

IMPROVE GENERIC PRESCRIBING: THE CASE FOR ORAL CONTRACEPTIVES (OCPs)



Funded by FDAU01FD005485

Designed for



Disclosures

- **The following have no relevant financial relationships to disclose:**
 - Vineet Arora MD, MAPP, Jeanne Farnan MD, MHPE, James Zhang PhD, Arlene Weissman PhD, Neel Shah MD, MPP, Chris Moriates MD, September Wallingford RN, MSN, Shalini Lynch, PharmD, CGP, David Meltzer MD, PhD, Marilyn Stebbins PharmD, Anita Samarth, Michelle Cook PhD, MPH, Allison Norenberg MSc, Erin Keating MPH
- **None of the persons listed above will discuss unapproved/investigational use**

Accreditation

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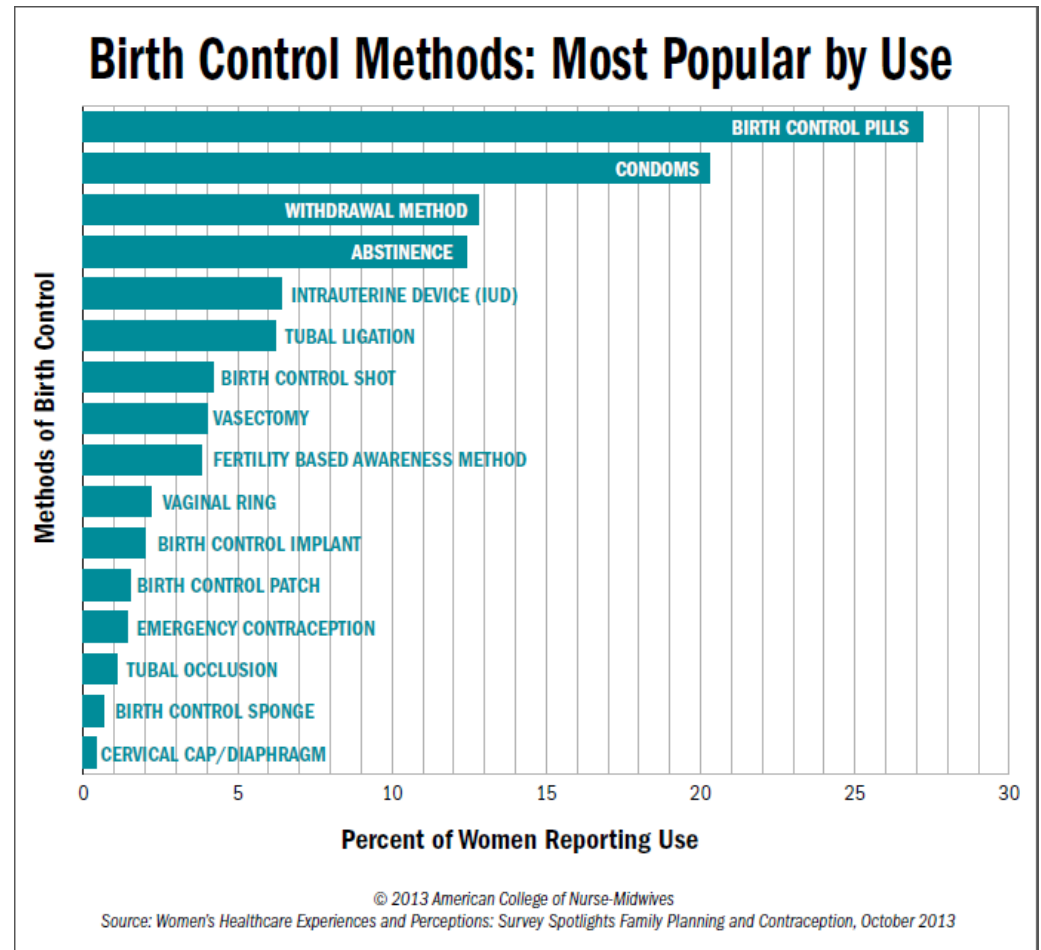
AANP Statement:

- This activity is approved for 0.25 contact hour(s) of continuing education (which includes 0.25 hours of pharmacology) by the American Association of Nurse Practitioners. Activity ID 18023084. This activity was planned in accordance with AANP CE Standards and Policies.



