

**Evaluation of the Senior Prescription Drug Assistance Program (“Senior Care”)**  
**Annual Report**  
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Given their increased risk of chronic disease, elders are prescribed multiple medications. Impediments to receiving prescription medications can negatively affect the health of these elders. The Health and Wellness Trust Fund Commission has contracted with the North Carolina Department of Health and Human Services (DHHS) to administer Senior Care; ACS will administer the Program for the Health and Wellness Trust. Senior Care offers eligible North Carolina elders increased *access to prescription medications* and insulin and, for those at high risk for medication problems, referral to a *medication management program* (for patients with a program funded by the Commission in their community).

Our evaluation plan proposes to assess the effect of Senior Care on patients’ access to medications and health outcomes. Specifically, we propose to evaluate the effect of Senior Care and the prescription assistance program on: (1) *Patients’ access to medications and related services*: penetration of the program (i.e., the proportion of eligible patients enrolled), barriers to prescription drug use, prescription drugs received, medication management referral, and changes in prescription drug coverage; (2) *Medication compliance*; (3) *Satisfaction with Senior Care*; (4) *Self-reported health status*; and (5) *Health services utilization*. There are two major components of the evaluation:

1. The first component involves *primary data collection*. Specifically, UNC personnel will conduct telephone surveys with a random sample of 1,000 enrollees. Follow-up telephone surveys will be conducted every 4 months for one year.
2. The second component requires administrative data provided to UNC by the Health and Wellness Trust. Specifically, for this component of the evaluation, the Health and Wellness Trust have agreed to provide us with:
  - *Critical data on **all** patients enrolled in Senior Care*: This includes data obtained at enrollment, annual re-enrollment, and administrative data collected during the first year after enrollment.
  - *Data from Prescription Assistance Centers*: These Centers will complete a standardized form for each contact with patients referred for medication management. These data will allow us to describe some effects of the program on all enrollees. These data will be provided to the UNC evaluation team.

**Progress to date:**

- We obtained IRB approval to enroll patients by telephone and conduct telephone interviews.
- We hired and trained telephone interviewers.
- All baseline telephone interviews have been completed. From a random sample of 1,761 Senior Care enrollees, we completed interviews with 1,000 persons (56.8%); 481 enrollees

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(27.3%) could not be reached after multiple attempts; 260 enrollees (14.8%) declined to participate; and 20 (1.1%) died prior to our attempt to contact them.

- Follow-up telephone calls are currently being conducted. We anticipate completing all follow-up telephone interviews surveys by September 2004. This time frame is consistent with our proposal.
- With the completion of enrollment, we are beginning to analyze baseline data on our sample..
- We are continuing to work with the Health and Wellness Trust to obtain administrative data necessary for our evaluation. Currently, Health and Wellness Trust is working with the Prescription Assistance Centers to develop HIPAA-compliant protocols that allow us access to these data. The Health and Wellness Trust Fund is also working with ACS to develop the mechanisms by which we can obtain administrative data from all enrollees. Assuming we can secure administrative data from the Health and Wellness Trust Fund, we can complete this portion of the evaluation.