



2025

# **BIG PHARMA'S NEW SALES SCHEME: EXPANDING PATIENT ACCESS OR A VIRTUAL PILL MILL?**

## **A DIRECT-TO-CONSUMER TELEHEALTH PLATFORM INVESTIGATION**

**U.S. SENATORS RICHARD J. DURBIN (D-IL),  
BERNARD SANDERS (I-VT), ELIZABETH WARREN (D-MA),  
AND PETER WELCH (D-VT)**

# INTRODUCTION

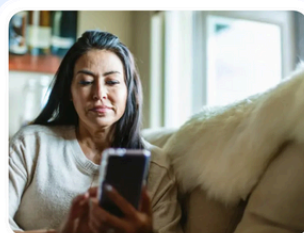
Over the past nine months, the offices of Senators Durbin (D-IL), Sanders (I-VT), Warren (D-MA), and Welch (D-VT) have investigated new telehealth platforms launched by pharmaceutical manufacturers Pfizer and Eli Lilly with telehealth companies they have paid: Populus, UpScriptHealth, Form Health, Cove, and 9amHealth.

These novel relationships between drug companies seeking to sell their medications, and the telehealth companies hand-picked by these pharmaceutical giants, appear intended to steer patients toward particular medications. At best, these relationships raise questions about conflicts of interest. At worst, they create the potential for inappropriate prescribing that can unnecessarily increase spending for federal health care programs.

This report is timely as manufacturers of blockbuster GLP-1 drugs, Eli Lilly and Novo Nordisk, announce new partnerships with telehealth firms to boost sales of these high-cost medications.

Pharmaceutical companies spend \$6 billion annually to flood the airwaves with direct-to-consumer (DTC) advertisements of prescription drugs.

**PfizerForAll™**



**Migraine? Talk to a telehealth doctor.**

Stay home and talk to a doctor online today. [Learn how.](#)

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These commercials fuel patient demand and steer patients to some of the most expensive medications. But this new DTC telehealth strategy employed by Pfizer and Eli Lilly turbo-charges these promotional activities. In the same breath, drug companies are now advertising a drug and linking a patient to a doctor—ostensibly chosen by the drug company—who can write a prescription for it.

In some cases, this new DTC telehealth relationship seemingly enables patients to self-diagnose and select the drug they want, akin to an Amazon shopping experience. These new partnerships between manufacturers and paid telehealth companies hold the potential to erode the patient-physician relationship and undermine independent medical judgement, which can leave patients with sub-standard care. Rather than a patient visiting their physician to discuss symptoms—during which time the provider would reach a diagnosis and explore a range of interventions including non-pharmaceutical treatments—this arrangement seemingly defaults to a medication-first paradigm. The DTC telehealth arrangement risks glossing over the comprehensive evaluation necessary for high-quality patient care.

Both the PfizerForAll and LillyDirect platforms describe medications offered by each company and the benefits they can have for patients, and provide links for patients to speak virtually with a health care provider. This creates the impression that any patient interested in a particular Pfizer or Eli Lilly medication can indeed receive it with just a few clicks, and the appearance that a drug manufacturer chose a specific telehealth provider who can ensure a patient receives the given medication.

Telehealth can help to address barriers to care, including providing an alternative for patients facing transportation obstacles, helping patients with stigmatized conditions, and identifying providers when there may be workforce shortages. This is especially true for under-treated conditions and diseases. But those important aspects of care can be undermined without comprehensive services that ensure a thorough evaluation and follow-up, especially if there is an appearance of a conflict of interest for the treatment provider.

**“This creates the impression that any patient interested in a particular Pfizer or Eli Lilly medication can indeed receive it with just a few clicks, and the appearance that a drug manufacturer chose a specific telehealth provider who can ensure a patient receives the given medication.”**

# EXECUTIVE SUMMARY

This report was compiled with information obtained via written responses from pharmaceutical and telehealth companies, more than a dozen telephone/video calls with stakeholder representatives, reviews of open-source sites (including company websites, LinkedIn, and HealthGrades), and an examination of the federal Open Payments Database and the Medicare Part D Prescriber Look-Up Tool.

