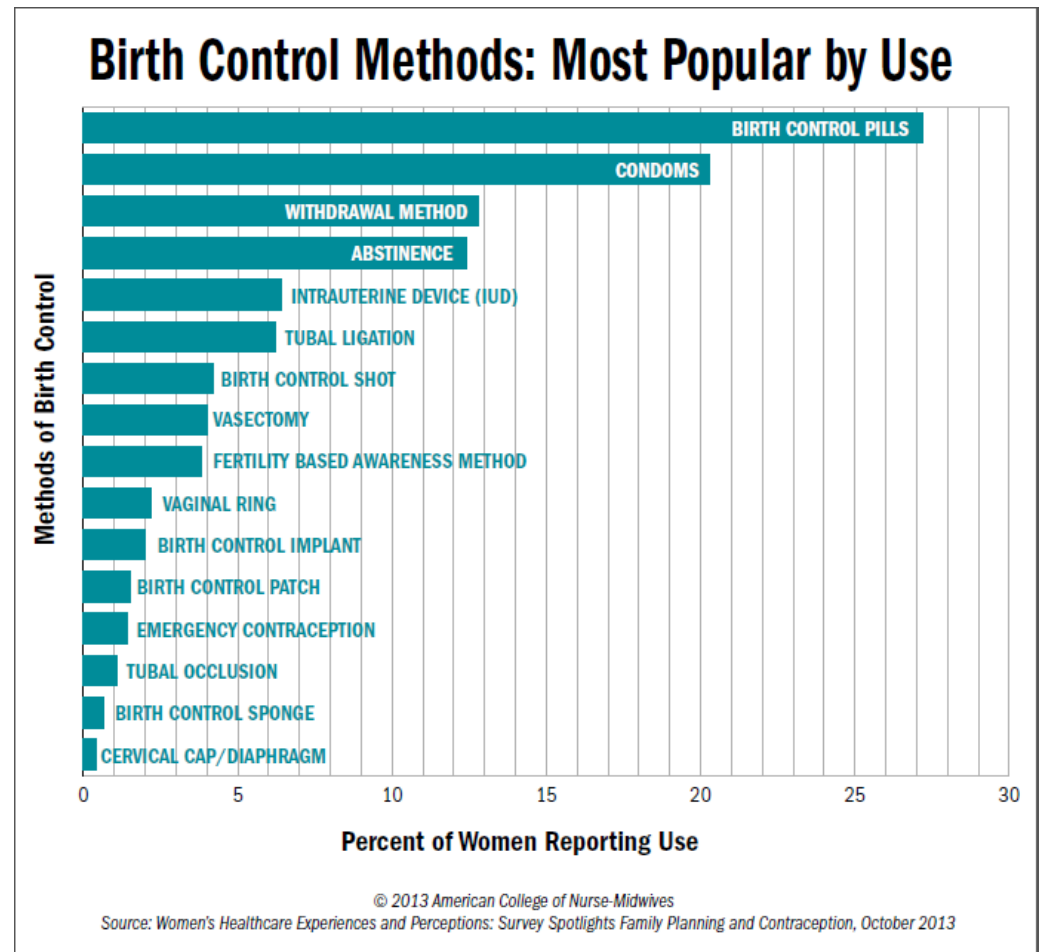


COST SAVINGS AND GENERIC SUBSTITUTION OF ORAL CONTRACEPTIVES (OCPS)



OCPs Commonly Used

- 25% of reproductive age women report using OCPs
- Low failure rates¹
- Almost all available as generic²



Concerns About Generic OCPs Overblown

- ACOG committee opinion supported requests for brand OCPs due to concerns about packaging and adherence³
- Multiple studies show **increased** adherence with generic drugs
 - OR 1.62 of adherence in analysis of claims data primarily looking at OCPs⁴
- Health policy implications of lower cost of generic OCPs

WebMD

HEALTH
A-Z

DRUGS &
SUPPLEMENTS

LIVING
HEALTHY

FAMILY &
PREGNANCY

WOMEN'S HEALTH

Monday, July 11, 2011

Is Your Generic Birth Control Pill Really the Same as the Brand Name Version?



