



The GoodRx 2019 End-of-Year Report

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GoodRx Research

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This year, frustrations over the high cost of prescription drugs continued to sweep the nation. New affordable medications became available, but the first \$2 million drug was also approved. And while prescription drug prices were a problem in 2019, the healthcare system as a whole also remained fragmented and confusing for many Americans.

Our team here at GoodRx believes that drug price transparency can lead to lower medication costs and improved healthcare. Better price visibility can affect how prices are set and help inform patients so that they make better decisions at the pharmacy. In an effort to increase transparency, we are pleased to present our 2019 end-of-year report, an analysis of the state of drugs this year.

This report walks through drug price trends in 2019. It highlights medications that made waves, noteworthy government legislation, and medications that saw price increases. It also includes 2020 drug predictions (both good and bad) from our co-CEO, Doug Hirsch.

The report focuses on data from January 1 to October 31, 2019 and includes the following findings:

- 629 brand and generic drugs increased in price by an average of 8.2%.
- Atorvastatin, lisinopril, and levothyroxine were the most prescribed medications of 2019.
- Myalept was the most expensive drug in 2019, with a monthly list price of \$64,959.
- People living in San Francisco paid 17% more than the national average for their medications.

Prescription drug price and fill trends in 2019

Most prescribed drugs

[Atorvastatin](#), [lisinopril](#), and [levothyroxine](#) were the 3 most prescribed drugs in 2019, based on a GoodRx analysis of U.S. prescription fills. These medications are all affordable generics and paint a picture of the health conditions that Americans faced this year.

Atorvastatin (Lipitor) and lisinopril (Prinivil, Zestril) both help treat heart disease. While atorvastatin is used to lower levels of cholesterol and reduce the risk of heart attack and stroke, lisinopril is used to treat high blood pressure and heart failure, and reduce the risk of death after a heart attack.

The popularity of these medications is not shocking, considering heart disease is the [leading cause of death](#) in the United States, according to the Centers for Disease Control and Prevention.

Levothyroxine, the generic for [Synthroid](#), is used to treat hypothyroidism, a condition where the thyroid gland underproduces necessary hormones for the body. About [4.6% of the population](#) has hypothyroidism, so it's no surprise that levothyroxine was the third-most popular prescription medication in the U.S. during 2019.

Most expensive drugs

The 3 most expensive medications in 2019 all have a list price of over \$45,000 per month. Myalept, Ravicti, and Actimmune all treat relatively rare conditions, but in most cases, patients taking these medications have few alternatives, and they are stuck with a sky-high bill at the pharmacy.

Manufactured by Aegerion Pharmaceuticals, [Myalept](#) has a monthly list price of \$64,859. While it is used to treat an uncommon condition called generalized lipodystrophy, there are no other alternatives available. Mylapet is self administered once a day, and patients typically use 14 vials per month with a list price of \$4,632.82 per vial.

[Ravicti](#) is manufactured by Horizon Pharmaceuticals and has a list price of \$52,556 per month. It is used to treat urea cycle disorders, which result in high levels of ammonia in the blood. Patients typically use 11 bottles per month with a list price of \$4,796 per bottle.

Also manufactured by Horizon Pharmaceuticals, [Actimmune](#) is used to treat osteoporosis and chronic granulomatous disease, disorders that cause the immune system to malfunction. Patients typically take Actimmune 3 times a week, and on average, go through about 11 single-use vials a month.

Most and least expensive cities for prescription medications

Drugs are expensive, but some patients are feeling these high prices more than others. This is partly because drug prices vary by city.

Throughout 2019, San Francisco was the most expensive city for prescription medications, while Atlanta was the least expensive. In San Francisco, drug prices as a whole were 17% higher than the national average, while in Atlanta, drug prices were 22% lower than the national average.

Both of these cities are highly populated, so what's causing the discrepancy in price? Differences in cost of living might account for some of the large price variations, as well as pharmacy markups. But it may all boil down to the fact that drug prices are just outright complex.

Drug list price changes

This year, a total of 629 brand and generic medications increased in price by an average of 8.2%. On the flip side, only 156 drugs decreased in price in 2019. Of the increases, 561 were brand drugs, and 62 were generic. For comparison, in 2018, 701 drugs increased in price by an average of 9.5%.

Below are some popular drugs that saw price bumps this year.

