

# THE Medicine Cabinet

A newsletter from MEDPIN – Medicine For People In Need

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## Last Chance for Drug Companies to Help Patients Through the DDP

December is a month of giving and sharing. This December, that spirit is especially relevant for the twenty-five drug companies participating in Medpin's Drug Distribution Project. Most of these companies have worked constructively with Medpin to use the DDP to help indigent patients while fulfilling each company's obligation in a litigation settlement agreement. The October edition of *The Medicine Cabinet* named eight companies with the most valuable product offerings. With a few exceptions, the other participant drug companies have also offered the DDP sufficiently valuable products to come close to filling each company's total product dollar amount specified in the settlement underlying the DDP.

This month is the last chance for drug companies to adjust their DDP product offerings in time for the last DDP order period (in January 2003). Medpin surveyed the twenty safety net clinics with large unspent DDP "credit limit" exceeding \$100,000. These include a number of San Diego-area community clinics (Logan Heights has the largest unspent DDP credit, with more than \$2 million) plus many county outpatient clinics such as San Francisco General Hospital (\$122,000 credit remaining), Alameda County Behavioral Health Care Services (\$227,000 remaining), and Los Angeles County Medical Center (\$1.8 million credit remaining for that facility, \$3.7 million remaining for all LAC clinics). Below are the products – including mental health, diabetes, family planning and



LifeLong Medical Care

anti-infective drugs, that are not currently available through the DDP, are sold by the drug companies with the largest unspent DDP product balances, and would be most useful to these safety net clinics. The companies below can choose to stick to the products and amounts listed in the litigation settlement agreement. Alternatively, they can decide to bring additional value to California's indigent patients by voluntarily offering these additional products or additional amounts of their product:

- Effexor SR, Allese, Lo-Ovral, Zosyn (**AHP/Wyeth** has \$3.9 million unspent DDP product balance)
- Paxil, Augmentin, Avandia (**GlaxoSmithKline** has \$2.5 million unspent DDP product balance)
- Fragmin, Covera HS, Depo-Provera in pre-filled syringes (**Pharmacia** has \$1.8 million unspent DDP product balance)

How will the holiday spirit affect these three companies? A future article will answer this question and offer larger perspectives on the impact of California's unique Drug Distribution Project.

## California Endowment:

### INVESTING IN LOCAL COMMUNITIES

The California Endowment's responsive grant-making program, the Local Opportunities Fund, provides grants of up to \$50,000 to support projects or organizations that address local health needs in underserved communities. Organizations that utilize the talents, cultures and assets of the local community to address the community's health priorities are encouraged to apply. Some examples of recently funded projects include:

#### **Contra Costa County - Health Services**

**Department** \$49,940, Bay Point Promotora Program: To increase access to health education for Spanish-speaking residents by training community residents as health educators in east Contra Costa County.

**Humboldt Community Breast Health Project**, a project of North Coast Clinics Network \$49,960, Capacity Building: To build organizational capacity to meet the growing demand for information and patient navigation services for women with breast cancer in Humboldt County.

**Mountain Valleys Health Centers, Inc.** \$50,000 Integrated Behavioral Health: To implement a multi-faceted approach to maximize available resources to meet the mental health needs of individuals in four rural Northern California counties.

The deadline for applications is January 30, 2003. Applications and additional information are available on the website at [www.calendow.org](http://www.calendow.org).

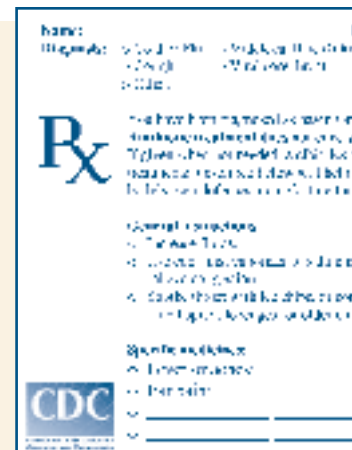
## Rx For Wellness: Antibiotics: Miracle Drugs or Public Health Menace?

We are accustomed to dramatic recovery from painful infections like strep throat, ear and sinus infection or pneumonia after several doses of antibiotics. However, these disease-fighting drugs are losing their effectiveness because of over-prescription and misuse. The inappropriate use of antibiotics results in bacteria that can resist them.

**How can we prevent the rise of drug-resistant bacteria?** Physicians must take responsibility for appropriate prescribing while patients must take the full course of antibiotics as prescribed when these drugs are needed to fight bacterial infections. In addition, new FDA regulations to reduce the use of antibiotics in livestock feed should decrease public exposure to antibiotic resistant bacteria.

