



For Immediate Release

November 8, 2023

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NASP Applauds the Senate Finance Committee for Taking Additional Steps to Address Anticompetitive PBM Practices

Urges the Advancement of Legislation To Support Specialty Pharmacies and Patient Pharmacy Choice

WASHINGTON, DC – The National Association of Specialty Pharmacy (NASP) thanks the Senate Finance Committee for its bipartisan efforts to address anticompetitive practices that ultimately harm beneficiary access to the specialty pharmacy of their choice. The *Better Mental Health Care, Lower-Cost Drugs, and Extenders Act* that advanced out of the Committee today, seeks to build on the pharmacy protections included in the *Modernizing and Ensuring PBM Accountability Act* that advanced out of the committee in July. Today’s legislation includes efforts to strengthen and enforce the long-standing federal Any Willing Pharmacy law, an NASP advocacy priority.

If passed into law, the Senate Finance Committee’s legislation will require the Administration to set parameters to ensure that Plan/PBM agreements with specialty pharmacies and other pharmacies are reasonable and relevant to the pharmacy under Medicare Part D. The bill would permit pharmacies to appeal to Medicare when contract terms are not in line with regulatory requirements. The legislation also takes steps to better capture information on pharmacy drug acquisition costs, which the specialty pharmacy wants to ensure ultimately provides a fair and clear understanding of pharmacy drug acquisition costs for specialty pharmacies that are not owned or affiliated with a health plan or PBM. Accurate pharmacy acquisition cost data is a step toward helping pharmacies address some pharmacy reimbursement concerns in Medicaid and Medicare Part D.

A Medicare or Medicaid beneficiary with a chronic complex condition like cancer, multiple sclerosis, rheumatoid arthritis, or organ transplantation may utilize a pharmacy that looks different than a pharmacy that dispenses more traditional maintenance medications. For these beneficiaries, their pharmacies meet the patients where they are in their local communities, but typically operate from a centralized location. Specialty pharmacies are experts in the specific conditions they are supporting and work to provide: patient care services that involve the direct hiring of clinicians; daily patient monitoring and management to support therapy adherence and success; data reporting on patient outcomes; and support for complex insurance authorizations and addressing patient financial options given the cost of the medications for these complex conditions. “Specialty pharmacies earn accreditation through a national independent specialty pharmacy accreditor to validate that they can meet the standards necessary to manage patients with these complex medical needs,” says Sheila Arquette, NASP President and CEO. “While specialty pharmacies may often have a different operating structure than pharmacies that commonly dispense maintenance drugs, specialty pharmacies continue to experience the egregious growth of pharmacy DIR fees in Medicare Part D, below-cost drug

reimbursement and dispensing fees that fail to cover the cost of specialty patient services. This threatens specialty pharmacy network participation as more specialty pharmacies are acquired and no longer accessible to beneficiaries.”

“We thank the Senate Finance Committee for its work, and we look forward to continuing to collaborate to get these policies right and finalize the legislation. We encourage the House to advance similar policies that establish timely reasonable reimbursement and other contract protections for all pharmacies.”

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NASP represents all specialty pharmacy industry stakeholders. Specialty pharmacies serve communities of patients who have complex health conditions like cancer, rheumatoid arthritis, multiple sclerosis, cystic fibrosis, hemophilia, organ transplantation and rare diseases. Specialty pharmacies are accredited by an independent, third party nationally recognized accreditation organization ensuring consistent quality of extensive drug management and clinical patient care services.