications and medications for the treatment of high cholesterol. Co-pay reductions for antidepressants included in the pilot will not continue in 2009, and co-pay reductions will end for those members who "opted-in" as diet-controlled patients with diabetes. U-M retirees will remain ineligible because their adherence to diabetes medication regimens already is excellent.

The concept for the program came from U-M research that has shown the potential health value of removing any cost barrier that might keep people with some chronic illnesses from getting beneficial medications, tests and screenings. U-M research also has suggested that the approach may save individuals, employers, insurers and society money in the long run, by preventing or delaying costly medical complications.

The groundbreaking program received state and national recognition. U-M was one of 10 Michigan employers honored by state lawmakers in Lansing on Diabetes and Kidney Advocacy Day, April 24, 2007, for making significant commitments to promoting employee wellness through programs and policies that focus on prevention and disease management. The legislative tribute recognized the work to improve the health and welfare of employees and the greater Washtenaw County community. It was signed by Gov. Jennifer Granholm on behalf of the 94th Legislature of the State of Michigan. The program also received one of two Driving Value in Health Care Awards at the Advancing Value Driven Health Care Incentives and Rewards Symposium in Philadelphia in May 2007.

The evaluation component of the program currently underway is headed by Dr. Allison Rosen, assistant professor of internal medicine at the [Medical School](#) and one of the researchers whose work inspired the project. Rosen led a 2005 computer-model study, which showed that making certain drugs free to older individuals with diabetes would prevent health problems and premature deaths while ultimately saving money.

"Initial results of the pilot program showed medication uptake increased for all four categories of medications in the pilot," says Rosen, who also holds appointments at the [School of Public Health](#) and the VA Ann Arbor Healthcare System. "However, we recognize further study is needed over the long term, and I am pleased with the University's decision to continue offering a modified program for the next three

years."

"Our conclusion was that there was sufficient preliminary evidence for us to continue the benefit and review it again over a longer period of time," says Dr. Robert Winfield, chief health officer for the University and director of the U-M Health Service.

For more information on the diabetes medication cost-reduction the program, see the Benefits Office Web site at www.benefits.umich.edu/plans/drugs/special.htm#diabetes or call the SXC member services help desk at (866) 715-0874.

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