2019 List Price Increases

GoodRx, 2019

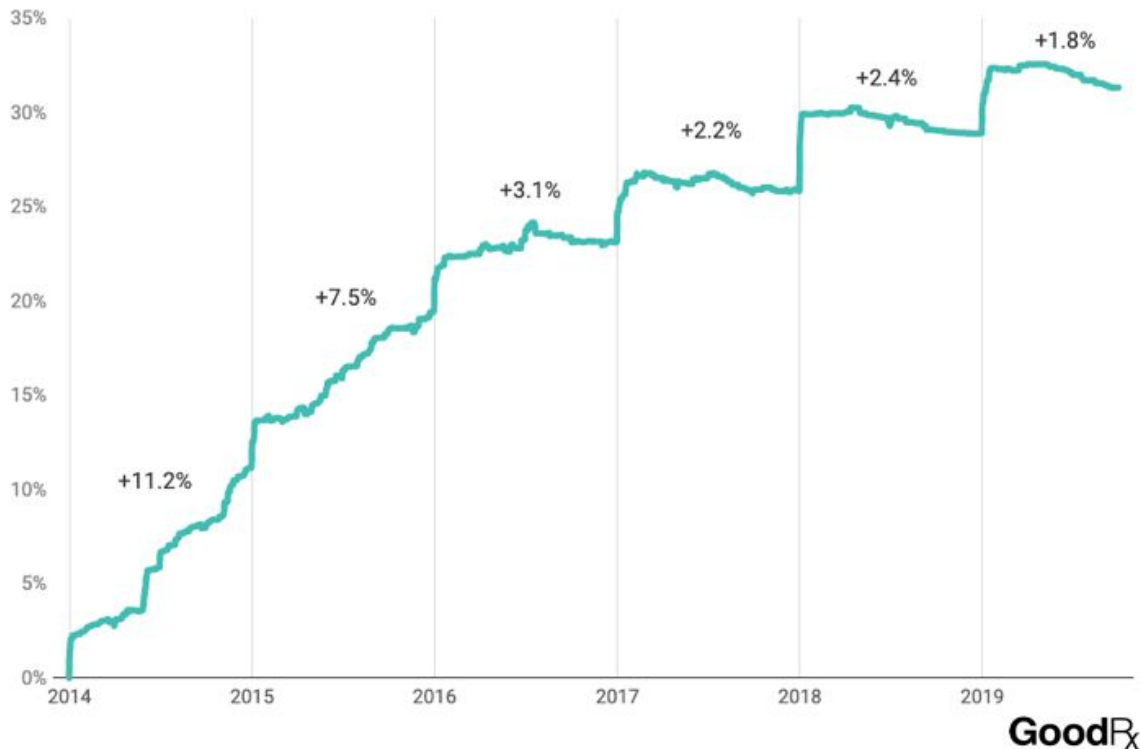
Drug Name	Price Increase
Irbesartan	53%
Timolol	19%
Losartan/hctz	19%
Tanitidine	18%
Cosentyx	10%
Entresto	10%
Amoxicillin/potassium clavulanate ER	10%
Viibryd	10%
Lumigan	10%
Restasis	10%
Armour Thyroid	9%
Xeljanz	9%
Afrezza	9%
Xarelto	7%
Invokamet	6%

(These are 15 of the 629 drugs that increased in price in 2019)

GoodRx

These individual increases contributed to a 1.8% increase overall for all brand and generic medications in 2019. This number comes from the GoodRx List Price Index, a model that tracks list price changes.

GoodRx List Price Index



These numbers are based on a medication's list price—the official price set by the manufacturer. While few people actually pay the full list price of a drug, it is a powerful indicator of drug pricing trends because it [informs](#) other prices, like the cash price or copay that people pay in pharmacies. What's more, high-priced drugs end up raising insurance rates and overall healthcare spending, which trickles down to patients in the end.

Generics released

This year, 54 medications saw a [first-time generic](#), but more than half of those have yet to hit pharmacies. While generics for blockbuster drugs like Lyrica went on the market, other generics have been approved but are still not accessible to patients. For example, generics for [Bepreve](#) and [Banzel](#) have been approved for over 8 months, but have yet to make it to pharmacies.

Lifesaving drugs like Narcan, Latuda, and Afinitor still don't have an available generic, even though the FDA approved one this year.

