Children's Hospital of Philadelphia PolicyLab

When Medication Switching Threatens Care of Children With Asthma

Download Material

Children with asthma rely on regular medication use to stay healthy, and are particularly vulnerable to flare-ups and hospitalizations when their treatment is interrupted. One common reason for disrupted access to medication for children with asthma and others with chronic conditions is a practice known as non-medical formulary switching (NMFS) – which happens when insurers change the list of drugs they cover to those for which they can negotiate a lower price. While we should applaud efforts to reduce the high cost of prescription drugs generally, this use of NMFS is frequently misused or misguided. It can have direct impacts on patients and their care, often forcing families to either make the switch to a different, newly covered medication that might result in negative health outcomes, or pay much more out of pocket to keep the medication that is working for them.

This brief identifies the challenges associated with NMFS, their consequences for children with asthma, and guidance on ways to improve practices to ensure stable, continuous medication management so children with asthma and others who rely on regular medication can stay healthy.

Authors: Jennifer Clendening, Chén Kenyon, Tyra Bryant-Stephens

Related Content

- Controller Adherence Following Hospital Discharge in High Risk Children: A Pilot Randomized Trial of Text Message Reminders
  Article
  Feb 2018
- Automated Adherence Reminders for High Risk Children With Asthma: A Research Protocol
  Article
  May 2017
- Electronic Adherence Monitoring in a High-Utilizing Pediatric Asthma Cohort: A Feasibility Study
  Article
  Jun 2016