

“Total Fear & Stress”

**The Impact of Non-Medical
Switching on Patients
Taking a Blood Thinner**



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Introduction

Millions of Americans with cardiovascular risk rely on blood thinners to manage conditions like atrial fibrillation, deep vein thrombosis and heart disease.

Without proper treatment, these conditions can cause heart attack, stroke or even death.

Each blood thinner works differently for each patient. Some patients taking traditional warfarin therapies have reported side effects like severe bleeding and bruising. Warfarin therapies also require significant dietary restrictions, including foods with vitamin K such as dark green vegetables which can make it difficult to eat a healthy diet. For these patients, moving to another type of blood thinner, such as a direct oral anticoagulant, may be necessary. For others, finding another type of warfarin therapy might work best. Each patient is unique, and it can take time for patients to find the right option. Once they do, they need to stay on the blood thinner that's right for them.

Unfortunately, health plans often have other priorities. Through a practice called non-medical switching, health plans switch patients off the medication prescribed by their doctor to another medication that boosts the insurers' profits. This can leave patients frustrated, disempowered and at risk of a serious cardiovascular event due to non-adherence.

To understand the effect that non-medical switching has on patients, the American Society for Preventive Cardiology conducted a national poll and convened two focus groups of cardiovascular patients on blood thinners.

The Importance of the Right Blood Thinner

While some patients find the blood thinner that works for them right away, others can spend months trying to find the right option. The process can be arduous, and patients place a high value on keeping the blood thinner that works for them.

Survey respondents said that they:

42% Had **TROUBLE FINDING** a blood thinner that worked well for them

94% **DEPEND ON** their blood thinner to go about their daily lives



83% Agree that **KEEPING** their blood thinner is important

96% Place a high value on **HAVING THE RIGHT** blood thinner

The Switch

Patients who were switched from the treatment that worked for them **LEARNED OF THE SWITCH:**



36%
at the pharmacy
counter



22%
in a letter from
their insurer



“All of a sudden,
my insurance didn’t
want to pay.”

“We get these
arbitrary decisions out
of nowhere and you’re
stuck with it.”

HEALTH INSURERS FORCED THE SWITCH BY:



94% Deciding to **NO LONGER COVER** the medication

83% **INCREASING** patients’ co-pay or out-of-pocket expenses

9% **REFUSING TO COUNT** patients’ co-pay card toward their annual deductible

“They were the judge
and jury. They didn’t
care about your
doctor’s decisions.”

Medical Impact

While non-medical switching helps health plans protect their bottom line, it's patients who pay the price. Patients found that the switch took a toll on their overall health, with respondents reporting:

Side Effects
28%

Resurfacing Symptoms
22%



Heart Attack
7%

Stroke
4%

PATIENTS ALSO REPORTED INCREASED:

- ✓ Bruising
- ✓ Administrative Hassles
- ✓ Wasted Time

PATIENTS ALSO REPORTED THAT, AFTER THE SWITCH, THEY REQUIRED:



43% Additional Doctor Visits

40% Additional Lab Tests

17% Additional Visits to the Pharmacy

5% Hospitalization



"Hours on the phone with insurance, doctor's office, and pharmacy. It was awful!"

"Dealing with the insurance company was worse than the disease."

"Insurance company doctors can't see the same information my doctor can see."

"I didn't feel comfortable switching from something that I know worked well."

Even more alarming, about 1 in 5 patients stopped taking their blood thinner altogether.



Impact on Daily Life

On top of medical consequences, patients reported an impact on their daily lives. Respondents said they:



Patients also reported that the switch took a toll on their mental health. They reported feeling:

Frustrated
65%



Anxious
65%

Confused
59%

Helpless
52%



“I was furious.”

“Total fear and stress.”

“It’s like [health plans] don’t care.”

“I had to go by what my health insurance pays for instead of what my doctor prescribes.”

“I’m still angry.”

“They’re not my doctor.”



Conclusion

People who take blood thinners have complicated health conditions. When health plans switch them off their prescribed treatment simply to boost profits, patients' health and well-being can suffer. On top of experiencing side effects, reemerging symptoms and additional doctor visits, patients face a mental and emotional impact.

Gaps in care can result in serious cardiovascular events.

Patients are frustrated and scared by insurance policies that put profits above patient health. These patients and their doctors work tirelessly to find the right treatment, only to be denied by health plans' one-size-fits-all approach to health care. To protect patients, treatment decisions must stay between doctors and patients.

Demographics

