PhRMA has long advocated for sharing the $166 billion in rebates and discounts given by biopharmaceutical companies to the government, insurers, and pharmacy benefit managers (PBMs) with patients at the pharmacy counter. This is why OptumRx’s decision to require all new employer plans, beginning in 2020, to provide discounts directly to patients at the pharmacy is a step in the right direction. Sharing negotiated rebates with patients is an important step to improving medicine affordability and ensuring patients can access the medicines they need.

According to OptumRx’s announcement, in just two months, the program has lowered patient costs by an average of $130 per eligible prescription among employers currently participating. These lowered costs are helping to improve patient adherence: UnitedHealthcare research shows that already, patients’ medication adherence has improved by 4 to 16 percent. Not only does sharing the savings put more money in patients’ pockets, it can also improve their health and reduce costs to the entire health care system.

In comments to Politico, OptumRx also said:

- The shift to point-of-sale rebates has led to only very “modest increases” in premiums in the low-single digits, according to Daniel Schumacher, UnitedHealthcare president and CEO, while having a “very material impact to consumers,” especially those with chronic diseases.

- “Our perspective is in the commercial market the trade off is worth it in terms of the slight increase in premiums but the significant value to consumers,” OptumRx CEO John Prince said.

We also need to share negotiated rebates directly with seniors in Medicare Part D. The Department of Health and Human Services Office of the Inspector General recently proposed a rule that would encourage the rebates Medicare Part D plans negotiate with biopharmaceutical companies to be entirely passed through to beneficiaries at the pharmacy counter. Under the proposed rule, premiums are projected to increase by just $3 to $6 per month, as little as a dime a day. However, experts estimate less than one-third of beneficiaries would actually experience this increase. And savings at the pharmacy counter would more than offset premium increases for many beneficiaries. For example, a patient with diabetes taking five medicines, including insulin, could save nearly $900 a year. By improving seniors’ ability to access the medicines they need, the proposed rule would promote consistent and appropriate use of medicine and strengthen Medicare Part D for all beneficiaries.

Patients share the costs for their medicines. They should share the savings, too.

Learn more at LetsTalkAboutCost.org