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

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WOMEN'S HEALTH

Monday, July 11, 2011

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



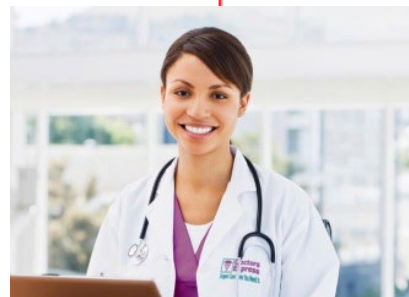
The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

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”

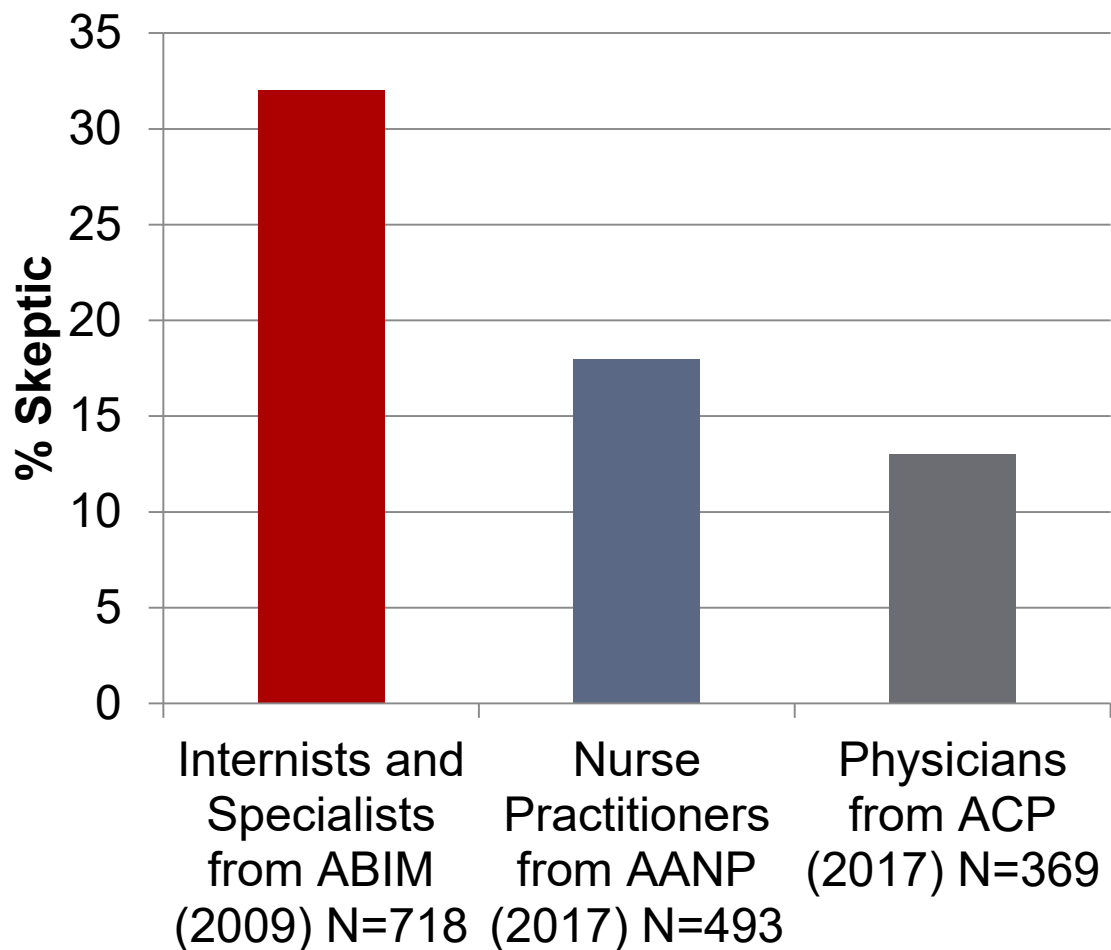


Lack of trusted sources:
“insurance companies not trusted by public or either by us”
“pharmaceutical companies would [not] be considered a trusted source”

