different amounts per health category even after adjusting for population size and needs. 

**PHP72** IMPACT OF CLINICAL AND HEALTH ECONOMIC PUBLICATIONS ON COMMERCIAL SUCCESS OF PHARMACEUTICAL PRODUCTS IN THE U.S. 

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OBJECTIVES: The study objective was to estimate the causal effect of the publication of drug-specific clinical and health economic and outcomes research (HEOR) publications on product sales. METHODS: Quarterly sales data for twenty-two drugs, blockbusters (SSRIs) and Proton Pump Inhibitors (PPIs). The top 5 drug classes dispensed as drug samples and discount generics. Additionally, 8% of the U.S. non-institutionalized civilian population was insured for prescription drugs. Enhanced Therapeutic Classification (ETC) codes to report the top 5 drug classes that were dispensed as drug samples and discount generics. We examined the extent to which prescription claims databases do not provide complete records of insured patients’ drug use and report the top 5 drug classes that were dispensed as drug samples and discount generics. We used the 2012 Medical Expenditure Panel Survey (MEPS) dataset. We included participants who purchased at least one prescription medication and had prescription drug insurance for 2012. We quantified the extent to which insured patients used drug samples and/or discount generics. We report these descriptive statistics. We used Enhanced Therapeutic Classification (ETC) codes to report the top 5 drug classes that were dispensed as drug samples and discount generics. RESULTS: A total of 78.6% of the U.S. non-institutionalized civilian population was insured for prescription drugs. The total number of prescriptions dispensed to insured consumers, at least 0.5% were drug samples and 4.8% were potentially discount generics. Additionally, 8% of insured consumers received at least one sample medication and 21.5% used at least one potential discount generic product. The top 5 drug classes dispensed as drug samples in descending order were statins, Angiotensin Converting Enzyme (ACE) inhibitors, beta-blockers (cardiac selective), Selective Serotonin Reuptake Inhibitors (SSRIs) and Proton Pump Inhibitors (PPIs). The top 5 drug classes dispensed as discount generics in descending order were statins, ACE inhibitors, SSRIs, beta-blockers (cardiac selective) and PPIs. CONCLUSIONS: Our results indicate that drug samples do not contribute substantially to the problem of missing prescription data on claims databases. A substantial number of prescriptions that are discount generics may be missing from these databases.

**PHP84** IMPROVED HEOR WRITING SKILLS OF KEEN INTEREST TO BIO/PHARMA HEOR DIRECTORS AND MANAGERS 

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OBJECTIVES: While all pharmaceutical organizations are held accountable for generating their products’ health economic and outcomes (HEOR) data, it is not known whether professionals in HEOR agree on the quality of materials being disseminated; nor do we know how often these documents are developed internally or outsourced. Therefore, the objective of this study was to assess the perceived level of quality of the materials as well as to develop the expanded services and mandating quality. Studies show that wellness programs are growing in number and in medical services, and incentives resulting in significant to non-significant return-on-investment (ROI). Few employers have measured the ROI and even fewer their health outcomes. However, successful programs have shown a median ROI between 2:1 and 3:1. Studies suggest that disease-management services account for significant ROI while wellness programs do not. For example, the partnership between Piedmont and WellStar of Georgia supported implementation of care-management programs, with higher quality at a fraction of the cost.