Pfizer has launched its PfizerForAll platform for patients to have a telehealth visit for migraine care and other services through the companies UpScriptHealth and previously Populus—while also providing links to Pfizer’s migraine medication, Nurtec. Eli Lilly’s LillyDirect platform offers telehealth visits for diabetes care through 9amHealth; migraine care through Cove; and obesity care through Form Health and 9amHealth—while also providing links to Eli Lilly’s Humalog and other diabetes medications; Eli Lilly’s migraine medication Emgality; and Eli Lilly’s weight loss medication Zepbound.

This report reveals new findings about: the volume of patients who have engaged in this DTC telehealth arrangement and their prescription outcomes; the exposure and exchange of troves of patient data under these contracts; the financial relationship between Pfizer/Eli Lilly and their chosen telehealth companies; the business model used to funnel patients to specific prescribers; the nature of the patient consultations; and the promotional activities by Pfizer/Eli Lilly. Notably:

- **High rate of prescriptions issued.** Of patients routed by LillyDirect who visited a tele-provider, 74 percent received a prescription—including 100 percent of the patients who had a virtual visit with Cove. Further, it was shared by the telehealth companies that a 9amHealth patient was six-times more likely to be prescribed an Eli Lilly medication compared to another brand-name drug, and 66 percent of all Form Health prescriptions issued across all patients were for Eli Lilly medications.

- Of patients routed by PfizerForAll who visited a tele-provider through UpScriptHealth, 85 percent received a prescription.
- **Cursory Appointments.** The telehealth appointments do not always have to be conducted by video, meaning providers may be prescribing Pfizer and Eli Lilly drugs without laying eyes on a patient.
- UpScriptHealth, one of Pfizer's telehealth platforms, advertised a job opening to prescribers with the statement, "on average, providers can complete 6-10 visits an hour" saying "a completed visit is either an approval or denial of prescription request."
- **Patients can choose the drug they need.** Eli Lilly's telehealth partner Cove allows patients to pre-select which medication they seek to obtain prior to any consultation with a provider.
- **Opportunities to persuade these providers in other avenues.** Despite no overt incentives or bonus payments from Pfizer and Eli Lilly to induce prescribing, pharmaceutical companies want individual telehealth prescribers working under these contracts to write prescriptions for Eli Lilly and Pfizer medications. With information from these DTC arrangements, the pharmaceutical companies have the ability to unleash their sales representatives. For example:
  - UpScriptHealth notifies Pfizer of which doctors wrote prescriptions.
  - At least two health care providers working for Form Health have received a combined 41 payments from Eli Lilly—with one whose most-prescribed medication to Medicare beneficiaries was an Eli Lilly product, resulting in more than \$230,000 in Medicare spending in a single year on that drug.
  - Eli Lilly made 13 payments to a single provider listed on 9amHealth's website. Curiously, 9am Health has chosen to dedicate four providers specifically to seeing patients under the Eli Lilly contract.
- **Pharma is willing to invest significant funds in those partnerships.** Eli Lilly's three contract payments to its telehealth partners total \$942,500. One telehealth company charges its clients, including Pfizer, anywhere between \$510,000 and \$2.45 million over the life of the contract.

## BLOG &gt; ARTICLES

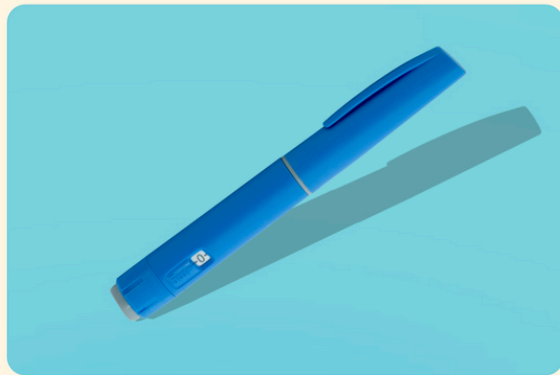
## Zepbound: The newest obesity management medication

Zepbound® is the newest FDA-approved medication for weight loss. Learn about Zepbound's weight loss results, how it works, and what to be mindful of.

