

Researcher's decade of analyzing the price of drugs leads to big reforms

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For nearly 10 years, Stacie Dusetzina, Ph.D., a Vanderbilt University professor of Health Policy and Ingram Professor of Cancer Research, has focused her research on one core policy issue that has been of

interest to lawmakers of all political stripes: the affordability of prescription drugs.

After reading a piece in about rising [drug prices](#) and the impact on patients a decade ago, Dusetzina used her training to start unpacking why drugs cost so much and how much that affected patients needing those medications.

After more than 90 peer-reviewed publications, countless conversations with two White House administrations and dozens of policymakers on Capitol Hill, Dusetzina and colleagues were able to reflect recently on the South Lawn of the White House about how their contributions through research and data informed the provisions in the Inflation Reduction Act that will save older Americans on Medicare tens of thousands of dollars in out-of-pocket costs each year.

"The idea that some of my work made a difference in fixing a program that I really care about and that I knew could be made better—that's something special," Dusetzina said. "There are nearly 50 million people in Medicare Part D right now. Not all of them need expensive drugs right now, but they will have the [financial security](#) of knowing that if they do need them, they will be able to afford them."

Dusetzina was one of a couple hundred policy researchers and other experts on [drug policy](#) and reform, celebrating what has been a lengthy effort to reduce the [financial burden](#) on millions of Americans, Dusetzina and her colleagues being some of the most influential researchers among them.

"Stacie is one of our nation's leading scientists studying [drug](#) pricing and access to high-cost medications," said Nancy Keating, MD, MPH, professor of Health Care Policy and an internist at Harvard University, who has collaborated with Dusetzina several times on Part D research.

"The evidence that she has generated related to the role of high out-of-pocket spending on medication nonadherence and medication non-initiation has shed a spotlight on the problems of the Part D benefit and was key to the recent legislation seeking to make [prescription drugs](#) more affordable to Medicare beneficiaries."

Just in the past year, Dusetzina has found that [30% of cancer patients who don't receive subsidies don't initiate prescription drug cancer therapy](#), likely due to high [out-of-pocket costs](#), and [some cancer therapeutics can cost more than \\$10,000 out](#) of pocket for a single year of treatment, some above \$3,000 for the first fill.

So, what's next? Since the legislation was formally signed into law in September, Dusetzina has continued to analyze the longer-term impacts of the Inflation Reduction Act, and estimated how much Medicare has spent on prescription drugs in fee-for-service claims from 2008-2019 and how the new law will impact that spending.

But to think Dusetzina will shift her research focus away from Medicare entirely is not accurate.

"Turns out there are still lots of problems to solve around drug prices and access, even though I think we fixed Part D for the most part," Dusetzina said. "I'm working on some new projects that focus more broadly on Medicare plan choices and how to make sure people pick the right plans for them and on how to give people better information about drug prices at the time of prescribing."

"I'm also really interested in seeing how these changes will unfold in the Medicare program and how drug companies will respond with their pricing for new drugs. Ultimately, we have to fix prices and coverage if we are going to solve health care affordability. There is going to be a lot to keep me busy."

More information: Stacie B. Dusetzina et al, Impending Relief for Medicare Beneficiaries—The Inflation Reduction Act, *New England Journal of Medicine* (2022). [DOI: 10.1056/NEJMp2211223](https://doi.org/10.1056/NEJMp2211223)

Stacie B. Dusetzina et al, Prescription Drug Spending in Fee-for-Service Medicare, 2008-2019, *JAMA* (2022). [DOI: 10.1001/jama.2022.17825](https://doi.org/10.1001/jama.2022.17825)

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