Shopping Around for Diabetes Meds Pays Off

BY MIRIAM E. TUCKER

NEW ORLEANS — Prescription plans offered by large discount stores could save diabetes patients at least $85 per month in out-of-pocket expenses compared with local chain or independent pharmacies, a cost analysis found.

Previous data suggest that one in every five U.S. patients with diabetes cuts back on medications because of cost. Recently, large retail stores such as Wal-Mart, Target, and Kmart have launched programs that offer generic medications at much lower cost to customers than that of other types of pharmacies.

An analysis of medical and pharmaceutical claims from the PharMetrics patient-centric database on 52 million unique insured patients from 91 health plans across the United States confirms that these programs can save patients a significant amount of money out-of-pocket, Dr. Clifton M. Jackness and Dr. Ronald Tamler reported in a poster at the annual scientific sessions of the American Diabetes Association.

"The purpose of our study was to increase physician and patient awareness that there are significant price differences among pharmacies, and that cost is a significant barrier to patient compliance," Dr. Jackness said in an interview.

"Doctors and patients should work together to find the best pharmacy that serves their needs, and some smaller pharmacies may be able to compete with Wal-Mart's prices. However, Wal-Mart, Target, and Kmart are full-service pharmacies that answer patient questions, ask about interactions, and keep computerized records on all drugs prescribed through their stores," added Dr. Jackness, an internist at Mount Sinai School of Medicine, New York.

He and Dr. Tamler, an endocrinologist at Mount Sinai, analyzed claims for the 10 most commonly prescribed medications for all adults younger than age 65 years with a diagnosis of diabetes (ICD-9 code 250) prior to Jan. 1, 2005. The 10 drugs included in the analysis were metformin, atorvastatin, lisinopril, rosiglitazone, furosemide, pioglitazone, simvastatin, hydrochlorothiazide, insulin glargine, and amlodipine. The average number of medications taken by a patient with diabetes is 8.9, according to the investigators.

Some generic drugs offered by Wal-Mart, Target, and Kmart cost much less than the same drugs sold by other pharmacies, while other medications were similar in price. For nongeneric medications, those three discounters, www.drugstore.com, and Medco by Mail seemed to be more competitive than the neighborhood retailers and chains.

For example, the 30-day out-of-pocket cost for generic metformin (500 mg) ranged from $4.00 at Wal-Mart and Target to $39.99 at Rite-Aid. For lisinopril (10 mg), the range was $4.00 at the same two big retailers to $36.95 at a local pharmacy. But atorvastatin (10 mg)—not available generically as of August 2008—was expensive just about everywhere, ranging from Wal-Mart's low of $71.63 to a high of $107.10 at drugstore.com, not including shipping costs. But added up, the price of all 10 medications was lowest at Medco by Mail ($428.35), not including shipping. Next lowest was Wal-Mart ($432.53), while the highest was a local pharmacy ($639.30), a difference of more than $200 per month.

The superstores and mail-order firms did not always have the lowest price for every medication, but a patient who bought all 10 prescriptions at one of these stores would save a minimum of $85 per month, compared with the local chain or independent pharmacy, neither of which had the lowest price for any of the medications included in the analysis, Dr. Jackness and Dr. Tamler said.

Physicians should find out if the medications they prescribe are available as generics and are on the formularies for the low-cost programs. "All the data suggest that [outcomes] would improve if patients could afford their medications," Dr. Jackness said during the interview.

Neither Dr. Jackness nor Dr. Tamler had any disclosures or conflicts of interest. The PharMetrics prescribing data came from Eli Lilly & Co. representatives, but they did not request compensation for that database. ■