Published on November 10, 2023

Revised on July 30, 2024

Author: Florencia Halperin, MD



### What you'll learn

- What is Zepbound?
- How does Zepbound work for weight loss?
- What are the side effects of Zepbound?
- What are alternatives to Zepbound?
- How Form Health can help while taking Zepbound

Over the last few years, we have seen great progress in most recent addition to this class of medications is Zepbound®, a once-weekly injectable medication manufactured by Eli Lilly for the treatment of obesity. This is the most recent approval of a obesity management medication since Wegovy®, which became available for weight loss in June of 2021. In clinical studies, patients using Wegovy for weight loss experienced an average of 15.8% reduction in their body weight. Zepbound clinical trials show patients losing even more. On average patients with obesity experienced a remarkable 26.6% loss in body weight over 82 weeks, results that rival those from bariatric surgery.

Zepbound contains the active ingredient tirzepatide, which is the same active ingredient as Mounjaro®, a medication approved by the FDA to treat type 2 diabetes and prescribed off-

The investigation also highlighted notable differences between the business practices of DTC telehealth partners. Some act as a technological conduit to independently operated tele-medicine providers, with with no affiliation with specific doctors. Other DTC telehealth partners utilize extensive policies to ensure high-quality treatment and limit conflicts of interest, such as by requiring access to the patient's medical records from his or her primary care provider, or facilitating laboratory readings. The stark range of safeguards between telehealth companies showcases opportunities for industry best practices, while also creating the potential for inferior levels of care.

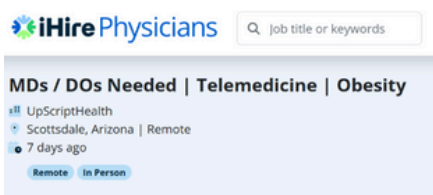
# CURSORY APPOINTMENTS, CHURNING OUT PRESCRIPTIONS:

Depending on the platform, the appointments may not involve real-time video consultations. For example, Cove does not offer synchronous video appointments. Populus did not require video consultations with patients, and 9amHealth's follow-up visits can also be non-video. As a result, providers may be prescribing medications without ever laying eyes on a patient, let alone checking a patient's blood pressure or other relevant clinical measurements. Further, for most of the telehealth arrangements, it is not a requirement for the clinician to obtain every patient's underlying medical records—meaning the telehealth clinician often is relying solely on the representation made by the patient in a questionnaire. It has been documented elsewhere that patients may misrepresent information to obtain medications, given the appeal created for these products through advertising.

The screenshot shows the Cove website interface. At the top left is the 'cove' logo. At the top right is a link to 'Submit a request'. Below the logo is a breadcrumb trail: 'Cove > Medical Care with Cove'. To the right of the breadcrumb is a search bar with a magnifying glass icon and the text 'Search'. Below the breadcrumb is a section titled 'Articles in this section'. This section contains three article cards. The first card is titled 'How do I contact my Cove medical provider?' and has a 'Follow' button. The second card is titled 'Why don't I need blood work or a MRI to use Cove?' and has a blue button with the text 'Can I speak to my Cove provider on the phone?'. The third card is titled 'Can I speak with a pharmacist?'. To the right of the 'Can I speak to my Cove provider on the phone?' card is a large article titled 'Can I speak to my Cove provider on the phone?'. This article has a sub-header '2 years ago · Updated' and a 'Follow' button. The main text of the article states: 'In most cases, you'll only interact with your Cove provider via Cove's secure messaging portal. You can directly message your provider anytime via our secure messaging system [here](#). If your provider determines a phone conversation is necessary, they will reach out to you directly.'

