



Drug Policy 101: Kaiser Permanente's Approach to Pharmaceutical Detailing

This brief describes Kaiser Permanente's approach to providing high quality, unbiased information to prescribers.

As the nation's largest private integrated delivery system, Kaiser Permanente has long understood that pharmaceutical marketing tactics can steer patients and prescribers toward drugs that cost patients more without delivering better clinical outcomes. Pharmaceutical marketing specifically directed to physicians and other prescribers - a tactic known as detailing - usually seeks to steer them toward prescribing higher-priced, lower-value drugs and can make it difficult for physicians to make well informed, unbiased decisions. For these reasons, Kaiser Permanente takes a unique approach to limit the influence of pharmaceutical sales representatives and ensure our prescribers have the best available, unbiased information needed to care for our members. We hope that sharing our best practices with policymakers, health systems, and other stakeholders can help facilitate a more evidence-based approach to prescribing.



What is pharmaceutical detailing?

Pharmaceutical detailing is marketing conducted by drug manufacturers that directly targets physicians, pharmacists, and other health care providers. Detailing is commonly done by sales representatives who meet with prescribers to communicate the benefits and uses of their company's drug products. In addition to direct visits, it is also common for companies to host promotional events and invite industry-paid clinicians to discuss the use and benefits of particular drugs.

Pharmaceutical companies spend more on marketing - including detailing - than they do on research and development.^{1,2,3} In 2016 alone, the pharmaceutical industry spent \$5.6 billion on sales visits to prescribers.⁴ While detailing may be useful and educational in some contexts, it is generally intended to increase pharmaceutical company revenue by increasing drug sales and steering prescribers toward higher-priced drugs that might not be the best value for the patient. This makes it difficult for prescribers to find the unbiased information they need to make informed decisions.

Kaiser Permanente's approach to educating prescribers

Our approach to medication use management is patient-centered, evidence-based, and driven by physicians and pharmacists within Kaiser Permanente. Our collaborative programs and evidence-based strategies promote high-quality, affordable pharmacy care and utilization. The integrity of our process and the quality of information generated for our prescribers to guide clinical decision-making leads to high physician satisfaction and confidence in our formulary.

† Kaiser Permanente is recognized as one of America's leading health care providers and nonprofit health plans. Our integrated model combines coverage and care delivery. We also operate pharmacies that dispense drugs prescribed by Permanente Medical Group physicians, who contract exclusively with our health plans.

We ensure our providers, care teams, and pharmacists have access to the best available, unbiased evidence by following the steps below:

- **Evidence-based materials:** Rather than rely on information solely from the pharmaceutical industry, we develop our own evidence-based materials and processes to educate our physicians. Our clinical pharmacist experts conduct a thorough and independent review of all available materials, data, and evidence on a drug, and use this information to develop materials for our prescribers. Throughout this process, they collaborate with the appropriate physician specialists, who are active in direct patient care.
- **Internal education:** Our clinical pharmacist experts then ensure our prescribers have access to this unbiased evidence through various methods, including peer-to-peer education, direct in-person and virtual visits, and presentations to specialist groups. We also use our electronic health record to deliver reminders about the latest evidence-based information related to a particular drug at the time of patient care and prescribing.
- **Pharmacy and clinical partnerships:** Physicians in each of our regions work with our clinical pharmacist experts – rather than with pharmaceutical sales representatives – to help inform prescribing decisions aligned with the patient’s best interest. In addition to our clinical pharmacists making virtual and in-person visits to our medical facilities to share drug information, our physicians can also reach out to our experts to discuss specific therapies and cases. This partnership offers an evidence-based approach to ensure patients receive the highest-value treatment.
- **Limited influence from pharmaceutical sales representatives:** Kaiser Permanente discourages pharmaceutical sales representatives from entering our facilities or collecting data on our patients, physicians, and other prescribers. If a prescriber chooses to meet with a sales representative, Kaiser Permanente must first give the representative an orientation about what they can and cannot discuss with our prescribers. In most cases, they must also register with our pharmacy before entering our facilities, and they are not allowed to give prescribers additional information beyond what was requested. Sales representatives can meet with our Drug Intelligence and Strategy and Pharmacy Contracting teams to share evidence about their drugs. We closely scrutinize information provided by pharmaceutical companies to maintain our strict focus on evidence. Additionally, our physicians and other prescribers are strongly discouraged from accepting free drug samples from pharmaceutical companies.



Our approach, grounded in the importance of evidence-based decision making, transparent processes, and strong relationships within our organization, is widely accepted and appreciated by our pharmacy and clinician experts alike, and it has led to high formulary compliance and generic substitution rates across our regions. We believe our internal education policies and practices have played a significant role in empowering providers in our system to make the best prescribing decisions for our members and provide the highest quality of care.

References

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