The lack of generics is a problem, especially considering the price of the drugs that are still awaiting their generic. Many are specialty medications that cost thousands per month, and in

these cases, patients are stuck paying for the brand as they wait for the generic to make it to shelves.

Game-changing medications and legislation

Drugs that made waves

Every year, medications are approved that change the landscape, affect drug prices, and alter prescription fills. In 2017, generic Viagra was approved, [spurring](#) a surge in overall prescriptions for erectile dysfunction medications, and in 2016 the authorized generic for EpiPen was [approved](#) amid scrutiny over the climbing prices for auto-injectors.

This year, several drug approvals made waves, for better or for worse. We saw the most expensive drug approved to date and the approval of multiple new generics that provide cheaper options for patients.

1. The most expensive medication approved to date

[Zolgensma](#) was approved in May to treat spinal muscular dystrophy, and it has been highly controversial for multiple reasons. With a price tag of \$2.1 million, Zolgensma is the [most expensive drug ever launched](#), and manufacturer Novartis has drawn criticism for pricing tactics. Zolgensma was priced so high that insurers set [restrictions](#) specifically for the drug, like presence of symptoms and maximum age at treatment.

In addition to highlighting the ever-climbing prices of specialty drugs, the approval of Zolgensma shined a light on flaws in the clinical trial process. According to the FDA, Novartis [mishandled](#) testing data and delayed reporting the issue. Novartis asserts that the flawed data hasn't compromised product safety, but the company is still facing criminal penalties.

2. A turning point for rapid-acting insulins

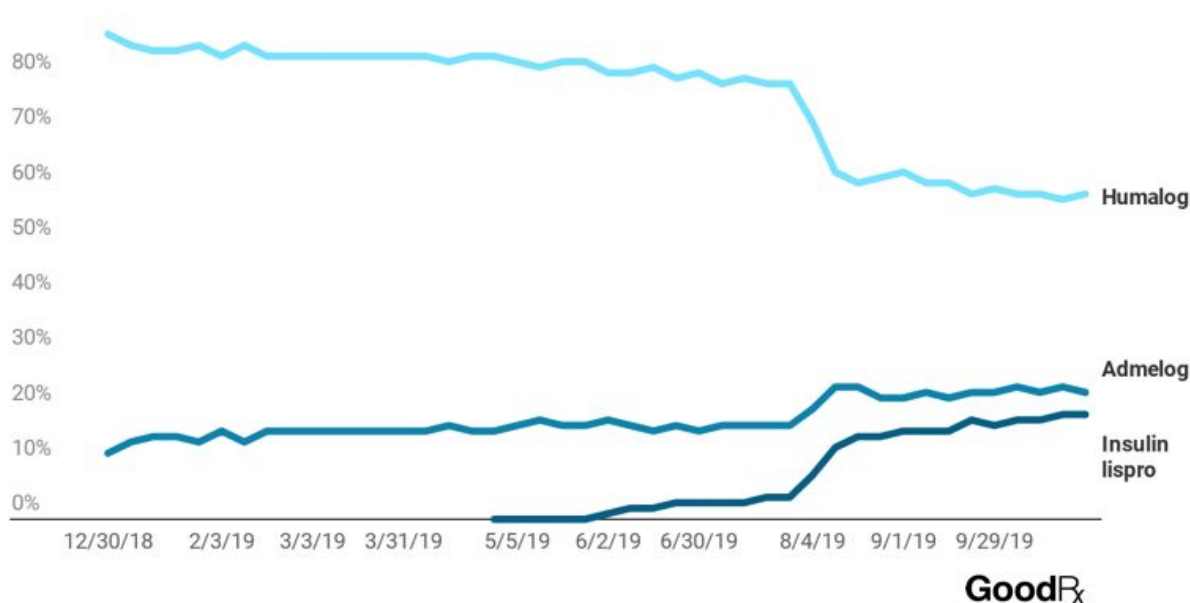
The first-ever generic insulin was approved this year, marking an important step for the diabetes community. Manufacturer Eli Lilly released [insulin lispro](#), the generic for [Humalog](#), with a list price of \$265 for a pack of 5 KwikPens. This approval opened the doors for affordable options for patients, and forced rapid-acting insulin manufacturers to alter their prices to stay competitive. But it also highlighted issues with generic drug approvals.

Once insulin lispro was released, multiple manufacturers scrambled to keep their medications competitive. Sanofi decreased the price for brand name [Admelog](#) by nearly 50%, and Novo Nordisk [announced](#) that they would be releasing generics for [NovoLog](#) and [NovoLog Mix](#) insulins in early 2020.