In many instances, the telehealth platforms rely heavily on independent contractors. As such, patients are unlikely to interface with long-term providers with a vested interest in improving their health. Rather, the reliance on contractors creates the potential for prescription pads for hire from a doctor that the patient may never see again. Indeed, it was found that UpScriptHealth, one of Pfizer's telehealth partners, advertised a job opening to prescribers with the statement, "on average, providers can complete 6-10 visits an hour." UpScriptHealth further stated "a completed visit is either an approval or denial of prescription request".





### Compensation

For controlled RX Programs (phentermine treatment options): \$30 per completed audio/video visit

On average providers can complete 6-10 visits an hour depending on states where you are licensed.

A completed visit is either an approval or denial of prescription request.

For Cove, one of Eli Lilly's telehealth partners, it was acknowledged that *"Prior to their consultation, Cove patients can select and/or identify a medication in which they are interested in obtaining on Cove's product page."* By providing a menu of medications, this patient pre-selection undercuts the notion that a health care provider is independently determining the patient's appropriate treatment. Similarly, Pfizer's telehealth partner, Populus, prompted consumers to identify in their intake questionnaire *"the medication that they were interested in obtaining."*

Further, Pfizer stated that its agreements with DTC telehealth platforms were not "intended" for the purpose of focusing a patient on how to secure specific Pfizer medications, noting that clinicians are expected to exercise independent clinical judgement with patient treatment discussions. However, that certainly may be the outcome of the "topics for consideration" page created by Pfizer to help guide patients for discussion with clinicians. And Pfizer's telehealth partner, Populus, was unable to state that Pfizer did not share, consult, or communicate with Populus in creating the patient discussion guide. Instead, Populus stated that "the process to create the intake questionnaire is confidential and proprietary" and could not be shared without the consent of relevant third parties. Pfizer stated that the intake process and medical practice is structured to be medication-agnostic and independent of Pfizer.



## PAYMENTS & DATA ARRANGEMENTS:



Eli Lilly and Pfizer generally hold three-year contracts with their telehealth platforms. Eli Lilly's three contract payments to its telehealth partners total \$942,500. One telehealth company charges its clients, including Pfizer, anywhere between \$510,000 and \$2.45 million over the life of the contract. Another telehealth partner working with Pfizer was precluded from sharing such financial information with the Senators' offices due to commercially confidential information. All parties have stated that Pfizer and Eli Lilly are not paying incentives or bonuses per prescription or contracting for a pre-determined volume.

### **The pharmaceutical companies gather extensive patient information from these sites.**

As part of the contract, Eli Lilly receives a transfer from all three telehealth platforms of at least 21 unique data fields—and up to 28 or more depending on the platform—with details about patients that are connected via LillyDirect. Eli Lilly does not receive specific data from the telehealth platforms on how many or which specific patients are prescribed an Eli Lilly medication. However, Eli Lilly does learn about each patient sent from LillyDirect who signs up and receives telehealth services on the platforms, including how many of those patients ultimately receive a prescription.

Further, Eli Lilly receives significant data about the characteristics of patients who ultimately do receive a prescription for an Eli Lilly-branded medication from these platforms. This includes: how long it takes to complete the sign-up process, average patient BMI and A1C, aggregate/de-identified patient gender/age/State/insurance type, weight readings, how long a patient stays on the prescribed medication, and how often they contact their provider. Eli Lilly also learns from Form Health the date of the first prescription for all patients receiving the weight loss drug Zepbound, and adherence data from Cove for patients originating from LillyDirect who receive the migraine medication Emgality.

Similarly, Pfizer is able to access the patient's contact information, with consent, and the name of the clinician that treated the Pfizer-routed patients, as well as at least seven other data fields.



