

Perceptions of Spacer Access in Michigan

Spacer Barriers Survey Results

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Background

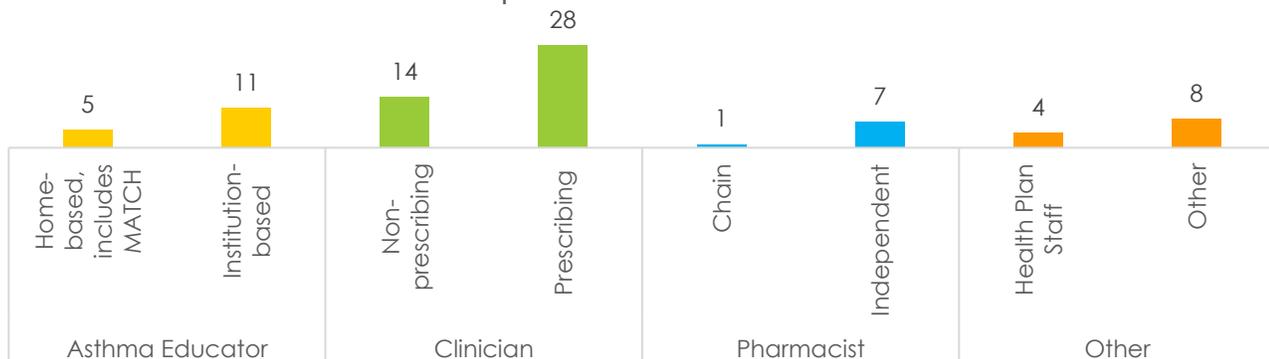
Deposition for asthma is the amount of a medication that is deposited into the lungs using any inhaled medication. The use of a spacer or valved holding chamber (referred to as spacer in remainder of document) with a metered dose inhaler drastically increases the deposition of medication into the lungs. The use of a spacer with a metered dose inhaler is part of the national asthma guideline recommendations, is an essential part of proper asthma medication delivery technique and an important factor for good asthma self-management. In Michigan, there is an evident issue with access to spacers even though state-based insurance plans (MI Medicaid) allow for up to four spacers per year at the pharmacy or durable medical equipment facility. Likewise, many commercial insurance plans also cover spacers; however, coverage varies plan to plan.

To determine barriers to spacer access in Michigan, the Michigan Asthma Prevention and Control Program (MiAPCP) conducted a survey in 2019 to capture perceptions of patient barriers to access of spacers from the provider perspective. The following report will detail the results of the conducted survey. Results were compared to a similar survey conducted in 2013.

Demographics

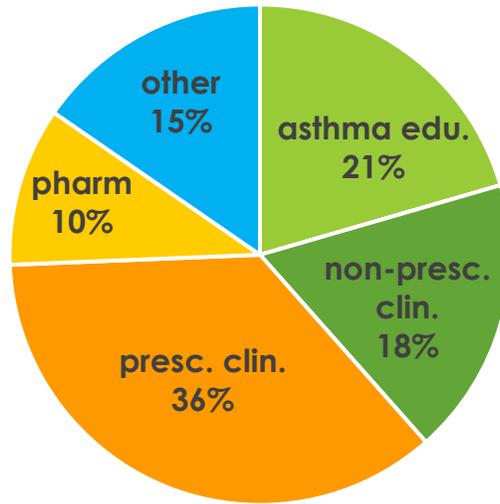
The spacer barrier survey was sent out via electronic link (administered via online survey platform survey monkey) to MiAPCPs Asthma News listserv containing a mix of asthma-related providers and professionals. This survey targeted individuals having any contact with spacers (prescribing, dispensing, educating, etc.) to garner perspectives throughout asthma-related care providers and professionals. The survey was structured with a core set of questions for all respondents, with additional questions specific to those respondents indicating their service provider type was a “prescribing clinician” or “pharmacist (chain or independent).” Skip logic functions were used to obtain physician and pharmacist specific question responses (see Appendix 1 for complete survey). The survey received 78 responses from a variety of service providers.

