# Medicare-Approved Drug Discount Cards Offer Substantial Savings to Beneficiaries with Common Health Conditions

June 29, 2004

### Overview

This CMS analysis indicates that beneficiaries taking prescription drugs for nine very common health conditions among Medicare beneficiaries can find substantial savings over the amount a typical American would pay by using Medicare-approved drug discount cards. The CMS analysis shows that savings of about 10 to 75 percent (depending on the drug) are available by enrolling in a Medicare-approved drug discount card. Further, the analysis shows that beneficiaries do not need to select the card with only the best prices -- beneficiaries enrolling in discount cards with prices 10<sup>th</sup> down the list still can save 5 to 65 percent over average retail prices for drugs used to treat common health conditions.

These savings are real and substantial. Total savings are likely much higher than the individual drug savings estimates presented in this report since beneficiaries with chronic conditions most often take more than one medicine. And, the national average retail pharmacy prices we use as a comparison include both the generally lower prices paid by people with private and public prescription drug insurance and the generally higher prices paid by people without insurance. If we compared the Medicare-approved drug card prices to prices paid by people without prescription drug insurance, the savings estimates would also be higher.

This analysis emphasizes the importance of informing Medicare beneficiaries, particularly low-income beneficiaries, about the simple steps to enroll in a Medicare-approved discount card so that they can start realizing these substantial savings right now. Given the prevalence of chronic medical conditions in the Medicare population and the discounts available through Medicare-approved drug discount cards on drugs used to treat these conditions, Medicare beneficiaries should call 1-800-MEDICARE now to find out how to enroll.

## Findings include:

Medicare beneficiaries being treated for 9 very common conditions including congestive heart failure, diabetes and hypertension can save 10 to 75 percent, depending on the drug, over national average retail prices, based on analysis of 23 drugs used to treat these common conditions. And, beneficiaries can select among a number of cards to realize substantial savings. The Medicare-approved drug discount card with pricing 10<sup>th</sup> down the list can still save 5 to 65 percent. (See attached table.)

- For 22 out of 23 drugs included in this study, the percentage savings over national average retail pharmacy prices were in the double digits. For the cards with prices 10<sup>th</sup> down the list, double-digit savings over national average retail prices were being offered on 17 out of 23 drugs included in this study. (See attached table.)
- While a few of the savings for discount cards with prices 10<sup>th</sup> down the list were relatively modest, such ranges of discounts -- some modest and most more robust -- are expected. These types of ranges are common in the insured market as well.
- Medicare beneficiaries being treated for congestive heart failure can save 25 to 71 percent over national average retail pharmacy prices, depending on the drug. Beneficiaries selecting a Medicare-approved discount card with prices 10<sup>th</sup> down the list will still find that savings of 14 to 65 percent are available on prescription drugs commonly used to treat this condition.
- Beneficiaries being treated for another quite common condition, diabetes, can save 10 to 60 percent. Beneficiaries selecting the card with prices 10<sup>th</sup> down the list can still save 6 to 35 percent over average retail prices, depending on the drug.

# Background on Health Conditions Common Among the Medicare Population

Medicare beneficiaries take prescription drugs to treat a myriad of health conditions. Eighty-seven percent of Medicare beneficiaries reported having at least one chronic condition in 2002<sup>1</sup>. Most beneficiaries – 59 percent – report having high blood pressure, and 56 percent report being told they have some type of non-rheumatoid arthritis (an additional 11 percent report rheumatoid arthritis). Diabetes is also a quite common condition: 1 in 5 beneficiaries report having diabetes. About one-third of beneficiaries have heart disease, and about 20 percent of those reporting heart disease report having congestive heart failure. Mental illness is also a major concern among the Medicare population, with over 17 percent of Medicare beneficiaries reporting that they have been told they have a mental or psychiatric disorder.

Most chronic conditions are treated with prescription drugs. Indeed, 91 percent of Medicare beneficiaries filled at least one prescription in 2001<sup>2</sup>. For this analysis, we chose 23 drugs that are used to treat the following array of very common illnesses<sup>3</sup>:

- Acid Reflux
- Congestive Heart Failure
- Depression

<sup>1</sup> Background data from Medicare Current Beneficiary Survey (MCBS), 2002 Access to Care File, for community dwelling Medicare beneficiaries.

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<sup>&</sup>lt;sup>2</sup> MCBS, 2001 Cost and Use File.

<sup>&</sup>lt;sup>3</sup> Not all beneficiaries are being treated with prescription drugs for their conditions, and this analysis does not include all drugs for each condition.

- Diabetes
- Hypertension
- High Cholesterol
- Osteoarthritis
- Osteoporosis
- Schizophrenia

Some Medicare-approved drug discount card sponsors have targeted programs to provide beneficiaries with common chronic conditions health information about these conditions, tips on how best to control these conditions, the appropriateness of generic substitution, and other helpful information.