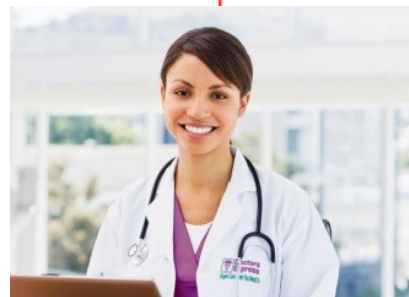
The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

Barriers to Prescribing Generics Exist

- Focus group data from ACP & AANP meetings identified barriers to prescribing generic OCPs:
 - attitude & knowledge regarding generics, lack of trusted sources, multiple generic brands for OCPs

Lack of knowledge: “my understanding is that there's no additional testing...before a generic can be put out”

Multiple generic brands:
“when you have ten different brands of the same two ingredients of a birth control, it kind of doesn't make sense and it causes confusion”

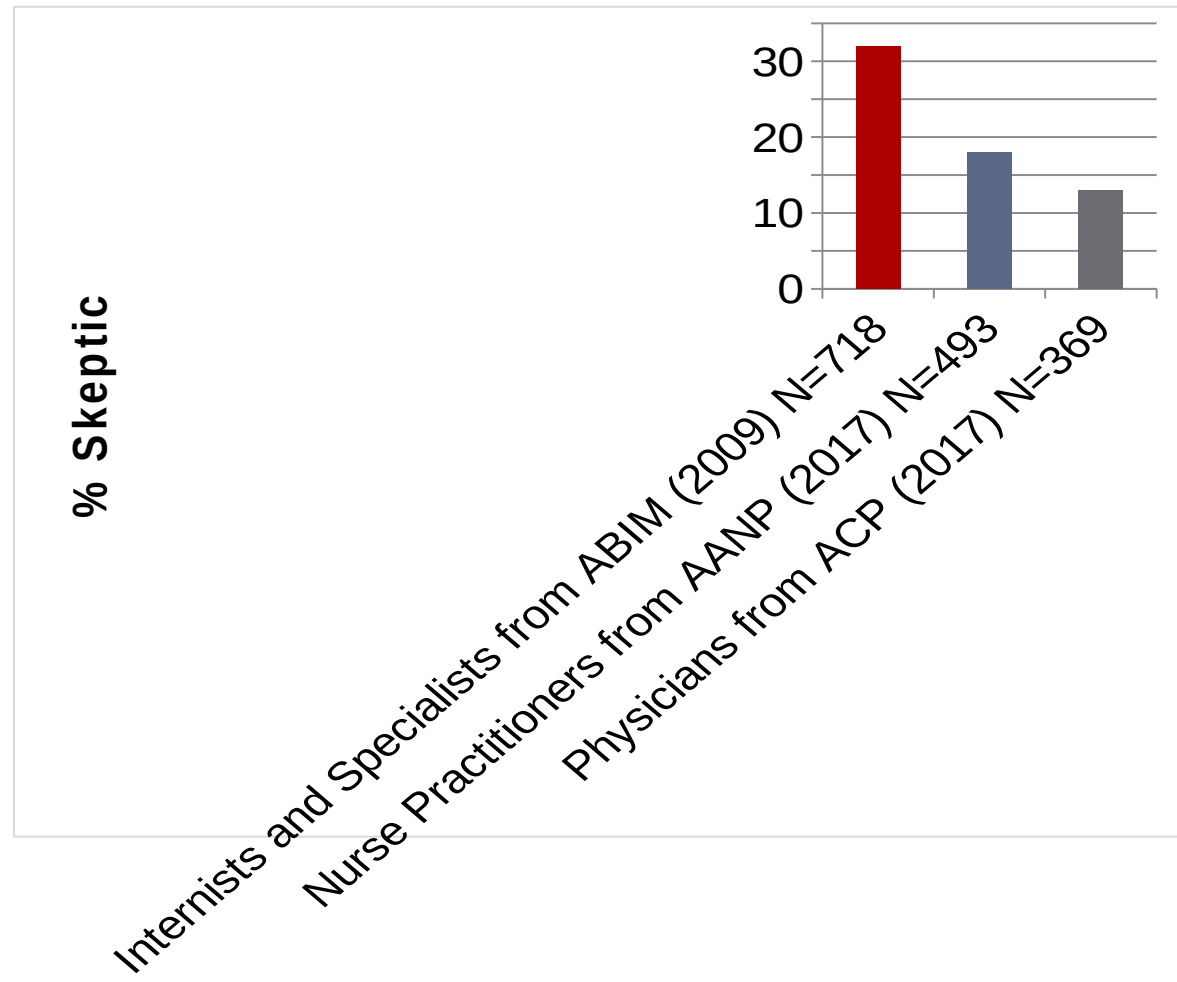


Lack of trusted sources:
“insurance companies not trusted by public or either by us”
“pharmaceutical companies would [not] be considered a trusted source”

Attitude: “generics are not going to be efficacious”

Generic Skepticism Decreasing But Still Exists

- **Generic skepticism:** lack of agreement that generics are as effective as, as safe as, or do not cause more adverse events than their brand counterparts.



