Combined oral contraceptive (COC) prescribing to maximize cost-savings

Neil Hardy
Associate Director of Medicines Management, NHS Hampshire

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ne of the central objectives of the Government reforms for the new NHS is to make efficiency savings of £20 billion by 2015. With 80% of the commissioning budget being handed over to GPs, the pressure will soon be on Clinical commissioning groups (CCGs) to make cost-effective decisions to ensure that each pound spent is used to bring maximum benefit and quality of care to patients.

Prescribing is a key area where money can be released by tackling any unnecessary spend on drugs through, for example:

- Reducing over-prescribing
- Replacing expensive drugs with equally effective, lower-cost brands.

A case study from NHS Hampshire illustrates just how effective a prescribing review can be, and the savings that can be made by switching to a cheaper brand.

NHS Hampshire serves a population of approximately 1.3 million covering an area of around 1,428 square miles – the geography consists of a mixture of rural, semirural and urban areas. There are over 900 GPs in the area and 145 practices. Hampshire has a relatively stable population, although peaks can be seen in the late teens and early twenties age groups. There are approximately 297,000 women in Hampshire between the ages of 15 and 49 years.

Neil Hardy is Associate Director of Medicines Management at NHS Hampshire, and works closely with pharmacists, technicians, GPs and practices to involve them in the annual cost improvement programme, which he leads. In this role, he has reduced prescribing costs for COCs by encouraging GPs to switch from familiar contraceptive brands to less expensive Consilient contraceptive products containing the same active ingredients.

Consilient contraceptives, which include:

- Rigevidon® (ethinylestradiol/levonorgestrel)
- Gedarel® (ethinylestradiol/desogestrel)
- Millinette® (ethinylestradiol/gestodene)
- Tri-Regol® (ethinylestradiol/levonorgestrel)

Contain the same active ingredients, in the same strength as the equivalent brands on the market, but are less expensive.

The Consilient range of COCs is between 22% and 33% less expensive than established brands with the same active ingredients. NHS Hampshire have estimated that if all women currently taking a COC for which there is a Consilient brand alternative were switched to the corresponding Consilient brand preparation, then NHS Hampshire would save approximately £140,000 per year.

The decision to choose Consilient contraceptives was made in the context of NHS Hampshire’s local action plan to reduce unnecessary spend on prescribing and was also triggered, in part, by a shortage in supply of two commonly prescribed COC brands, and the need to guarantee the availability of COCs for patients.

The guidance was developed following discussion with the local sexual health services. An information booklet provided GPs with key information on how to implement alternative prescribing from currently prescribed brand name products to the Consilient COC equivalent.
• The information booklet was sent directly to GPs and the benefits of the switch were reinforced by pharmacists and technicians attached to individual practices.
• The guidance on the use of Consilient COCs was also highlighted in NHS Hampshire newsletters, as well as on the primary care website.
• Medicine Management Groups were key to discussing the recommendations directly with GPs in the context of the Quality and Outcomes Framework and Prescribing Incentive Schemes. So far 49 practices have signed up to make the prescribing change, and it is estimated that further GPs and practices will also implement the changes.

Sharing information
A draft letter was provided for GPs to amend and send to patients to inform them of the product switch and to reassure them that it should not affect the effectiveness of their prescription.

Community pharmacists were also fully briefed to ensure that:
• They were in a position to discuss any concerns with patients regarding the change in prescription.
• The products were in stock to fill the prescriptions.

Cost-saving snapshot
• Total GP prescribing spend in Hampshire is £185 million per annum.
• Total prescribing spend on COC brands that Consilient can replace was £40,000 per month before implementing alternative prescribing; this has already reduced by approximately £9,000 per month.
• In the practices that have agreed to implement alternative prescribing, prescribing of Consilient brands, as a total of all COC prescriptions is 64%. Looking at the total prescribing of COC within Hampshire, the proportion of Consilient brands is currently 29%.
• NHS Hampshire expects many of the practices that did not implement this action in 2011/12 to do so in 2012/13.
• NHS Hampshire estimate that they have saved almost £40,000 to date since the initiative began in April 2011.

Reinvesting in the local community
The key benefit of switching women to a Consilient COC brand equivalent is cost-savings, and the release of money at a local level which can be reinvested in redesigning and improving patient services.

NHS Hampshire was previously the largest PCT in England, and is now part of the SHIP (Southampton, Hampshire, Isle of Wight and Portsmouth) PCT Cluster. The cluster was established on 6 June 2011 to oversee the transition period from PCTs to CCGs in the commissioning of local health services.

Neil Hardy is Associate Director - Medicines Management and Controlled Drugs Accountable Officer for the SHIP PCT Cluster, which is responsible for supporting the establishment of CCGs and ensuring that robust commissioning support services will be in place in the future.

The cost-savings made by NHS Hampshire through switching patients to Consilient branded contraceptive preparations is now being shared through other members of the SHIP PCT cluster.


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A range of combined oral contraceptives that satisfies their needs and your budget

Why pay up to 49% more?

Visit www.knowyourcontraceptives.co.uk to find out how

Tryed and trusted contraceptive combination with confidence from over 63 million cycles of experience worldwide

Same active ingredients, as Mericon® (Gedarel 30/150), Marvelon® (Gedarel 30/150), Microgynon® (Rigevidon), Femodene® (Millinette 20/75), Femodette® (Millinette 30/75) & Logynon® (TriRegol)

Comprehensive support package for HCPs and patients including free pill reminder app

A cost effective range of combined oral contraceptives that could provide the NHS with a potential annual cost savings of £6.7m

Designed without compromise

Miley 20/150
30μg ethinylestradiol / 150μg levonorgestrel

Millinette 30/75
30μg ethinylestradiol / 75μg gestodene

TriRegol 20/150
15μg ethinylestradiol / 20μg gestodene

Millinette 30/75
30μg ethinylestradiol / 75μg gestodene

Femodette 30/75
30μg ethinylestradiol / 75μg gestodene

Millinette 30/75
30μg ethinylestradiol / 75μg gestodene

Miley 20/150
30μg ethinylestradiol / 150μg levonorgestrel

Gedarel 20/150
30μg ethinylestradiol / 150μg desogestrel

Rigevidon 30/150
30μg ethinylestradiol / 150μg desogestrel

Gedarel 30/150
30μg ethinylestradiol / 150μg desogestrel

References

3. ANO May 2012. Cost comparisons Rigevidon® vs. Microgynon®,
Gedarel® 20/150 vs. Marcelon®; Gestasafe® 30/150 vs. Marcipak®,
Millinette 30/75 vs. Femodette®, Millinette® 30/75 vs. Femodette®,
TriRegol™ vs. Logynon™


Cost savings of £6.7m

Adverse events should also be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to Consilient Health (UK) Ltd, 500 Downhill Road, London, W4 5UK, or on 020 8916 2210.