This analysis highlights the savings that Medicare beneficiaries with very common medical conditions may realize through Medicare-approved drug discount cards. Given the prevalence of these common conditions in the Medicare population and the discounts often available, Medicare beneficiaries without insurance for prescription drugs – particularly those with low incomes – can benefit from the savings available through Medicare-approved cards.

# Analysis of Savings Available for Beneficiaries with Common Health Conditions

To assess what level of savings can be achieved through Medicare-approved drug discount cards for 23 prescription drugs taken for 9 conditions common among Medicare beneficiaries, we compared the best price available through the Medicare discount cards to the national average retail pharmacy price<sup>4</sup>. We also compared the prices of the Medicare-approved card with the price  $10^{th}$  down the list to the national average retail pharmacy price. The best Medicare-approved drug discount card prices found on Price Compare – and all of the  $10^{th}$  best card prices in our analysis -- are well below the national average retail pharmacy prices that typical Americans pay, including the higher prices paid by cash paying customers and the lower negotiated prices paid by people with public and private insurance coverage.

A major national source of reliable data on retail pharmacy prices currently in the market today is IMS Health's National Prescription Audit *Plus*<sup>TM</sup>. FDA has used this data source to demonstrate that real savings can be achieved through the use of generic drugs, and our analysis of savings is based on the same national average retail prices used in the FDA analysis. To illustrate the savings on generics, FDA used data on average U.S. retail prices for brand name drugs and the median average U.S. retail prices among generic manufacturers for generic drugs for the first quarter of 2004. The data were derived from IMS Health's National Prescription Audit *Plus*<sup>TM</sup> on brick-and-mortar retail pharmacies (i.e. chain, independent and foodstore pharmacies, excluding internet, mail order and long-term care pharmacies).

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<sup>&</sup>lt;sup>4</sup> www.medicare.gov accessed on June 14, 2004.

<sup>&</sup>lt;sup>5</sup> FDA website accessed May 3, 2004 at http://www.fda.gov/cder/consumerinfo/SavingsFromGenericDrugs.pdf.

These data represent the full price paid at the pharmacy by both the customer and the insurer, if any. This measure of average national retail price would generally be lower than the retail prices paid by Medicare beneficiaries without drug coverage because the prices include pharmacy revenues from insurers and third party payers that negotiate lower prices with pharmacies on behalf of their enrollees. If we compared the Price Compare prices to prices paid only by cash paying customers, we would expect to observe larger discounts. We converted these per day prices to a 30-day prescription price for purposes of comparing to the Price Compare information.

The IMS Health data on national average retail pharmacy prices are nationally representative. For calculating the best and 10<sup>th</sup> best prices under Price Compare, selected zip codes from areas around the country were used. The analysis did not include repeat searches over multiple geographic areas in order to produce different results. The geographic areas we chose may not be representative of all areas.

## **Findings**

The attached table compares the Medicare-approved discount cards with the best price and the price 10<sup>th</sup> down the list to national average retail pharmacy prices for 23 drugs. Highlights include:

- A beneficiary with an acid reflux condition in Boston, Massachusetts, could save 19 percent off the national average retail price for Aciphex by enrolling in the Medicare-approved drug discount card with the best price for this drug. This represents a savings of almost \$26 per month. The card with the price 10<sup>th</sup> down the list still yields savings of \$22 per month for this drug.
- A beneficiary in Portland, Oregon could enroll in a Medicare-approved drug discount card and buy Lisinopril to treat hypertension at a savings of 45 percent over the price a typical American would pay for that drug. Enrolling in the discount card with a price 10<sup>th</sup> down the list still yields a 27 percent savings.
- In Pittsburgh, a beneficiary could save about \$30 per month over national average retail prices by enrolling the Medicare-approved drug discount card with the best price for Pravachol, a drug used to treat high cholesterol. Enrolling in the card with a price 10<sup>th</sup> down the list still gives the beneficiary savings of almost \$23 per month.

### Conclusion

The CMS findings underscore the importance of outreach to Medicare beneficiaries who are struggling with drug costs, to ensure that the maximum number of eligible beneficiaries enroll in a Medicare-approved drug discount card program as soon as possible to begin receiving substantial savings. This is especially important for low-

income beneficiaries, who can receive up to thousands of dollars worth of assistance with their prescription drug costs until the Medicare prescription drug benefit is implemented January 1, 2006.