Respondent Profession





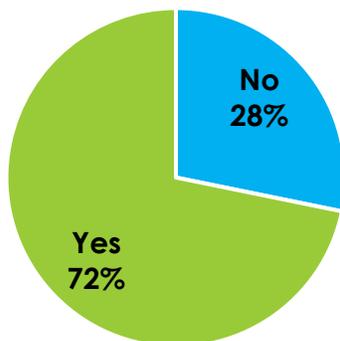
Respondent Profession- Rate



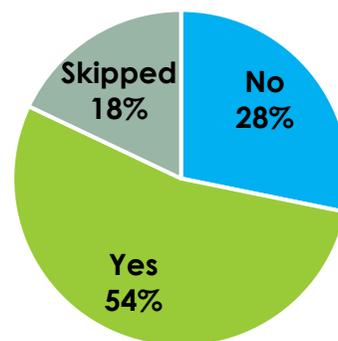
Perceived Barriers

Survey participants were asked to respond to the question, “Do you perceive barriers to Medicaid patients/members obtaining spacers/VHCs?” Similarly, participants were also asked if they perceived barriers to spacer access for commercially insured patients/members. Responses to these questions were asked in two parts, first being ‘Yes/No’ and second a free response box asking what barriers were perceived or why no barriers were perceived. For Medicaid patients, 72 percent of all survey participants indicated that they perceived barriers to spacer access with only 54 percent of all survey participants perceiving barriers for commercial insurance.

Perceived Barriers to Spacer Access- Medicaid



Perceived Barriers to Spacer Access- Commercial

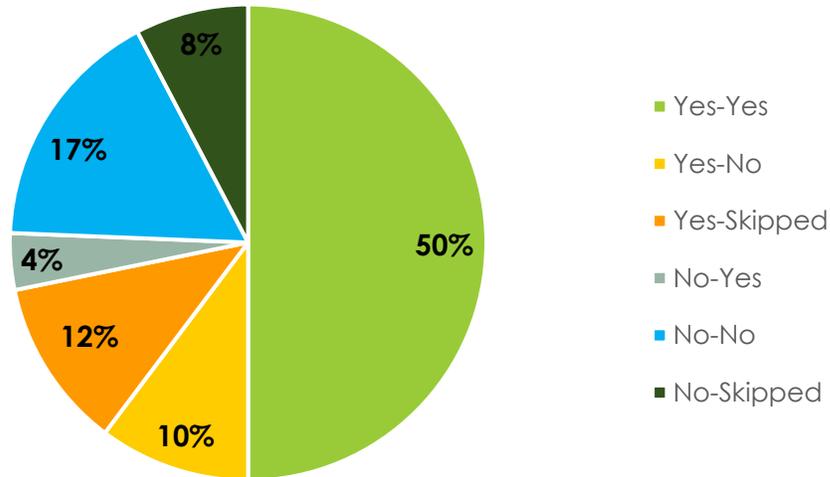


Perceptions of Spacer Access in Michigan



From the previously stated survey questions, half of survey participants perceived similar barrier to spacer access for both Medicaid and commercially insured patients (indicated by the Yes-Yes category in the pie graph below), with no barriers being perceived for either insurance type as the second highest overall response option (17%) (indicated by the No-No category in the pie graph below).

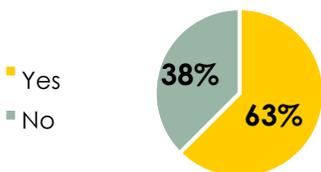
Rate of Response of Perceptions (Medicaid - Commercial)- All Professions



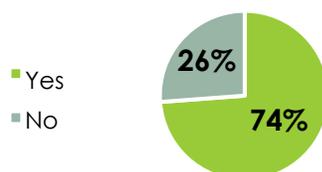
Barriers by Profession

While many participants (50%) indicated that they perceived barriers for both Medicaid and commercial insurance patients, within the respective professions, rates of perceived barriers were relatively stable with 60-75 percent of participants perceiving barriers for Medicaid patients (see pie charts below). While perceived barriers to Medicaid spacer access was consistent across professions, perceptions of barriers for commercial insurance patients was variable ranging from 38-75 percent (see pie charts on next page).

