

## Promoting Generic Drugs: Blue Plans' Best Practices

To rein in skyrocketing drug costs while easing the financial barriers that may prevent patients from taking their medications, the nation's 39 Blue Cross and Blue Shield Plans have launched a variety of initiatives to promote generic drugs among their 102 million members. While some of these programs provide financial incentives for switching to cost-saving generics, others leverage online resources to educate consumers about generic alternatives. Among them:

**Blue Cross and Blue Shield of North Carolina** launched its "Medication Dedication" program in January 2008 to ensure that members with congestive heart failure, high blood pressure, high cholesterol and diabetes can afford to stay on their medications. The program – which runs through December 2009 – waives co-pays for certain generic drugs and includes targeted outreach to members and providers. Last year, participating members saved more than \$13 million in out-of-pocket prescription drug costs. Evidence also indicates that eligible members are filling prescriptions sooner and more often following their initial diagnosis than they were prior to the program's implementation.

**Blue Cross and Blue Shield of Minnesota** eliminated generic co-pays for its small group fully insured business as of July 1, 2006. This "free generics" program encourages members to ask their physicians about generic alternatives and ease the economic barriers that have been shown to influence patients' adherence to drug therapy. As a result of these programs, participating employers have seen generic utilization rates as high as 88 percent.

**Highmark Blue Cross Blue Shield** has placed kiosks in physician offices, making it easier for them to provide generic drug samples to their patients' onsite. The program includes over 30 medications representing more than 10 different therapeutic categories. Through the program, with partner MedVantx, up to one month of the sample medication is made available at no charge to patients or the physician's office. The program has increased the prescribing of generics, resulting in savings of more than \$2.5 million in Western Pennsylvania. Over 800 prescribers participate in more than 180 physician offices.

Between 2006 and 2008, generic usage among members in **Blue Cross and Blue Shield of Massachusetts'** (BCBSMA) managed business sector rose from 65.8 percent to 75 percent – 12 points higher than the national average, saving members and employers millions in lower co-payments and claim costs. BCBSMA is also a founding member of the eRx Collaborative, a statewide e-prescribing program that allows providers to view brand-name and generic options before writing prescriptions. The Collaborative is credited with saving BCBSMA members nearly \$800,000 in co-payments and reducing participating providers' drug costs by five percent.

The GenericSelect™ program offered by **Anthem Blue Cross and Blue Shield Plans in 13 states** teaches consumers and providers about the safety and effectiveness of generic drugs and provides free access to generic drugs for up to four months through a waived copay for a 30-day supply at retail pharmacy and up to a 90-day supply through mail service pharmacy. Thereafter, members experience between \$10-\$20 monthly savings per refill, with savings for the first year totaling more than \$200. GenericSelect focuses on drugs for depression, high cholesterol, osteoporosis and high blood pressure.

**BlueCross BlueShield of South Carolina** developed a personalized online tool to help members research their prescription drug choices and save money through cost-effective generic alternatives. My Pharmacy Manager integrates more than 1,000 different benefit plans for more than 700,000 members, enabling them to explore generic options and access comparative data on out-of-pocket medication costs. Members who used My Pharmacy Manager increased their generic usage. In 2008, the generic fill rate increased by nearly 6% over the prior year.

**Blue Cross and Blue Shield of Montana** implemented a multi-pronged approach to increase generic drug utilization in their market. It includes a six-month copay waiver to targeted members taking certain brands and strengths of name brand prescription drugs; an over-the-counter incentive program for members using heartburn medications; and 12-month pilot program encouraging physicians to increase the number of generic drugs prescribed. In 2008, Blue Cross and Blue Shield of Montana reported a generic fill rate of 70.1%.