WASTE SAVINGS ON HEALTH IN A VALUE-BASED DRUG SAFETY PROGRAM IN PATIENTS WITH CHRONIC HIGH-COST DISEASES

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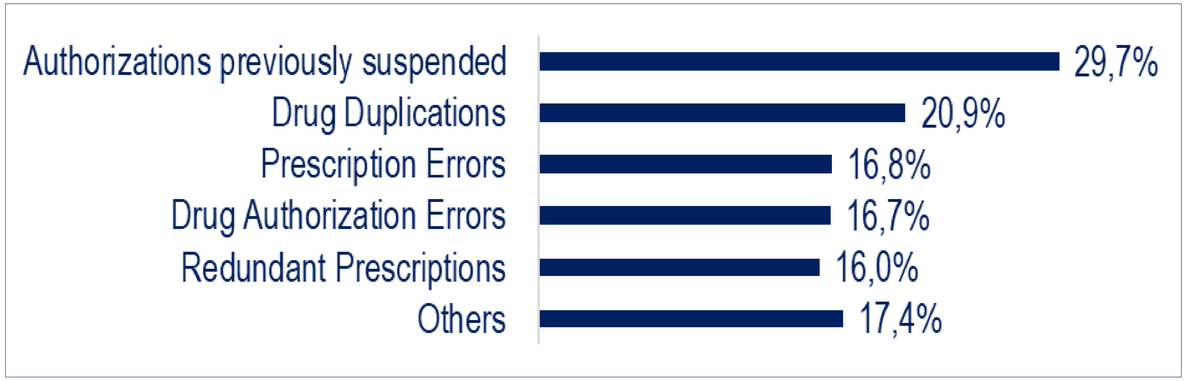
Currently, the cost of healthcare systems is very high, and a large part of healthcare spending is considered wasteful, mainly due to the use of unnecessary services, the use of costly and unprofitable technologies, and the duplication of services or administrative fragmentation.

Objective: to describe the savings generated through pharmaceutical care management of healthcare workers in patients with high-cost diseases.

Method: A descriptive observational study was conducted in June-November 2022, in a cohort of patients with high-cost chronic pathologies.
The pharmacists evaluated the patients' medical prescriptions to detect and manage pharmacological and administrative errors, through an articulation between the health services insurer and the pharmaceutical manager, to optimize pharmacological therapies and the rational use of health resources.
A univariate analysis was performed, with summary measures of central tendency, and relative and cumulative frequencies. The statistical package R Core Team Version 4.2 (2022) was used.

Results: During the period evaluated, an average of 127000 patients/month were attended, of which 36368 patients were evaluated by the pharmacist. A total of 6495 (17.9%) errors to intervene were detected, the patients had a mean age of 52 years (SD 22) and 55.7% were women.
The mainly errors identified were authorizations of drugs that had already been previously suspended by the treating physician, drug duplications, prescription errors, drug authorization errors, redundant prescriptions.

Other causes were patients with drug accumulation, deceased patients, and patients with expired prescriptions.



Pharmaceutical interventions represented savings equivalent to 3305848.24 USD (550974.71USD per month on average).
The drugs with the greatest savings corresponded to oncological drugs (1155481.44USD), drugs for the treatment of pulmonary hypertension (839235.07USD), hematological drugs (324283.07USD), hormonal therapies (256880.85USD) and biologics (212571.18USD).

Conclusion: The identification and management of prescription and authorization errors not only generate savings for the insurer's health, but also optimizes health resources and pharmacological therapies for patients, contributing to their safety.

Conflict of interest: none.