Remember: Generics are Therapeutically Equivalent!

- The FDA considers generic and brand OCPs **Therapeutically Equivalent**
- This means they are both
 1. **Pharmaceutical Equivalent**: Same active ingredients, dosage form, route of administration, strength/concentration
 2. **Bioequivalent**: No significant difference in rate or degree to which the active ingredient in a pharmaceutically equivalent drug product becomes available at the site of action, when administered at same molar dose



FDA Approval Process Rigorous

- All generics go through rigorous testing before approval
- Manufacturers of generics must prove their drug is “therapeutically equivalent” to brand name
- Adverse events closely monitored for generic drugs
- www.FDA.gov/GenericDrugs

Get the Facts about
Generic Medicine

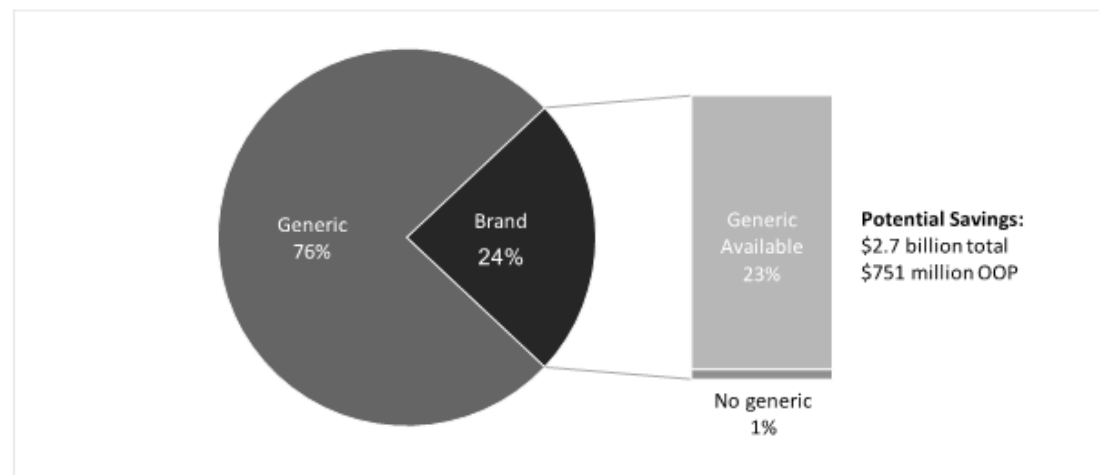
 GENERIC	 BRAND-NAME
<input checked="" type="checkbox"/> Safe	<input checked="" type="checkbox"/> Safe
<input checked="" type="checkbox"/> Effective	<input checked="" type="checkbox"/> Effective
<input checked="" type="checkbox"/> High-Quality	<input checked="" type="checkbox"/> High-Quality

FDA.gov/GenericDrugs 

Cost Savings from OCPs Substantial

- Usage and cost of OCPs derived from the 2010-2014 Medical Expenditure Panel Survey (MEPS)⁵
- Estimated total brand name OCP expenditure: \$916 million
 - \$171 million out-of-pocket
- Estimated total avoidable cost opportunity: \$456 million
 - \$37 million out-of-pocket

Figure 1: Estimated Cost Savings Switching from Brand to Generic OCPs



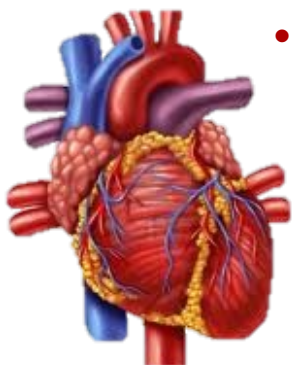
Cost Savings Translated to Patients

- The estimated total out-of-pocket savings
 - \$751 million between 2010-2015

OCP Type	Average OOP Cost Per Year	Average Total Cost Per Year
Brand	\$117.15	\$427.06
Generic	\$59.53	\$163.24
Potential Savings of Switching	\$57.62	\$263.82

