Miracle Pill

“You never change things by fighting the existing reality. To change something, build a new model that makes the existing model obsolete.”

~Buckminster Fuller

The price of Genomitex increased 3000% on Tuesday. This in itself was newsworthy. But the financial maneuvering by Pfivarna that followed was considered a strategic coup d’état that would go down in the history of genius business power moves. Wall Street rejoiced. For anyone who had been prescribed the drug, however, the optics were quite different.

Amy Zhang, a newly credentialed actuary, had just completed a modeling exercise on level-funded groups when the news buzzed her smart watch. She let out a few choice curse words, and then chastised herself. She needed to cut back on those before her due date. Don’t want little Peanut’s first words to sound like that.

She flagged down Mike, her boss. “Did you see this?” she demanded as she pulled up the newsfeed on her screen. The pricing manager leaned over to read.

“3000%? That can’t be good.” He stepped away. “I was on my way to Innovations and Market Committee. I can let them know. Meanwhile, call John and figure out what’s going on there.”

He strolled away, and Amy continued to stare at the screen, dumbfounded. She felt a kick from little Peanut, and rested a hand on her ballooned stomach, hoping to calm his little legs.

Genomitex had been introduced 18 months ago as a miracle drug by drugmaker Pfivarna. It was bio-tailored to any patient’s health needs, and it had no side effects. Early feedback from the market indicated that it would make other drugs obsolete. Maybe other healthcare options. Just one daily pill specially made for that patient’s genetic make-up and health conditions. For all this, it wasn’t cheap, but considering it was eliminating other prescriptions, it was actually saving BestYouHealth some significant money. But not after this price hike.

Amy reached for the grey office phone and punched in the familiar number. If she was going to try and price this, she should take Mike’s advice and call their Pharmacy Benefits Manager.

John hadn’t told her anything new. The price hike was immediate. There were no deals in the works with Pfivarna. No rebates to be sought. In fact, John had been frantic that the manufacturer wasn’t taking any of the PBM calls.

Spinning around in her chair, she pulled up a spreadsheet. Typing quickly, she set up what she knew. Current price. New price. Members taking Genomitex. Divided by current member months. At this point, it was most of BestYouHealth’s members and more than half of their healthcare spend.

“At this price, they’re probably hiding from the pitchforks,” Amy muttered. Staring at the spreadsheet, there was only one conclusion to be drawn. If BestYouHealth covered this drug, they would be bankrupt in three months.

Amy phone played a marimba. Her husband was calling.

“Hi Brett.”

“Hey Ames! How’s your day going?”

“Um, not great. You know the drug, Genomitex?”

“Yeah, Mom’s on it. Loves it.”

“The price is going up. Like, a lot.”

“Good thing we have insurance then! You sound stressed. Listen, don’t get too stressed out. We don’t want Peanut to absorb any of that.”

Amy took a breath. Then two. “What’d you call about?”

“I was thinking curry for dinner. Does that sound good?”

“Fine. That sounds good. Not too spicy.” Amy’s stomach churned remembering the firebomb that was Brett’s last curry. She was zoning out when she realized Brett was telling her a story about one of his coworkers. She laughed at what seemed like the right place, and then quickly wrapped up the call.

“Got to go, hon. See you at home.”

“Okay, have a good rest of your day!” His cheery voice sang. Peanut kicked again.

Amy set down her phone, feeling a sense of emotional vertigo. She’d forgotten that Kathy, her mother-in-law, was on Genomitex. The drug had treated her numerous comorbidities, to the point where Kathy felt 20 years younger and could eat whatever she liked. She had even lost some weight on the miracle script. Would Kathy have to revert to her previous 10-pills-a-day routine?

Pfivarna couldn’t withhold this drug altogether. But how in the world could BestYouHealth afford to keep paying for it, Amy wondered staring at the very large numbers on her spreadsheet.

Amy glanced up and saw Mike back at his desk, returned from the Innovations and Market meeting. She hoisted out of her chair and walked over to his office.

“What did they say?”

Mike looked startled at the abrupt question. “Who?”

“I and M. What did they say about Genomitex?”

Mike blinked a few times. “The price hike? They were concerned. But we didn’t really strategize.”

Amy reeled. She grabbed the spare seat that sat against his office wall and sat. “Mike, if we cover the cost, it’s going to sink us. We’ll have to file an immediate rate increase of over
100% to all medical products, and even then, we may not have enough in reserves to cover
the cost until the increase is approved. If it’s approved,” she added, thinking about how
disturbed the Insurance department will be to see that kind of increase.

