

Teaching High Value Medication Prescribing: A Case-Based Exercise

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Background

- Approximately 30% (\$750 billion annually) of U.S. healthcare spending goes to waste.¹
- 10% (\$260 billion) of U.S. healthcare costs can be attributed to prescription drugs.¹

Objective

- Equip medical students with a set of principles for improving value when managing patient medication lists.

Methods

- Third-year medical students were shown a case of an elderly female patient presenting with signs of heart failure exacerbation and a medication list of 15 items.
- Physician-led small groups discussed a series of questions focused on addressing value deficits in the medication list, as well as barriers to medication adherence.
- Students then collaborated to generate a list of guidelines for high value medication prescribing.
- Their respective lists were compared to the “7 Core Principles of High Value Prescribing.”
- Students were shown how to utilize and access Choosing Wisely guidelines as a resource for future reference.

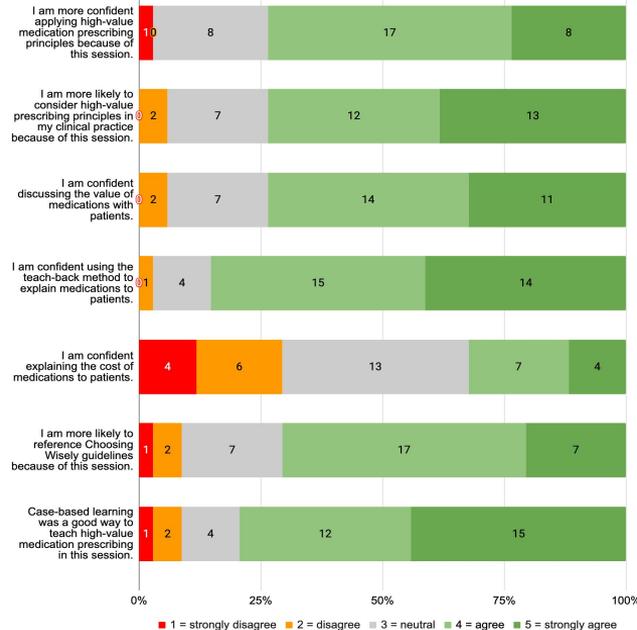
“7 Core Principles of High Value Prescribing”²

1. Have a compelling reason for each medication.
2. Keep the medication list short.
3. Evaluate affordability before starting a new prescription.
4. Prescribe generics when possible.
5. Collaborate with pharmacists.
6. Utilize the “teach-back” method to increase patient understanding.
7. Consider frequency of dosing as a compliance predictor.

Results

- A post-survey was conducted assessing student attitudes towards high value prescribing and the case-based session delivery.
- 34 students responded to the post-survey.

Figure 1.



Conclusions

- A single class impacted third-year medical student attitudes towards applying principles of value based care (VBC) within the context of medication prescribing.
- Student likelihood of referencing Choosing Wisely guidelines shifted from a single piece of instruction.
- Students expressed confidence in their ability to discuss medication value and utilize the “teach-back” method, but a relative lack of confidence in their ability to discuss cost.
- Students favored the case-based discussion format as a means of presenting this material.

Limitations

- This session was generated as a standalone session taught at a single institution by one set of instructors.
- No pre-survey data regarding the session was gathered, and extent of prior knowledge about VBC was not assessed.

Clinical Implications

- Teaching guiding principles for high value prescribing encourages medical students to optimize cost, minimize side effects, increase patient adherence, and eliminate unnecessary medications in their clinical clerkships and beyond.

References

1. Brown SR. The Why and How of High-Value Prescribing. Am Fam Physician. 2016 Feb 15;93(4):262-3. PMID: 26926812.
2. Adapted from the Aquifer High Value Care Module