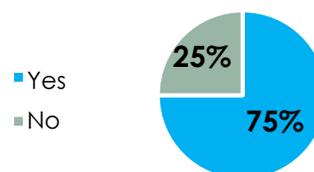
Perceived barriers for Medicaid Patients- Asthma Educators



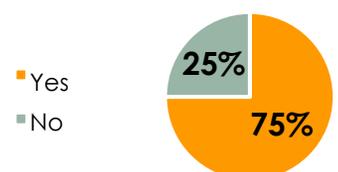
Perceived barriers for Medicaid Patients- Clinicians



Perceived barriers for Medicaid Patients- Pharmacists



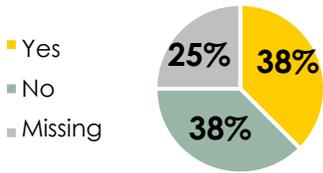
Perceived barriers for Medicaid Patients- Other Professions



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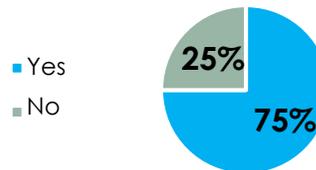
Perceived barriers for Commercial Patients- Asthma Educators



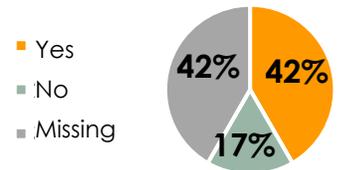
Perceived barriers for Commercial Patients- Clinicians



Perceived barriers for Commercial Patients- Pharmacists



Perceived barriers for Commercial Patients- Other Professions



Barriers Perceived- Yes

Survey participants were asked to describe perceived barriers to spacer access for their patients. The most commonly cited barrier for Medicaid patients obtaining a spacer was identified as a lack of education on both the provider and patient end. Many participants stated that providers often do not write a script for a spacer when prescribing medications that require a spacer. Participants also indicated that this lack of provider perceived spacer importance translates to the patient (or patient's guardian) perceiving the spacer as unnecessary. In many cases, the patient will not try to obtain the spacer even when provided with the script. Other barriers include cost, lack of spacers in stock at the pharmacy, perceptions of limited coverage (i.e. only one spacer per year), patient age (i.e. being 'too old' to receive a spacer under insurance coverage), or being told by the pharmacy that spacers are not covered by their insurance.

While lack of education was the most commonly cited barrier for Medicaid patients, cost and associated cost (i.e. copays) were the most commonly identified barrier for commercial insurance patients. Other common barriers were availability or stock at pharmacy and prior authorization issues. Education of importance and lack of prescribing were indicated as barriers for commercial patients, but at a much lower frequency than Medicaid patients.



Barriers Perceived- No

Survey participants indicating they did not perceive barriers to spacer access for patients were asked to describe why they perceived this lack of barriers to access. For Medicaid patients, the most commonly cited reason was the structure of the program that a patient was being treated in because their program gave spacers to patients during treatment. Others indicated that their patients have always been able to obtain spacers with the use of a written script.

For commercial insurance, the most common reason for lack of perceived barriers was insurance coverage. Respondents appeared to perceive that most commercial plans generally cover spacers and therefore a lack of barriers to access was perceived.

Common lack of barrier for both Medicaid and commercial insurance was due to providers not receiving complaints from patients regarding access. Participants indicated that the patients have never complained or voiced any concerns regarding spacer access – an opportunity for potentially life-saving education.