“Reinsurance will cover most of it,” Mike shrugged. “After reinsurance, we’re paying
barely more than we were before.”

“I thought Genomix was excluded from our contract,” Amy said uncertainly.

“Check that,” Mike said while scanning his email. “Oh, yep. There’s a meeting to discuss
it. Just got put on my calendar for 30 minutes from now. I’ll let you know what’s decided.”

Peanut kicked again, and Amy walked back to her desk, feeling like she was bobbing around in a
vast, empty ocean.

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An hour later, Amy was still scanning the news on Genomix. Pfivarna’s stock price had
soared, and several US Senators has threatened inquiry into pharmaceutical pricing practices.
Lines were queuing outside pharmacies with desperate people trying to fill their prescriptions
before the price hike kicked in, only to learn they were too late. There were hundreds of videos
on YouTube where irate customers were screaming at pharmacists that this was a matter of life
and death. Many pharmacies had closed for the day to protect their workers.

Peanut was growing increasingly active. Amy had to remind herself to breathe. Stay
calm. This would all work out in the end. But she continued doom-scrolling until her phone
marimbaed once more. It was Brett.

“Hi,” she answered, still scanning the feed.

“Hi Ames, sorry to call again, but my mom’s upset.”

“Oh yeah?” Amy, half-listening, clicked on another headline about savings from
Genomix in inpatient surgeries.

“She says she can’t get her medicine. Genomix, or whatever.”

“Yeah, that seems to be the story of the day.”

“What should she do? She’s panicking. What should I tell her?”

“Hell if I know,” Amy said.

“Language,” Brett reminded. “Seriously, weren’t you talking about Genoma-whatever
earlier?”

“They raised the price. A lot. And now people can’t afford it. And all the pharmacies are
shutting down to prevent a riot.”

“But insurance is still covering it, right?”

“For now.”

“Isn’t this illegal?”

“Nope. Pfivarna can charge whatever they want.” Amy spotted Mike’s wispy grey hair
bobbling over the row of cubicles. He was back from the emergency meeting. “Gotta go. Tell
Kathy to sit tight. This will probably resolve soon.” Amy ended the call and leapt up to intercept
Mike before he reached his office.

“What happened?”
Mike glanced around, then gestured Amy toward his office. She trotted behind him trying to read the back of his head for clues.

“Shut the door please,” he requested. Already, Amy could tell his flippancy from earlier was gone. She sat on the edge of the spare seat. Mike let out a long sigh. “We’re not going to cover it.” Amy’s jaw dropped, “Not at all?” “No.” Mike rubbed at his temples, “Leadership looked at the numbers from us and from several other reporting centers in the company, learned that reinsurance wouldn’t cover it, and rightly decided that it would financially sink us.” “I thought that too,” Amy nodded. “But… our members…” she trailed off. Her mother-in-law. Then she thought of something else. “When will we stop coverage? Even if we wait 30 days it could still—” “Today,” Mike cut in. “The moment the hike was announced. We’re putting out a press release,” he glanced at his watch, “in a few minutes. Hopefully it will just be a bargaining tactic. If all the other insurers do the same, then the manufacturer will be forced to back down on the price. In the meantime, we’ll cover all the healthcare that isn’t Genomitex.” “That isn’t much,” Amy said. “It’s the best move we can make. Our hands are tied with this one.”

Amy pushed herself to standing when Mike’s phone dinged. She started to leave when she heard him say “Aha.” Amy turned and he was pulling up something on his monitor. He glanced at her, as if just remembering she was still there. “Pfivarna press conference. You might want to see this. Maybe they’re backing down.”

Amy circled around to his side of the desk, to watch live footage of an empty podium. After a moment, she dragged around the spare chair and sank into it. Flashes illuminated the empty podium, and the general din of camera shutters and conversation on the feed increased. Amy leaned forward, ignoring the dull ache in her gut.

A well-coiffed man in his forties, expensive suit, stepped into frame. The room quieted. The cameras continued to click and flash.

“Good afternoon. I am Tom Grunaur, CEO of Pfivarna. By now, you have heard the momentous news of the day. We have increased the cost of purchasing Genomitex. This was done with a heavy heart, but was necessary for our continued research and development, and to cover the ever-rising expense of regulatory requirements. Genomitex has been revolutionary in modern healthcare, eliminating the need for multiple pharmaceuticals, lengthy hospital stays, and nearly eradicate side effects. Keeping this in mind, Genomitex has been priced to what the market can bear, considering vast savings elsewhere in the healthcare industry.”

