

Pharmacy discount card programs could save patients millions of dollars

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A nationally representative study found that at least one out of five



prescriptions for commonly prescribed generic medications were cheaper through Amazon Prime or GoodRx Gold discount cards compared to actual out-of-pocket (OOP) payments made by patients.

The authors also highlight the disproportionately higher frequency of OOP payments exceeding <u>discount</u> card pricing for various vulnerable subgroups like the uninsured and those in the no coverage (deductible) phase. The findings are published in *Annals of Internal Medicine*.

Researchers from University of Toledo Colege of Pharmacy and Pharmaceutical Sciences compared OOP payments obtained from 2020 Medical Expenditure Panel Survey (MEPS) to 2023 counterfactual discount card pricing (Amazon Prime and GoodRx Gold) for 20 commonly prescribed generic medications.

They estimated the proportion and extent of OOP payments exceeding Amazon and GoodRx discount card pricing benchmarks (referred to as "excess OOP payment"). Results indicate that OOP payments made by patients exceeded Amazon and GoodRx prices for about 20% and 43% of prescriptions evaluated, respectively. Proportion of excess OOP payment was 40% and 79% for prescriptions assumed to be in the no coverage (deductible) phase, respectively.

Lastly, the estimated cumulative OOP cost-savings, assuming patients obtained their medications using Amazon and GoodRx discount cards, amount to approximately \$969 million and \$1.83 billion, respectively. The authors caution that while some discount card programs may provide out-of-pocket cost relief for select generic medications, their dependence on pharmacy benefit managers (PBMs) for claims adjudication and access to pharmacy networks hinder long-term solutions.

They say addressing OOP costs effectively requires policy reforms



supporting the adoption of value-based insurance designs for a lasting and comprehensive strategy.

More information: *Annals of Internal Medicine* (2023), www.acpjournals.org/doi/10.7326/M23-0644

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