But despite the noise over the affordable options, most patients are still filling for the expensive brand Humalog. According to a GoodRx analysis, after more than 8 months, only a marginal amount of fills are for the more affordable insulin alternatives, insulin lispro and Admelog.

Market Share for Humalog, Insulin Lispro & Admelog

GoodRx (12/2018 through 9/2019)



Much of this is due to the fact that insulin lispro is an authorized generic, which means that only 1 manufacturer is allowed to produce it—typically the manufacturer producing the brand. While this reduces competition and leads to high prices, manufacturers of authorized generics are also less inclined to tout their new generic because they make more when patients fill the more pricey brand drug. Additionally, insulin lispro has experienced shortages in certain areas, and many patients and pharmacies have struggled to find it.

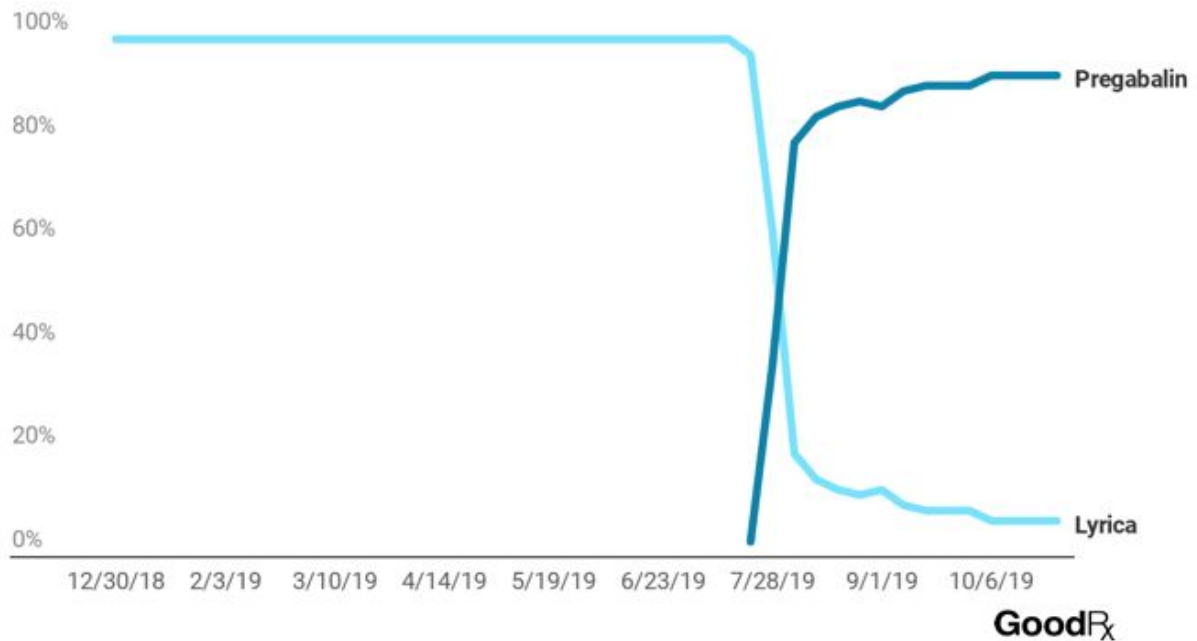
3. Generic for blockbuster drug Lyrica

This July, 9 manufacturers were approved to market [pregabalin](#), the generic for Lyrica, a medication that has been prescribed to over 9 million people since its approval in 2013.

The new generic, which can be purchased for as little as \$20 with a GoodRx coupon, is good news for the epilepsy community (it treats nerve pain and seizures). But it also shows what an ideal generic release should look like. Unlike insulin lispro, where most patients are still filling for the expensive brand drug, nearly all patients switched over to generic pregabalin only weeks after its approval.

Market Share for Lyrica and Pregabalin

GoodRx (12/2018 through 9/2019)



This massive uptake is likely in part due to the number of manufacturers that have been approved to manufacture pregabalin. While insulin lispro only has 1 manufacturer because it's an authorized generic, 9 manufacturers were approved to manufacture pregabalin. This increases competition and reduces prices.

Noteworthy events and laws (by GoodRx Analyst Diane Li)

This year, prescription drug pricing legislation has seen movement in both federal and state-level government. All this action can be attributed to policymakers prioritizing it on their agendas and Americans expressing concern over the affordability of drugs.

