



COMPLETED GRANT SYNOPSIS

Examination of Generic Drug Cost Reimbursements and Patient Cost-Sharing and Trends in Generic Drugs Dispensed by Independent Community Pharmacies from 2012 – 2014

Marv D. Shepherd, PhD and Kristin M. Richards, PhD
The University of Texas at Austin College of Pharmacy | Austin, TX

Objectives

Information on the national growth of the generic drug market by number of prescriptions and total sales dollars is replete. However, information specific to independent pharmacies for the dispensing of generic drugs is lacking. In addition, information is nearly completely lacking on the various cost components (e.g., ingredient cost, dispensing fee, patient cost sharing) associated with the dispensing of generic drug products. This study remedies this lack of information by providing cost component trend data in the dispensing of generic drugs by independent community pharmacies.

Methods

Design	<ul style="list-style-type: none"> • Non-experimental, retrospective design using a de-identified prescription claims database from 2012 to 2014 • Prescriptions dispensed by more than 400 independent community pharmacies across the U.S.
Study endpoints	<ul style="list-style-type: none"> • Top 20 generic medication list by number of claims and by revenue • Generic medication claims cost components (e.g., ingredient costs, dispensing fee, patient payment, third party reimbursement)

Results

Changes in independent community pharmacy generic prescription mean cost components between 2012 and 2014 included:

- 20.2% increase in ingredient costs
- 17.4% increase in third party payments
- 4.6% decrease in dispensing fees
- 1.7% decrease in patient payments
- 13.6% increase in revenue

Conclusion

This report provides a 3-year look at the most dispensed generic medications by more than 400 independent pharmacies in the U.S. It also provides per prescription cost component information, which has previously been difficult, if not impossible to locate. It is hoped that this report will prove useful to independent community pharmacists, and to those whose research would benefit from prescription cost component information.