

# Kidney Disease Patients Save with Generic Drugs

**Total: \$2.2 billion**

Generics saved patients with kidney disease **\$2.2 billion in 2017, and savings for the past 10 years total \$11.1 billion.** According to the Centers for Disease Control and Prevention, about 30 million U.S. adults have chronic kidney disease, and kidney disease is the ninth-leading cause of death in the nation. Generic drugs treat or reduce the symptoms, so that patients can get on with their lives.

## The Promise of Biosimilars

Just as generics offer savings over brand-name drugs, biosimilars—safe, effective alternative versions of biologic medicines—promise to improve the quality of life for America’s patients while at the same time saving the health system billions of dollars.

**Many kidney disease patients also take generic medications for other conditions:**

**48% have hypertension,** for which they saved **\$286 million**



**31% have arthritis,** for which they saved **\$33 million**

**18% have cardiovascular disease,** for which they saved **\$22 million**

*Data compiled by IQVIA on behalf of AAM*

## Generic drug savings in the U.S.



Generics are **90%** of prescriptions dispensed but only **23%** of total drug costs

**Medicare** **\$82.7** Billion **\$1,952** per enrollee

**Medicaid** **\$40.6** Billion **\$568** per enrollee

**\$265** Billion  
**U.S. Savings in 2017**

**\$1.79** Trillion  
**10-Year U.S. Savings**

### **Disease-State and Comorbidity Selection Methodology**

AAM contracted with health policy consulting firm Avalere to conduct the mapping of products to specific conditions. Avalere conducted the clinical review by assigning each generic product to a list of medical conditions. Using high-quality and reliable drug information databases (for example, Lexicomp Online and Micromedex 2.0) and expertise from a clinical pharmacist, Avalere mapped the products to medical conditions using their approved therapeutic indications. The generic products were further stratified by assigning comorbidities using published epidemiological data to determine the three most common associated medical conditions.

This approach allowed for an accounting of the patient savings for each medical condition. As a general rule, direct savings for any of the listed medical conditions includes all products with an indication for that medical condition. As such, the savings may be driven by any product with an indication for that specified condition and not necessarily the most common treatment. Savings do not account for the frequency in which providers prescribe each product for an approved or unapproved medical condition.