

The Academy of Managed Care Pharmacy's  
*Concepts in Managed Care Pharmacy*

## Medication Stockpiling

The Academy of Managed Care Pharmacy (AMCP) is concerned about the harmful effects that medication stockpiling could have on individual patients, as well as the population as a whole. The Academy is providing this document as a means of educating the public about the unintended and potentially harmful results of medication stockpiling, and to remind health care providers of the role that they play in preventing these occurrences.

Medication stockpiling is the excessive and inappropriate accumulation of prescription or nonprescription medications for later use. Possible reasons for stockpiling of prescription drugs vary, including fear of product shortages and terrorist attacks; impending loss or change of drug benefit coverage to a plan with higher co-payments or different formularies; or intentional or unintentional drug abuse. There are significant reasons why stockpiling is not appropriate.

First of all, stockpiling may result in unnecessary costs for patients and payers. When employer-sponsored health plan selections change from one year to the next, or employees choose another provider, a change in co-payment fees or covered medications may result. Some patients may be tempted to stockpile currently prescribed medications however, if a change in medication therapy occurs (i.e., if the patient is prescribed a different drug or dosage), or the medication passes its expiration date and becomes ineffective, the stockpiled medication is wasted. This depletes the limited resources of the plan provider (employer), the health plan and the patient.

With excess quantity of drug available, the potential arises for inappropriate use by family and friends and dangerous access by children or pets, which may result in severe harm. In the case of medications with addiction potential, access to a large quantity of medications may increase the potential for abuse. In addition, drugs that are stockpiled for extended periods of time may lose their potency or become harmful, especially if stored outside of the manufacturer's recommendations.

Additionally, to ensure proper use of some prescription medications, it is often necessary that a licensed practitioner monitor utilization. Medications such as Coumadin® (warfarin sodium), a blood thinner, require continuous monitoring. If this medication is

taken without monitoring, improper dosing may cause severe adverse events including bleeding or stroke. Further, stockpiled medications create the opportunity for patients to self-medicate, unaware of dangerous interactions or adverse reactions that may occur.

Finally, medication stockpiling causes artificial shortages in the drug distribution system. For example, during the H1N1 virus outbreak in 2009, individuals who feared contracting the swine flu hoarded Tamiflu®, which was the only drug proven to be effective against the virus.

### **Role of the Pharmacist**

Pharmacists are trained to ensure that medications are used appropriately, safely and effectively. The community pharmacist and managed care pharmacist must work together to prevent stockpiling. The community pharmacist has direct patient contact, and can use professional judgment and experience, personal communication skills and relationships with patients to help promote appropriate drug use and create awareness of the dangers of stockpiling.

To prevent running out of medications, prescriptions should be refilled when less than 25 percent of the dispensed quantity remains; keeping more medication on hand is unnecessary and could be hazardous. Mail order prescriptions may need at least 7 days to allow time for delivery.

Managed care pharmacists have sophisticated information systems available to them to identify the potential and prevent stockpiling before it occurs. Prescription claims processing systems and alerts within those systems can help to alert the dispensing pharmacist of potential problems associated with stockpiling.

### **Managed Care Pharmacy's Initiatives to Prevent Stockpiling**

There are a number of tools that managed care pharmacists use to help prevent stockpiling. First, incorporation of “refill-too-soon” alerts in the drug plan software program prevents early refills of medications. For example, establishing a refill-too-soon alert at 75% will prevent payment for a prescription until the patient has used 75% of the dispensed quantity.

Second, “duration of therapy” messages are incorporated to discourage over-utilization of drugs intended for short durations. For example, antibiotics are normally needed for no more than 10 days of therapy, and ulcer medications are normally required only for 8 weeks of therapy. Duration of therapy messages prevent unnecessary accumulation of medication by limiting refills to the appropriate time period.

### **Conclusion**

AMCP regards stockpiling as an expensive, unnecessary, wasteful and potentially dangerous circumvention of appropriate health care resources. Pharmacists are in a

unique position to help prevent the occurrence of stockpiling. They have direct patient contact and access to information such as patient refill profiles to help identify possible stockpiling events. To address the problem in a systematic fashion, managed care pharmacy, working with community pharmacy, has initiatives in place to help decrease the potential for stockpiling.