

Without insurance, generic drugs are still relatively inexpensive compared to brand names—but people often pay more than they expect.

### **Average out-of-pocket for generics (ages 30–60, no insurance)**

#### **Typical per prescription:**

- Most common generics: **\$10–\$25 per month**
- Some very low-cost generics (on \$4 lists or discount cards): **\$4–\$10**
- Higher-priced generics (diabetes, inhalers, specialty): **\$30–\$80+**

#### **Typical total per person:**

- **1 medication:** about **\$10–\$25/month**
- **2–3 medications:** about **\$25–\$60/month**
- **4+ medications:** often **\$60–\$120/month**

### **Average annual spend (uninsured adults using generics)**

A reasonable national estimate for working-age adults paying cash:

#### **About \$300–\$700 per year**

(roughly **\$25–\$60 per month** among those who take medications)

People with no ongoing prescriptions obviously spend \$0, but among those who do take meds, most fall into that \$25–\$60 monthly range paying cash.

### **Why it varies**

Costs depend on:

- Pharmacy chosen (huge price differences)
- Use of discount cards (GoodRx, etc.)
- \$4 generic programs at big chains
- Number of maintenance medications

### **Simple real-world example**

A typical 45-year-old paying cash:

- Lisinopril: \$10
- Atorvastatin: \$12

- Metformin: \$10

**Total:** about **\$30–\$40/month**

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### **Big picture takeaway**

For adults 30–60 **without insurance:**

Most who take generics spend **\$25–\$60 per month total**  
with many paying **\$300–\$700 per year**

That’s exactly why \$0-generic membership or subscription models resonate so well—  
people already feel that steady monthly cost even when the meds are “cheap.”