**Comparative Effectiveness Research to Optimize Prevention and Healthcare Management for the Complex Patient – R21 Grants**

**Continuity of Medication Management (COMM) Study**

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**Institution/Partners:** Duke University; Durham VA Medical Center  
**Project Period:** 09/30/10 – 09/29/12  
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**Description**

Better continuity of care is associated with improved quality of care and reduced emergency room (ER) visits and hospitalizations. To improve care coordination and management of patients with chronic conditions, the patient-centered medical home model provides a single, consistent point of care, ensuring continuity of clinical information and treatment decisions for the patient. No study to date has examined whether patient care that reflects the principles of a medical home improves the continuity of medication management and health and economic outcomes for patients with multiple cardiometabolic conditions. This study examined the health and economic consequences of continuity of medication management for veterans with one or more cardiometabolic conditions.

**Specific Aims**

1. Compared to patients with one chronic condition, examine whether patients with two or more chronic conditions have  
   - More prescribing providers (Aim 1);  
   - More medications prescribed and worse medication adherence (Aim 2);  
   - More emergency room visits and inpatient admissions (Aim 3); and/or  
   - Different self-reported medication beliefs (Aim 4).
2. Identify what patients and their providers perceive to be the advantages and disadvantages of having one prescribing provider versus multiple prescribing providers (Aim 5).

**Findings**

- Patients with more prescribers had greater medication non-adherence, more ER visits, and more hospital admissions.  
  - The association between the number of prescribers and utilization is stronger for disease-specific ER visits and hospital admissions than for all-cause utilization.
Implications

Continuity of medication management appears to be a measurable, but under-appreciated, health system factor. Lack of continuity of medication management appears to be associated with less than optimal medication adherence, ER visits, and hospital admissions.

Publications (as of September 2013)


(Additional publications currently in preparation).

Posters and Presentations

Maciejewski, M. Prescriber continuity and medication adherence for complex patients. Panel presentation at: 2013 AcademyHealth Research Meeting; 2013 Jun 25; Baltimore, MD.