In 2019, according to the National Congress of State Legislatures, there have been over 900 prescription drug bills introduced in all 50 states, and 130 bills have been enacted in 42 states. Here are some important bills that were passed in 2019.

- In light of the rising prices of insulin drugs, [Colorado](#) made [headlines](#) recently when Governor Jared Polis signed a bill that caps a patient's insurance payment for insulin drugs at \$100 per month. The bill will go into effect on January 1, 2020.
- Several states such as [Colorado](#), [Florida](#), and [Maine](#) passed laws to legalize the importation of medications from Canada to hopefully provide consumers with cheaper alternatives. Despite the passage of the laws, states are still required to submit proposal

importation plans to the federal government for approval. In addition, federal law currently [restricts](#) which drugs can be imported. For example, insulin is currently barred from being imported from Canada. Some [critics](#) assert that state bills allowing importation undermine current efforts being made in medication safety.

- [Arizona](#), [Virginia](#), and [West Virginia](#) passed legislation allowing manufacturer coupons and other financial support to count towards a patient's insurance deductible and out-of-pocket maximum. For example, if a patient's copay for a drug is \$100, but the patient uses a manufacturer's coupon that reduces the copay to \$20, the \$100 still counts towards the deductible. This is important because patients who cannot afford medication can use coupons that help them access cheaper medications, while also contributing to their deductible, thereby moving them past the phase of insurance where they must pay completely out-of-pocket for a drug.

As the 2020 presidential election looms, there has been considerable bipartisan effort to tackle prescription drug prices on the federal level. President Donald Trump has made statements reaffirming that drug pricing is a priority for him. Additionally, members in both the House and Senate have introduced bills tackling medication prices—notably, Speaker of the House Nancy Pelosi (D- California) and Senators Chuck Grassley (R-Iowa) and Ron Wyden (D-Oregon).

- In July, President Trump announced that the [White House](#) was working on an executive order that ties the price that Medicare pays for drugs to drug prices that other countries set. However, the current plan is only for a pilot program, and it's likely that drugs included in the program will be limited. Until the White House introduces the executive order, it is hard to tell what the scope and impact of such a policy will be.
- Speaker of the House Pelosi introduced a [drug pricing bill](#) that allows for Medicare to negotiate lower prices for the 250 most expensive drugs, with the intent to make the negotiated price also available to private insurers. The negotiated price will be tied to the prices of drugs in other countries, and drug manufacturers' failure to comply will result in severe financial penalties. The pharmaceutical industry severely opposes this bill, arguing that it will threaten research and development of new therapeutics.
- Senators Grassley and Wyden introduced the [Prescription Drug Pricing Reduction Act](#) in July. Some proposals in the bill are aimed towards Medicare Part D beneficiaries, such as the provision to mandate an out-of-pocket maximum of \$3,100. Other provisions require manufacturers to pay the government if drug list price increases grow faster than inflation. However, the bill is receiving considerable pushback from Republicans in the Senate.
- In 2019, a federal judge [blocked](#) a [Centers for Medicare & Medicaid rule](#) that required direct-to-consumer television ads for prescription drugs to display the list price of the medication.

These highlights are a snapshot of the many policy actions happening in all levels of government. What remains to be seen is how the changes will translate to improved affordability of prescription drugs.

GoodRx accomplishments

2019 was a big year here at GoodRx.

- In March, we reached a major milestone—Americans, armed with GoodRx prices and savings information, have [saved \\$10 billion](#) on their prescriptions since the company was founded, and this November that number increased to \$15 billion.
- In August, Fortune included us on their [Change the World List](#), an award that recognizes companies making an impact.
- That same month, the [Los Angeles Business Journal](#) named us as one of the 2019 Best Places to work.

From the start of GoodRx, our goal has always been to make healthcare accessible and affordable to all Americans. With that in mind, in September, we launched our newest venture—[GoodRx Care](#). This new service, powered by our friends at Hey Doctor, offers affordable online medical visits for conditions including anaphylaxis, urinary tract infection, acne, and birth control.

We think that GoodRx Care addresses a real need in the American healthcare system, but we aren't finished. We will keep working until healthcare is affordable and accessible to all.