The Centers for Disease Control and Prevention (CDC) initiated an ad campaign this fall to discourage people from asking for antibiotics when they are not needed. The CDC has developed patient education materials in English and Spanish and supplies doctors with "nonprescription prescription pads" for tips on coping with colds and flu. For copies of the education tools developed by CDC go to the website at:

<http://www.cdc.gov/drugresistance/community/tools.htm>.



### MEDPIN'S 2nd Annual Conference

#### *Setting The Standard: QUALITY CARE AND AFFORDABLE DRUGS*

May 8th and 9th 2003 • Sheraton Universal Hotel • Universal City, CA

Join us in celebrating the accomplishments of Medpin's Drug Distribution Project and forging ahead to assure that vulnerable patients have access to needed medications.

#### Participants will learn about:

- Maximizing participation in the 340B Drug Pricing Program
- Resources and tips for safety net clinics seeking to take the fullest advantage of drug companies' patient assistance programs (PAPs)
- Advancing evidence-based prescribing practices to reduce costs and improve health outcomes
- Becoming a consultant pharmacist for safety net clinics with licensed dispensaries

#### Who should attend?

Leaders from:

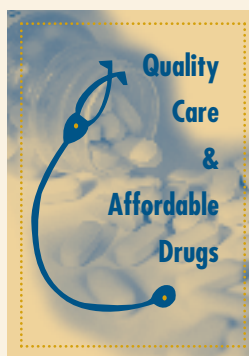
- Safety net community clinics
- County health systems

- Physicians and other clinicians concerned about uninsured patients
- Pharmacists and pharmacy students interested in learning more about safety net clinics and pharmaceutical issues

- Public policy leaders working at the local, state and national levels

#### Workshop sessions:

- The basics of pharmacy management
- Value purchasing: Getting the best care for the best price
- Implementing a contract with a retail pharmacy
- Using PAPs to improve patient care: Models that work
- Expanding pharmacist scope of practice to include chronic disease management of conditions requiring pharmacotherapy monitoring
- Becoming A specialist in community clinic pharmacy support



# Generic Drugs: Second Class Care or Great Value?

**QUESTION #1:** Will I be compromising my patient's health if I prescribe amoxicillin rather than one of the newer and more costly antibiotics for middle ear infection?

**QUESTION #2:** Will my patient's arthritis pain be reduced if she takes naproxen instead of Celebrex?

As health care costs rise, prescribers are asking themselves these kinds of questions. The answers to these and other questions about generic drugs offer substantial evidence that "tried and true" generic drugs, which have the same active ingredients as their brand-name counterparts, have a good safety profile and generally cost 50% less than the brand-name product. Generic drugs account for 45% of the prescriptions filled in the U.S., but only 8% of total prescription drug spending. To learn more about generic drugs, visit the Medpin website at [www.mepin.org](http://www.mepin.org). Click on Low Cost Drugs and then click on Generic Drugs. Check out <http://www.medicalletter.com/freedocs/gendrugs.pdf> for more information about generic drug ratings or go directly to the FDA's Center for Drug Evaluation and Research at <http://www.fda.gov/cder/index.html>. The Orange Book provides a complete listing of approved drugs with therapeutic equivalence evaluations.



Shasta Community Health Center

**ANSWER to #1:** Children treated with amoxicillin for middle ear infection have better treatment outcomes than children treated with the newer antibiotics according to research published by the Agency for Health Care Research and Quality (AHRQ).<sup>1</sup> The average cost of drug therapy for amoxicillin is \$12.00 compared to the average cost of \$42.00

for the newer antibiotics.

**ANSWER to #2:**

Patients with arthritis who are treated with the very expensive Cox-2 inhibitors (for example, Celebrex), in the long run, do no better than patients treated with nonsteroidal anti-inflammatories (NSAIDs). In clinical trials, Cox-2 inhibitors reduced GI complications; however, this benefit was outweighed by the increased incidence of serious adverse events compared to the NSAIDs.<sup>2</sup> Celebrex and Vioxx cost from \$100 to \$140 for a month's supply. Prescription generic ibuprofen costs about \$10 for a month's supply.<sup>3</sup>

1 Ringel-Kulka, T, Tolleson-Rinehart S, Christensen DB. Antibiotic choice and treatment outcomes for acute otitis media. August 2002. Centers for Education and Research on Therapeutics Website: [http://certs.hhs.gov/newsarchive/2002/20020808\\_01.html](http://certs.hhs.gov/newsarchive/2002/20020808_01.html).