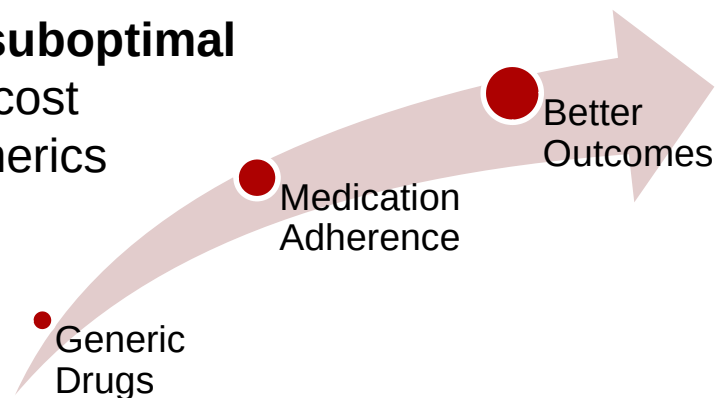
Having a Discussion With Your Patient Matters

- Patients who reported having a discussion with their clinicians were 5x more likely to switch to a drug of lower cost⁹



- **Medication adherence is suboptimal**

- A big reason for this is cost
- A simple solution is generics



- **Why are we focusing on OCPs?**

- Commonly prescribed drug with more skepticism than other drugs
- Offer a window for highlighting need to support generic prescribing in other classes of drugs which translate into mortality benefit and huge savings

References

1. Trussell J. Contraceptive failure in the United States. *Contraception*. 2011;83(5):397-404. doi:10.1016/j.contraception.2011.01.021.
2. Hall KS, Trussell J. Types of combined oral contraceptives used by US women. *Contraception*. 2012;86(6):659-665.
3. American College of Obstetricians and Gynecologists Committee on Gynecologic Practice,. ACOG Committee Opinion No. 375.; 2007:447-448.
4. Shrank WH, Hoang T, Ettner SL, et al. The implications of choice: Prescribing generic or preferred pharmaceuticals improves medication adherence for chronic conditions. *Arch Intern Med*. 2006;166(3):332-337.
5. Agency for Healthcare Research and Quality. Medical Expenditure Panel Survey (MEPS). Rockville, MD <https://meps.ahrq.gov/mepsweb/index.jsp>.
6. Bioequivalence between brand-name and generic OCs. *Contracept Rep* 2002; 13(2):6-9.
7. G. Evans, E.L. Sutton. Oral contraception. *Med Clin North Am*, 99 (2015), pp. 479-503
8. Kesselheim, A. S., Gagne, J. J., Eddings, W., Franklin, J. M., Ross, K. M., Fulchino, L. A., & Campbell, E. G. (2016). Prevalence and predictors of generic drug skepticism among physicians: results of a national survey. *JAMA internal medicine*, 176(6), 845-847.
9. Wilson, I. B., Schoen, C., Neuman, P., Stollo, M. K., Rogers, W. H., Chang, H., & Safran, D. G. (2007). Physician–Patient Communication About Prescription Medication Nonadherence: A 50-state Study of America’s Seniors. *Journal of General Internal Medicine*, 22(1), 6–12. <http://doi.org/10.1007/s11606-006-0093-0>
10. Joshua J. Gagne, Niteesh K. Choudhry, Aaron S. Kesselheim, Jennifer M. Polinski, David Hutchins, Olga S. Matlin, et al. Comparative Effectiveness of Generic and Brand-Name Statins on Patient Outcomes: A Cohort Study. *Ann Intern Med*. 2014;161:400–407. doi: 10.7326/M13-2942
11. William H. Shrank, Tuyen Hoang, Susan L. Ettner, Peter A. Glassman, Kavita Nair, Dee DeLapp, June Dirstine, Jerry Avorn, Steven M. Asch. The Implications of Choice Prescribing Generic or Preferred Pharmaceuticals Improves Medication Adherence for Chronic Conditions. *Arch Intern Med*. 2006;166(3):332–337. doi:10.1001/archinte.166.3.332