## ELI LILLY'S PATIENT PRESCRIBING RESULTS (July-December 2024):

Of the 4,394 people who conducted a telehealth visit via LillyDirect, 74 percent (3,251 patients) received a prescription—including 100 percent of the patients who had a virtual visit with Cove. A larger number of patients first connected via LillyDirect but did not ultimately consult with a health care provider.



- For obesity care company Form Health, 3,759 consumers conducted a telehealth visit and 2,724 of them were prescribed medication. Further, Form Health shared that 66 percent of all prescriptions issued across all patients were for Eli Lilly medications.



- For obesity and diabetes care company 9amHealth, 620 consumers conducted a telehealth visit and 512 of them were prescribed medication. Further, 9amHealth shared that a patient meeting virtually on its platform is six-times more likely to be prescribed an Eli Lilly medication compared to another brand-name drug (18 percent vs. three percent of all patients).



- For migraine care company Cove, 15 consumers conducted a telehealth visit and 15 were prescribed medication.

Beyond the scope of the LillyDirect pathway, 31 percent of Cove's total patients received a prescription for a medication manufactured by another brand-name company (not Eli Lilly). And of 9amHealth's entire patient population, 61 percent of all patients meeting with a provider did not receive a prescription.



## PFIZER'S PATIENT PRESCRIBING RESULTS (August 27, 2024-January 10, 2025):

325 individuals conducted a telehealth visit through UpScript Health, and 85 percent (277 patients) received a prescription. And while not specific to the Pfizer relationship, more than 95 percent of overall patients who paid for any medical consult through Populus received a prescription. A larger number of patients first connected via PfizerForAll but did not ultimately consult with a health care provider.

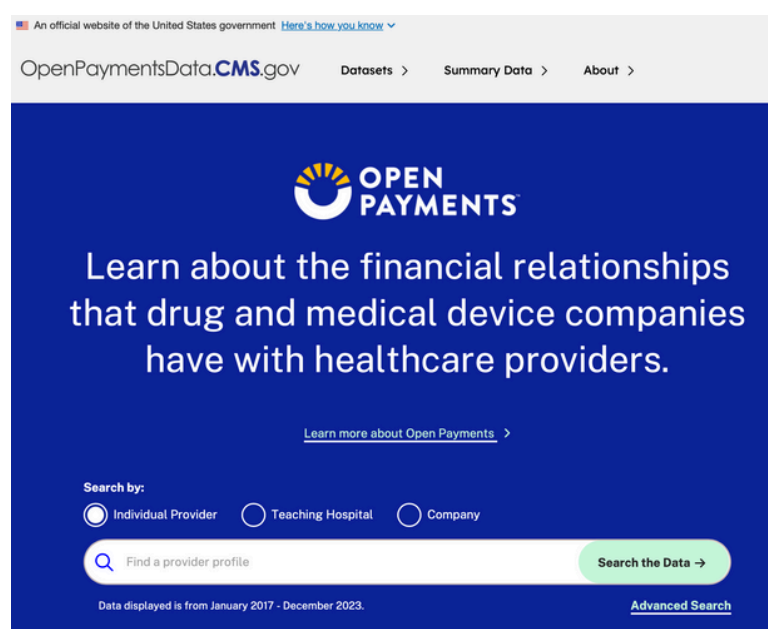
## TARGETING SPECIFIC PROVIDERS:

Aside from DTC advertising, the pharmaceutical industry also spends more than \$20 billion annually on marketing directly to health care providers to promote specific brand-name medications, utilizing an army of sales representatives who conduct face-to-face meetings and offer free meals and samples, lodging or travel, and pay providers for “speaking fees.” Drug sales representatives—who typically do not have any advanced medical or scientific degrees—are dispatched to increase sales by influencing the gatekeepers of prescription pads. Studies repeatedly have shown that pharmaceutical industry payments to doctors are associated with increased prescribing of that company’s products.

