when the individual physician's prescribing pattern appears to represent unusually high costs.

Nearly all of these countries recommend or require the use of low-cost chemical equivalents where available. No significant problems with lack of clinical equivalency have been reported. Controversy over generic name prescribing in Australia, New Zealand and most of the European countries studied by the Task Force has not reached the heights noted in the United States.

Quality control in many of the countries is achieved by registration of all drugs sold in the country, as well as by various types of drug testing. Often a drug evaluation committee or commission composed of physicians, pharmacists, and drug industry representatives has the responsibility for determining which drugs will be registered and which tests will be imposed. Testing varies from batch analysis to complete laboratory research of the formulation and its possible side effects.

Some programs call for patient participation through a fixed co-payment or percentage co-insurance. The effect of such a requirement was demonstrated in