2 University of British Columbia, Therapeutics Letter 43, Nov/Dec/Jan 2001-02, on Therapeutics Initiative website at <http://www.ti.ubc.ca>.

3 University of California, Berkeley Wellness letter, Volume 18, September 2002.

## Best Buys

### DECEMBER

#### Topical Medications for burns and arthritis pain:

Silvadene cream all sizes  
NDC#61570-0131  
\$0.01

Capsaicin Cream 0.025%  
Watson labs 60gm tube  
NDC#00536-2525-25  
\$0.13

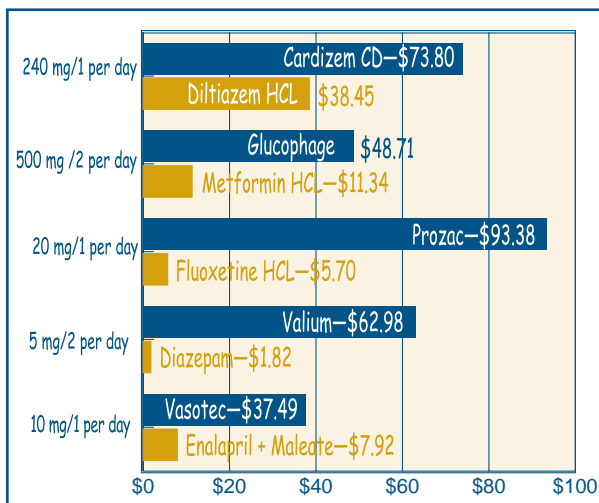
#### Calcium Supplements to Prevent Osteoporosis

Oysco 500mg (Calcium Carbonate) Watson  
NDC#0053604106 #60  
\$0.10

Oysco 500mg (Calcium Carbonate) Watson  
NDC#0053604106 #250  
\$0.42

## Looking to Buy a "Best Buy?"

Medpin doesn't sell or distribute drugs. You must work with a drug wholesaler or directly with a pharmaceutical company to buy drugs. Best Buys prices are generally available only to clinics that are 340B eligible. To find out more about the 340B program and how to participate go to our website at [www.mepin.org](http://www.mepin.org) and click on Low Cost Drugs.



## Drug Price Comparison Chart

Cost per 30-day supply

BRAND NAME      GENERIC\*

\*These 5 drugs are among the 25 most frequently prescribed brand-name drugs that have available generic equivalents among Blue Cross Blue Shield of Michigan providers. The prices for the generic drugs are based on BCBSM Maximum Allowable Cost. People with other health insurance coverage or no insurance coverage may expect to pay slightly more for generic medications. Prices vary among pharmacies so call around to compare drug prices. For a comparison of the other 20 drugs: [www.the-unadvertisedbrand.com](http://www.the-unadvertisedbrand.com).

**PLEASE ROUTE TO:**

- \_\_\_\_ **Executive Director**
- \_\_\_\_ **Medical Director**
- \_\_\_\_ **Clinic Manager**
- \_\_\_\_ **Nurse Manager**
- \_\_\_\_ **Pharmacist**

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## Utilizing CHIS—California Health Interview Survey

**H**ow prevalent is diabetes in the Latino/Hispanic community in California? According to the California Health Interview Survey (CHIS), 30% of people who self-reported Latino/Hispanic ethnicity, said that a doctor has told them they had diabetes or sugar diabetes. AskCHIS, a free online data query system, allows you to select specific health topics, and then get immediate reports. You can request information about chronic conditions, diet and exercise, the health of children and adolescents, health insurance coverage and lack of coverage, rates of eligibility and enrollment in Medi-Cal and the Healthy Families Program, cancer screening and women's health issues. Once you select your initial health topic, you can further refine your search using pre-defined selections including race, income, gender, age, and geographic location (individual counties). AskCHIS allows you to save selected queries, export data into Excel spreadsheets, uti-

lize statistical options, or just stick to the basics with simple searches.

AskCHIS is a resource created by the California Health Interview Survey (CHIS), in collaboration with the UCLA Center for Health Policy Research, the California Department of Health Services, and the Public Health Institute. CHIS is the largest statewide consumer health survey in the United States.

The reports available on AskCHIS can serve as a helpful resource for clinic program coordinators to research the populations and health conditions they work with, while also providing a great tool for grant writing and program planning. To learn more about AskCHIS, visit: [www.chis.ucla.edu](http://www.chis.ucla.edu)

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