Indeed, at least six health care practitioners identified on LinkedIn as working for Form Health have received payments from Eli Lilly, including two who have received a combined 41 payments from Eli Lilly—with one whose most-prescribed medication to Medicare beneficiaries was an Eli Lilly product resulting in more than \$230,000 in Medicare spending in a single year on that drug. Indeed, Form Health conceded in its response that *“Form Health cannot speak to potential interactions representatives from Eli Lilly may have with a Form Health-affiliated health care provider...i.e. Eli Lilly presentations at ... conferences.”*

Similarly, 9amHealth lists their providers on their website, making it easy for a pharmaceutical company to target payments—such as the 13 payments from Eli Lilly to a single provider listed on 9amHealth’s website. 9amHealth disclosed in its response that only “four individual 9amHealth providers offer telehealth services under the Eli Lilly contract,” which also raises the question about why patients that are sent directly by Eli Lilly to 9amHealth are funneled only to specific, presumably cooperative, prescribers.

Based on company responses, in some instances the telehealth clinician may know or learn that the patient was routed to them via LillyDirect or PfizerForAll, which holds the potential to influence their prescribing actions. In fact, for Pfizer’s telehealth partner, Populus, the individual prescriber is made “aware that a consumer originated through the [Pfizer] Nurtec brand website.” And it was disclosed by UpScriptHealth that, “In the de-identified [patient] data UpScript provides to Pfizer, clinician names are provided.” This provides the opportunity for inappropriate influence, including outside of contract channels, to prescribe certain medications.



Further, for each of Eli Lilly's three telehealth partners—9amHealth, Form Health, and Cove—it was disclosed that their only pharmaceutical company partner at the time was Eli Lilly. This creates a preferential dynamic that may contribute to inappropriate prescribing. For example, posts on Form Health's Instagram account labeled, "When do you start losing weight on Zepbound?" appear to promote Eli Lilly's medications, while posts on its website use highly promotional phrasing to describe Eli Lilly's medication, calling it "in a class of its own" that provides "unprecedented weight loss effect."

## CONNECTING TO IN-PERSON CARE:

The Senators' October letter noted that, among the obesity providers listed on LillyDirect, four of the six physicians located closest to the U.S. Capitol have received payments from Eli Lilly. This search function on LillyDirect was facilitated by HealthGrades, an independent database of health care providers.

A subsequent review found that the provider results populated on LillyDirect are significantly different from the provider results on HealthGrades' own website. For example, a search for "Obesity" or "Obesity Medicine" with the zip code 20510 on Healthgrades.com, sorted by "Most Relevant" or "Closest," returns more than 500 providers, none of whom are the 10 providers depicted on LillyDirect. This suggests that Eli Lilly is filtering or adjusting the search terms on the instance of HealthGrades found on LillyDirect to yield certain providers in this search on its own platform, including those—by Lilly's own admission on its website—who may "also conduct work for Lilly."

## HHS OIG FRAUD ALERT:

The Department of Health and Human Services' Office of the Inspector General (HHS OIG) warns physicians, "you are an attractive target for kickback schemes because you can be a source of referrals for ... health care ... suppliers." OIG adds, "many ... companies want your patients' business and would pay you to send that business their way." Further, the HHS OIG issued a Special Fraud Alert in 2022 to notify health care practitioners of the specific risks of schemes involving telehealth platforms that "intentionally paid physicians ... kickbacks to generate ... prescriptions for medically unnecessary ... medications, resulting in submission of fraudulent claims to Medicare [and] Medicaid." According to the HHS OIG, fraudulent aspects of these arrangements for prescribers may include: limited interactions with the purported patient, limited opportunity to review the patient's medical records, and/or a directive to prescribe a preselected item, regardless of clinical appropriateness.

## FEDERAL AKS JURISDICTION:

Written responses and subsequent document production confirmed that, regardless of whether the telehealth consultation itself may be covered by a Federal Health program (which it may, depending on the telehealth platform—such as Form Health, which is covered by Medicare), any resulting prescription would be valid and reimbursable by Federal Health programs—meeting one test for assessing potential implications of the Anti-Kickback Statute (AKS).