PRICE COMPA	RISON: RETAIL	L PHARMACY PRICE VE	ERSUS MEDICARE-AF	PROVED DIS	COUNT CARDS	S BEST CAP	RD AND 10TH C	ARD ON LIS	Т
			National Average	Range of Discounts for Top 10 Cards		\$ Savings From Discount		% Savings From Discount	
Illustrative Medicare Beneficiary Condition / Residence	Drugo	Dooing		Doub Bullet	toth Could Dule	Deat Bales	toth Court Date	Dood Balan	10th Oand Bala
Acid Reflux	Drugs	Dosing	Retail Monthly Price <sup>1</sup>	Best Price	10th Card Price	Best Price	10th Card Price	Best Price	10th Card Price
Boston, MA 02762-Bristol									
DOCCON, NO. 02. 02 2.1010.	Aciphex	20 mg per day	\$135.90	\$109.93	\$113.43	\$25.97	\$22.47	-19.1%	-16.5%
Congestive Heart Failure	1.13.1		, , , , , ,						
Louisville, KY 40205									
	Lasix	40 mg per day	\$11.40	\$7.44		\$3.96	\$1.61	-34.7%	-14.1%
	Furosemide	40 mg per day	\$6.00	\$3.44		\$2.56	\$1.57	-42.7%	-26.2%
	Toprol XL	200 mg per day	\$58.80	\$43.94		\$14.86	\$12.01	-25.3%	-20.4%
	Metoprolol	200 mg per day	\$24.60	\$7.19	\$8.48	\$17.41	\$16.12	-70.8%	-65.5%
Schizophrenia									
Boise, ID 83714	T				1		T		T
	Zyprexa	10 mg per day	\$292.80	\$256.99	\$261.92	\$35.81	\$30.88	-12.2%	-10.5%
Diabetes									
Cleveland, OH 44106									1
	Glucophage	850 mg twice per day	\$84.30	\$76.20	\$79.09	\$8.10	\$5.21	-9.6%	-6.2%
	Metformin	850 mg twice per day	\$38.70	\$15.54	\$25.18	\$23.16	\$13.52	-59.8%	-34.9%
	Actos	30 mg per day	\$163.50	\$133.57	· ·	\$29.93	\$22.98	-18.3%	-14.1%
Hypercholesterolemia	Acios	30 mg per day	Ψ100.00	ψ100.57	ψ170.02	Ψ20.00	ΨΖΖ.50	- 10.070	- 17.170
Pittsburgh, PA 15122									
	Zocor	40 mg per day	\$136.20	\$91.40	\$97.57	\$44.80	\$38.63	-32.9%	-28.4%
			·						
<del> </del>	Lipitor	40 mg per day	\$106.50	\$92.36		\$14.14	\$9.34	-13.3%	-8.8%
	Pravachol	40 mg per day	\$136.50	\$106.80	\$113.98	\$29.70	\$22.52	-21.8%	-16.5%
Hypertension	,								
Portland, OR 97202 - Multnoma					ı		T		T
<u> </u>	Lisinopril	20 mg per day	\$18.00	\$9.86	\$13.21	\$8.14	\$4.79	-45.2%	-26.6%
	Zestril	20 mg per day	\$38.40	\$28.82	\$31.22	\$9.58	\$7.18	-24.9%	-18.7%
	Prinivil	20 mg per day	\$34.80	\$30.84	\$33.20	\$3.96	\$1.60	-11.4%	-4.6%
	Vasotec	20 mg per day	\$51.30	\$45.87	· ·	\$5.43	\$2.90	-10.6%	-5.7%
			·		· ·	·			
<del> </del>	Enalapril	20 mg per day	\$24.30	\$6.10		\$18.20	\$12.95	-74.9%	-53.3%
	Norvasc	5 mg per day	\$48.60	\$41.42	\$43.70	\$7.18	\$4.90	-14.8%	-10.1%
Osteoarthritis									
Greenville, MS 38731	1						1		
	Celebrex	200 mg per day	\$90.90	\$77.30	\$81.44	\$13.60	\$9.46	-15.0%	-10.4%
l	Vioxx	25 mg per day	\$90.00	\$77.43	\$80.32	\$12.57	\$9.68	-14.0%	-10.8%
Osteoporosis									
Greenville, MS 38731									
l	Fosamax	70 mg per week	\$71.40	\$62.76	\$64.48	\$8.64	\$6.92	-12.1%	-9.7%
Depression		31	·						
Greensboro, NC 27410									
	Zoloft	50 mg per day	\$82.20	\$67.59	\$74.35	\$14.61	\$7.85	-17.8%	-9.5%
	Paxil		\$87.90	\$73.43	· ·	\$14.47	\$12.64	-16.5%	-14.4%
(1) Note: CMS computed a monthly 30 day		20 mg per day							

<sup>(1)</sup> Note: CMS computed a monthly 30 day supply based on dosing schedule using the FDA per day estimate based on analysis of IMS Health, National Prescription Audit PlusTM; 1st Quarter 2004; extracted April 2004. Prices are average retail prices (for generic drugs median average retail prices among generic manufacturers was used) in brick-and-mortar pharmacies (i.e. chain, independent and foodstore pharmacies, excluding internet, mail order and long-term care pharmacies) across all payer types (cash-only, Medicaid and other 3rd party payers) for the first quarter of 2004.

<sup>(2)</sup> Data Source: Medicare Price Compare, at www.medicare.gov, accessed 6/14/04.