2020 predictions (by GoodRx Co-CEO Doug Hirsch)

It was quite a frustrating year for healthcare costs. Despite all the congressional hearings, White House whitepapers, and endless headlines, healthcare remains out of reach for too many Americans. The economics of prescriptions and medical care remain dizzyingly complicated, and prices of care continue to rise.

So what does 2020 hold for drug pricing and healthcare as a whole? Here's our forecast .

1. Yup, even more expensive drugs are on the way

In 2018, one quarter of all new prescription drugs had a list price over \$30,000. 2019 saw the arrival of America's first \$2 million drug, [Zolgensma](#).

Crazy, yes, but we likely haven't hit the ceiling yet. While the manufacturers who release these expensive drugs get hit with a predictable backlash, every new crazy-high price sets an even higher bar for future drugs. It's very likely that the most expensive drug ever to be approved may still be ahead of us.

As for the ones already out there? You can also bet that on January 1, the prices of dozens,—if not hundreds—of drugs will quietly tick higher (in 2019, prices rose on [about 500 drugs](#) days after the New Year).

2. Patients will pay more out of pocket

This prediction is just stating the obvious. Reports analyzing 2020 insurance plans agree on one thing: Insurance is getting more expensive and covering less. According to the [Kaiser Family Foundation](#), the average family premium in 2019 was \$20,000, a majority of enrollees have a deductible, and recent research done by GoodRx revealed that Medicare plans are covering fewer drugs.

So what does this mean for patients? Higher out-of-pocket costs across the board. In sum, your bank account will be thousands of dollars smaller at the end of the year purely because of insurance.

3. Your next doctor visit may be online

Americans find it increasingly difficult to see a doctor, and the [physician shortage](#) is predicted to get worse in coming years. In an effort to fill in these care gaps, companies offering virtual visits for conditions ranging from erectile dysfunction to mental health to sexually transmitted diseases have popped up over the last few years.

Despite a lot of options, though, telemedicine is still a pretty niche business: Only about 4% of patients have tried telemedicine. 2020 could be the year that telemedicine breaks through, because it won't be just an option provided by insurance, but because patients will demand better access to care—and find it on their own.

This past year, we started our own telemedicine service, [GoodRx Care](#), with the lofty goal of ensuring that all Americans have affordable and accessible medical care. GoodRx Care offers online medical services to patients across America starting at \$20 per visit. No insurance required. So what does 2020 hold for GoodRx Care? More conditions covered and more patients accessing faster and less expensive care.

4. GoodRx will hit \$25 billion saved

We ran the numbers and found that GoodRx has helped Americans save \$15 billion since we started. Every day, patients save \$20 million with GoodRx.

But we aren't done, and we're not waiting for someone else to fix the broken healthcare system. We believe Americans deserve better, faster, and more affordable access to their healthcare, and we will keep working until that happens.

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Methodology:

Most prescribed medications:

This list of popular medications is based on a nationally representative sample of U.S. prescription fills from July 1, 2019 to October 31, 2019—not fills using GoodRx. The sample only includes data from retail community pharmacies (which include independent pharmacies, chain pharmacies, supermarket pharmacies, or mass merchandiser pharmacies) that have state licenses to distribute prescription medications to the general public.

Most expensive medications:

Prices in this analysis are the list price, which is the price the pharmaceutical company assigns as an official price for a drug, as of October 31, 2019. To compile the list, we identified the most expensive drugs by list price, excluded drugs that were administered under the supervision of a healthcare provider, and obtained typical fill quantities using our data and information from drug manufacturer websites to compare the monthly price of these drugs. Using the official manufacturer list price, we calculated the total cost of a 1-month supply given a typical dosing schedule. For drugs where there was a large effective dosing range, or where patient weight determined dosing, we selected a dosing quantity based on claim volume.

Most and least expensive cities:

This data represents the cash prices for the 500 most commonly prescribed medications in 30 of the most populated cities in the U.S. over the last 12 months (ending October 31, 2019). These numbers are based on a representative sample of U.S. prescription fills (not fills using GoodRx) and come from several sources, including pharmacies and insurers.

List price changes:

These numbers are based on published list prices set by the manufacturers of prescription drugs, and the prescription drug mix as dispensed by community retail pharmacies, as of October 31, 2019. The basket of drugs observed includes almost 3,000 drugs, and 24,000 National Drug Codes (NDCs). The subset of drugs does not include drugs administered by healthcare practitioners or over-the-counter medications.