

How the Trump prescription for drug prices transparency could make health care well again

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When it comes to the prescription drugs America use, too often money is the last thing consumers think about. Formulaic prescription drug ads are part of the reason why.

Suffer from blood clotting or find yourself at an elevated risk of stroke due to an irregular heartbeat? Then Eliquis is your answer. Got moderate to severe ulcerative colitis, psoriatic arthritis or Crohn's disease? Then talk to your doctor about Humira.

Most ads involve an attractive protagonist whose otherwise idyllic life is interrupted by a specific, serious but treatable condition. Resolution to the protagonist's problem, as well as a resumption of the ad's narrative arc, comes in the form of medication. The protagonist then gets back to his or her enriching and meaningful pursuits—say biking along the Pacific Coast or cooking with a loved one—while a narrator runs through the potential side effects.

All come with two powerful subliminal messages: One, directed at those who might be interested in medication, is: "Get this [drug](#) and someone else will foot much of the bill." The other, for those not in the market for meds, would go something like this: "Congratulations! You just paid for this ad."

Nothing better illustrates the insanity of the nation's health care system than the drug ads people watch. Like all others, America's is a form of socialism—that is to say patient and provider determine a course of treatment and then much of the cost is socialized within broad insurance pools, whether you get your insurance through an Obamacare exchange or your employer. But unlike in other countries where government has a larger role, no insurer is powerful enough to set a limit on what it will spend on behalf of those it covers.

This means you, the American health care consumer, spend considerably more than people in other countries. And with drug ads, your pain is doubled. Not only are you paying for the cost of developing and marketing drugs for other people, you have to sit through the ads that try to persuade those people to buy those drugs, which then pushes up your

insurance premiums.

A fix won't come until Americans get wise to how they are being fleeced and revamp their entire [health care system](#) to make the price of health care products and services more transparent.

The Trump administration, to its credit, has a plan that could stimulate this debate. As part of a broad effort to force more price transparency, the administration has decided that those drug ads will get an additional element.

Starting this summer, ads for drugs costing at least \$35 per month will have to include their prices. Health and Human Services Secretary Alex Azar told reporters this month that the rules could shame drugmakers into lowering costs.

We certainly hope they do. But viewers might see the [prices](#) as purely notional.

Humira, for example, costs roughly \$6,600 a month for people without insurance, which means that virtually no one actually pays it because few without insurance have that kind of money. The price varies dramatically for those with [insurance](#), but it's a tiny fraction of the list price.

A more realistic hope is that the price disclosure rules prompt Americans to think about how drugs and other health care products are priced and paid for in this country. As consumers learn more about what their care costs before they access it, they might begin to adjust their behavior, look for cheaper alternatives, or even push for more radical reforms to [health](#) care. If the administration's rules assist in that process, they will be a huge success.

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