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

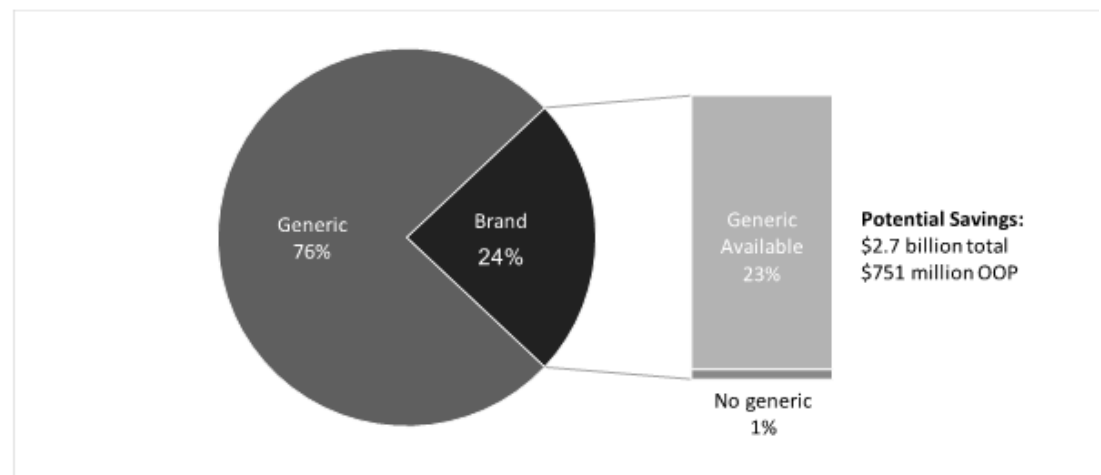
| GENERIC | BRAND-NAME |
|--|--|
| <input checked="" type="checkbox"/> Safe | <input checked="" type="checkbox"/> Safe |
| <input checked="" type="checkbox"/> Effective | <input checked="" type="checkbox"/> Effective |
| <input checked="" type="checkbox"/> High-Quality | <input checked="" type="checkbox"/> 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
- Of 24% of brand names offered, 23% had a generic available
- Potential savings from switching:
 - Estimated total savings: **\$2.7 billion**
 - Estimated out-of-pocket savings: **\$751**

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

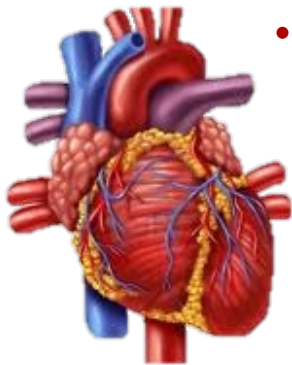


Cost Savings Translated to Patients

| 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 |

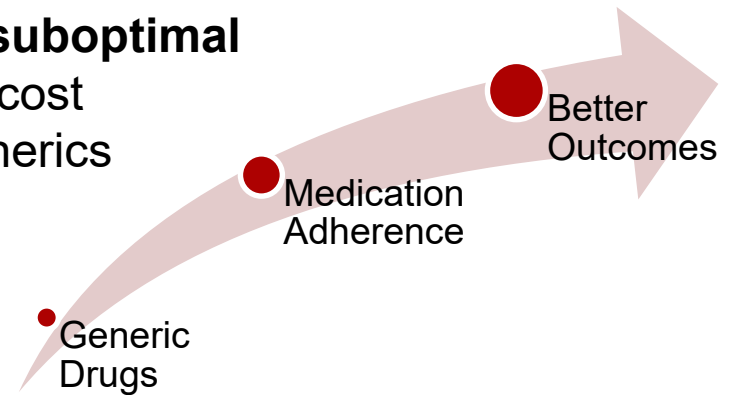
Having a Discussion With Your Patient Matters

- 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

Acknowledgments

- **The University of Chicago**
 - David Meltzer MD, PhD
 - Jeanne Farnan MD, MHPE
 - James Zhang PhD, MS
 - Tracy Cardin ACNP-BC, FHM
 - Bradley Shapiro PhD, MS
- **U.S. Food & Drug Administration**
 - Murewa Oguntimein
 - Mitch Frost
- **American College of Physicians**
 - Arlene Weissman PhD
 - Steve Weinberger MD
- **American Association of Nurse Practitioners**
 - Diane Padden PhD, CRNP, FAANP
 - Michelle Cook PhD, MPH
- **Costs of Care**
 - Neel Shah MD, MPP
 - Christopher Moriates MD
 - September Wallingford RN, MSN
- **University of California San Francisco**
 - Shalini Lynch PharmD, CGP
 - Marilyn Stebbins PharmD
- **Clinovations Government + Health**
 - Anita Samarth



Funded by:
FDA U01 FD 005 485

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