

The cost to the NHS of prescription charges for people with long-term conditions

New research by the York Health Economics Consortium (YHEC) has found that scrapping prescription charges for people with two long-term conditions - Inflammatory Bowel Disease (Crohn's Disease and Ulcerative Colitis) and Parkinson's - would save the NHS over £20 million a year.

For working-age people with Parkinson's and Inflammatory Bowel Disease (IBD) in England who are not exempt from charges, the economic analysis finds that any loss in prescription revenue from removing charges would be more than offset by savings to the NHS.

The money would be saved by significantly reducing the health complications for these conditions resulting from people not taking their medicine due to the cost of prescriptions. Reductions would be seen in hospital admissions, inpatient days, A&E visits, treatments for colorectal cancer and GP appointments.

Key findings

Scrapping prescription charges for Inflammatory Bowel Disease and Parkinson's would

Save the NHS:

- £20.1m for IBD per year – the equivalent of £180 per person with IBD per year
- £0.8m for Parkinson's per year – the equivalent of £93 per person with Parkinson's per year.

Reduce the number of health complications over 12 months:

- 11% fewer hospital admissions for people with Parkinson's.
- 20% fewer inpatient days for people with Parkinson's.
- 9% fewer A&E visits for people with Parkinson's.
- 6,983 fewer flares for people with Inflammatory Bowel Disease.
- 13 fewer treatments for colorectal cancer for people with Ulcerative Colitis.
- 3,887 fewer GP visits for people with Crohn's Disease.

The economic analysis commissioned by Crohn's and Colitis UK and Parkinson's UK, co-chairs of the Prescription Charges Coalition (PCC), quantifies the impact of prescription charges on working age people with long-term conditions.

Since 2010, the prescription charge has risen 26% to £8.80 in 2018 compared to a rise in average earnings over the same period of 16%. The impact of prescription charges on working-age people has therefore been increasing and can be compounded by the extra costs often associated with living with a long-term condition and lower than average incomes arising from interrupted education and careers.

The PCC's ***Still Paying the Price*** report (2017) found that 1 in 3 people with long-term conditions who pay for their prescriptions have not collected their medicines due to cost. Many also report missing or reducing doses due to the cost of prescriptions.

This can lead to people having to make impossible choices about essential survival costs or picking up their medication, which causes tremendous anxiety.

“I am stressed all the time about not having enough money and regularly have to make choices about whether I eat, heat my home or fill my prescriptions as well as all the other costs involved in just living.”

59% of those who reported reducing or skipping doses of their medication stated that either their health had deteriorated or they had developed a related condition as a result.

“I was 19 at the time and couldn’t afford my medication for asthma. I ended up collapsing at work and an ambulance was called and I was in hospital for a week. I stopped breathing and my heart stopped all because I had to pay for my asthmatic medication.”

The Prescription Prepayment Certificate can help people to manage prescription costs, but it is still unaffordable for some and does not work for people with fluctuating conditions.

Created in 1968, the list of medical conditions exempt from prescription charges is now 50 years old. Half a century on, it is out-of-date and arbitrary – medicine has advanced, but this list is stuck in the past. For example, when it was created, people with cystic fibrosis were not expected to live into adulthood. For someone who has this condition today, or who has had a kidney transplant, they would only be exempt if they also had diabetes or epilepsy.

Now there is clear economic evidence that making people with long-term conditions exempt from charges will save the NHS money and improve quality of life and outcomes for millions of families across England, it’s time this issue was addressed.

You can take the following actions to support our campaign:

- Use the template press release for your local paper with your photo
- Table questions, which the Prescription Charges Coalition can provide
- Ask the Secretary of State for Health for a meeting to discuss a review of the list
- Sign EDM 82 (if you are able to and haven’t already done so)
- Attend our Downing Street petition hand-in on Tuesday 5th June at 1pm

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The PCC is an alliance of 46 charities and health professional bodies campaigning to address the impact of prescription charges on people with long-term conditions.

Further information and the full report can be found at www.prescriptionchargescoalition.org.uk

Twitter: @PrescriptionCC

