

Week 5: iHuman Reflection

- I. **Reflection:** Address the following questions: Review the Healthy People 2030 Health Care Access and QualityLinks to an external site. objective related to prescription medications. Consider how your treatment plan might change for anypatient who does not have insurance coverage for prescriptions. Choose one medication that could be prescribed for this patient either before or after hospitalization when returning to you for follow-up care. What is the cost of the medication? Is there a more affordable alternative? What resources are availableto patients in your area who do not have insurance coverage for prescriptions?

Healthy People 2030 (HP2030) has introduced a crucial initiative to reduce the number of individuals who cannot access prescription medications when needed (HP2030, n.d.). This effort highlights the alarming reality that untreated conditions can escalate into severe health complications when financial or logistical barriers prevent patients from obtaining necessary medications. To address this, HP2030 advocates for strategies to decrease financial challenges and expand insurance coverage, aiming to ensure equitable access to essential treatments for all (HP2030).

In developing a patient's treatment plan, it's vital to consider their insurance coverage and the affordability of prescribed medications. If a patient cannot afford their prescriptions, adherence to the treatment plan may falter, potentially exacerbating their condition. For example, this week's iHuman patient was prescribed ondansetron to manage nausea and vomiting. Without access to this medication, the patient risks intractable vomiting, which could worsen metabolic imbalances (Aka et al., 2021).

In cases where affordability is a concern, verifying the patient's insurance coverage is critical. For instance, the retail price for 20 tablets of ondansetron is \$97.92 (GoodRx, n.d.). If the patient lacks sufficient insurance coverage or funds, exploring cost-saving alternatives like prescription drug discounts or coupons could make a significant difference. GoodRx, a widely recognized program, offers a model—referred to as the "GoodRx Model"—that enables patients to purchase medications at reduced prices. These discounts result from negotiated rates between pharmacy benefit managers (PBMs) and pharmacies, benefiting uninsured patients by significantly lowering out-of-pocket costs (Curran et al., 2024). Using GoodRx, the cost of ondansetron could drop to as little as \$15 (GoodRx, n.d.), making the medication far more accessible for the patient.

References

Aka, A. A., Wright, J. P., & DeBeche-Adams, T. (2021). Small bowel obstruction. *Clinics in Colon and Rectal Surgery*, 34(04), 219-226.

Curran, J., Wang, Y., Kang, S. Y., Xuan, A., Anderson, G., Bai, G., & Alexander, G. C. (2024). Characteristics of prescription drug fills using pharmacy-pharmacy benefitmanager discount programs: The "GoodRx" model. *Value in Health*, 27(1), 35-42.