Amy huffed. Same old line big pharma had been using for years. Mike grunted. “But we miscalculated. If you have seen the news, our necessary price increase has caused distress to our many patients. We never intended this. In addition, many heartless insurance companies have already refused to cover this necessary and life-giving drug.” Tom-the-suit then pulled out a list and started reading the insurance companies who wouldn’t cover the drug. BestYouHealth was on the list. “Here’s where they back down,” Mike muttered, eyes glued on the screen.
Tom continued. “We would like to offer a solution that will enable hundreds of millions of people to keep taking Genomitex without fear of cost-sharing, prior authorization, step therapy, and frankly, the need for insurance middlemen at all.”

Amy’s eyes widened. Was he saying—

“I am here to present GenomiHealth. A monthly subscription gains you access to cost-free physician assessment and Genomitex in the dosage you need for as long as you need.” A banner unfurled behind Tom, purple with gold lettering that read ‘GenomiHealth, a Pfivarna Company’.

“We’ll even cover hospital visits and emergency room care after you meet a reasonable deductible. You may start enrolling today. Now I’ll take your questions.” The feed erupted in noise and the sound of camera shutters.

Amy sat back, feeling stunned. This wasn’t an emergency solution. It was a strategy that effectively destroyed all health insurance carriers in one fell swoop.

Mike ran a hand through his thinning hair and let out a low whistle.

Amy let one single satisfying obscenity fly. Then her first contraction hit.

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One hour later, Amy and Brett sat in teal hospital waiting room chairs. Soft jazz was being piped in from what sounded like a tin can. Brett’s hand was gripping Amy’s, and his other hand held his phone, platformed with the stopwatch app open.

“That was five minutes apart,” he announced, loud enough for the paper shufflers at the check-in to hear.

Amy shushed him. “Stop. They’re getting the room ready now. Be patient.”

“Peanut isn’t being patient.” Brett stood, relinquishing Amy’s hand. “I’m going to go ask again.” He strode over to the desk once more.

Amy sighed. This was not going to be fun, but everything had been normal up to this point. It would be quick, and with drugs, bearable. And afterwards, she and Brett would have an adorable baby to love.

“Ames,” Brett’s voice hit right as the next contraction did.

She grimaced through the pain and waited for what seemed an eternity. Finally, when she could move again, she glanced over. Brett was gesturing for her to come to reception. He looked worried.

She hoisted herself up and shuffled across the room. “You gestured?” she asked, trying for levity.

Brett didn’t smile. “She said there’s a problem with the payment, or the drugs or something. I told her it was a mistake, but I’m not good with this insurance stuff.”

A woman with red frizzy hair sat behind the desk with a studied expression of concern. Her nametag said ‘Susan’.

“Oh, Amy tried. “Tell me what you told him.”

“You may or may not know, insurance has had a shake-up today. I see you gave us a BestYouHealth card,” Susan began.
“Labor and delivery should be covered, after deductible, which we have already met,” Amy recited. She felt like an elephant was stepping on her lower back. “I need to sit down.” Brett rushed over to the seats and dragged a chair back for Amy, right before the next contraction hit. Amy rode the wave, and then looked up at the clerk, who seemed positively uncomfortable.

“The thing is, BestYouHealth no longer covers Genomitex. As of today. We use that during delivery as it is much more effective than the prior pain medication.”

Amy’s mind flashed back to her last OB/GYN appointment. Did Dr. Reed tell her they used Genomitex? She couldn’t remember. “Can you just use the old drugs?” she asked.

“I can check.” The woman scurried away from her desk, no doubt to consult with a doctor or nurse. Or to escape.

Another contraction. Another wave of pain.

Amy turned to Brett after it faded. “We might have to quickly sign up for GenomiHealth.”

“Mom tried earlier today. There’s a three-day waiting period.”

Amy legs cramped and then the next wave of contractions hit.

Susan returned. “We don’t have any of the old drugs in stock. You could try and go to another hospital, or we can just set you up with a payment plan for the Genomitex.

Amy waffled, feeling like she was being buried in sand. Another hospital could take too long. She didn’t want to give birth on the side of the road. On the other hand, that was Peanut’s college fund down the tube. She was an actuary, for god’s sakes. She should be able to navigate the system a little better than this. But things kept chang-- Then another contraction hit.

Brett said, “Let’s do that.”

Amy signed 30-year payment plan papers, fighting back waves of nausea. Then a gurney arrived to wheel her back to labor and delivery. Brett held her hand walking alongside. The nurse on the other side patted her shoulder as they rode.

“Don’t worry, mama. Everything will be all right.”