Simvastatin
Tablet

10 mg
Quantity : 90

Cost Elements	Retail	Mail	Variance
NDC or UPC	55111-0198-30	63739-0436-10	Different NDC = Different AWP
Ingredient Cost AWP Per Unit	$2.80433	$3.52500	($0.72)
Minus % Discount Off AWP	66.50%	70.00%	-0.035
Ingredient Discount in Dollars Per Unit	1.86	2.47	($0.60)
Net Ingredient Price Per Unit	**0.94**	**1.06**	**($0.12)**
Dispensing Fee Per Unit	0.12	0.00	$0.12
Total Ingredient & Dispensing Cost Per Unit	**1.06**	**1.06**	$0.00
Less Member Co-Pays Per Unit	0.17	0.11	$0.06
Net Cost to Plan Per Unit	**0.89**	**0.95**	**($0.05)**
Plus Average Wastage Per Unit	0.01	0.04	($0.03)
Total Unit Cost to Plan	**0.90**	**0.98**	**($0.08)**

Retail 90-Day Supply

Mail 90-Day Supply

MAIL ORDER IS NOT FOR EVERYONE!

In fact mail order is probably not for you if:

Pricing transparency is important to your health plan

- Average Wholesale Price (AWP) is the basis for all mail discounts
- AWP is not the same as the Manufacturer's Suggest Retail Price (MSRP) for a new car
- In fact, it is more like the price for a used car – the used car dealer knows the true cost of the car but he'll never use that as the basis of any discounts to the buyer
- AWP can be virtually any price that the mail order pharmacy decides
- A practice known as "repackaging" allows mail order pharmacies to literally "repackage" a drug, make up a new National Drug Code (NDC) and create a new AWP that will cost your health plan more
- Many health plans have discovered that they are getting a higher discount off a higher AWP

You're a patient that must take daily multiple medications for chronic conditions

- Adherence counseling is done by pharmacists to insure that patients are taking medications as directed by their doctors.
- Non-adherence is estimated to cost the U.S. health systems between $290B - $305B annually and studies have proven that retail pharmacists are 2 to 3 times better at adherence counseling – in fact, they are simply the best – nurses come in second.
- Most non-adherence costs occur from additional medical treatments – including emergency room visits and hospital stays. This is serious business – life and death in some cases
- Patient taking multiple medications for chronic conditions are at higher risk for non-adherence. There is no substitute for in-store face-to-face counseling by pharmacists. Bear in mind that in 2010, doctor office visits declined by 4.2 M in 2010 – mostly owning to economic considerations.
- Pharmacist consultations remain a real health care bargain – literally costing only pennies per pill in most cases.

If you're a consumer who believes that competition for your business drives lower cost and better service

- If your out-of-state mail order pharmacy – the pill dispensing factory that thinks of you more as a prescription than a patient – is providing bad service such as leaving temperature sensitive drugs sitting in a steamy mail box on a hot July day, or your prescription is late because you didn't fill out the mail order paperwork correctly or the medication that your doctor took you off six months ago is still being delivered to you like clockwork – well, no doubt you're going to change pharmacies soon. Wrong! You're stuck!
- Mail order pharmacies are known as "captive" pharmacies. The pharmacies are not the captives but rather its patients. Patient can't change mail order pharmacies no matter how poor the service – only the member's health plan can. Everyone in the plan has to change or no one can.