



2023

INDEPENDENT COMMUNITY PHARMACY LEGISLATIVE PRIORITIES

NCPA's House Legislative Agenda

Pro-Patient, Pro-Pharmacist

- Medicaid managed care payment reform and mandated transparency for PBMs**
H.R. 5378, the *Lower Costs, More Transparency Act*, which is the result of a monthslong effort to cobble together multiple bills from the Energy and Commerce, Ways and Means, and Education and the Workforce committees, includes several provisions vital to lowering prescription drug costs and bringing transparency to anticompetitive practices of pharmacy benefit managers. One of those provisions in the legislation is H.R. 1613, the *Drug Price Transparency in Medicaid Act* introduced by Reps. Buddy Carter (R-Ga.) and Vicente Gonzalez (D-Texas). It prohibits the use of spread pricing in Medicaid managed care programs and would move to a fair and transparent pharmacy reimbursement system based on average acquisition costs plus the state's Medicaid fee-for-service dispensing fee. It requires all pharmacies to respond to the Centers for Medicare & Medicaid Services' National Average Drug Acquisition Costs survey, which would provide more transparency on drug pricing. The Congressional Budget Office estimated this provision would save taxpayers over \$1 billion.

- Protect patients, taxpayers, and pharmacies from harmful PBM practices in Medicare Part D**
H.R. 2880, the *Protecting Patients Against PBM Abuses Act*, would protect patients, taxpayers and pharmacies from harmful PBM practices that make high-quality health care inaccessible and unaffordable. Among other things, this legislation prohibits PBMs from reimbursing non-affiliated pharmacies at a rate less than they reimburse their own pharmacies (thus removing incentives to steer patients) and prohibits spread pricing in the Medicare Part D program. Additionally, it delinks PBM compensation from the cost of medications so that PBMs are no longer benefiting from ever-increasing list prices and rebates. It also increases transparency by requiring PBMs to publicly report all rebates and fees they receive from drug manufacturers.

- Medicare payment for enhanced pharmacist services**
H.R. 1770, the *Equitable Community Access to Pharmacist Services Act*, would ensure Medicare beneficiaries can easily access health care services by authorizing pharmacists to test and treat COVID-19, flu, respiratory syncytial virus (RSV), and strep throat. The legislation, which was introduced by Reps. Adrian Smith (R-Neb.), Brad Schneider (D-Ill.), Larry Bucshon (R-Ind.), Doris Matsui (D-Calif.), Buddy Carter (R-Ga.), and Diana Harshbarger (R-Tenn.), would recognize pharmacists and the role they have in improving health care access by establishing Medicare Part B direct reimbursement for these pharmacist services. Independent pharmacies have played a large role at both the federal and state levels in testing for COVID-19 and administering COVID-19 vaccines to those in their communities and in long-term care facilities, and this legislation would ensure continued access for patients to services at their local pharmacy.



Founded in 1898, the National Community Pharmacists Association is the voice for the community pharmacist, representing over 19,400 pharmacies that employ nearly 240,000 individuals nationwide. Community pharmacies are rooted in the communities where they are located and are among America's most accessible health care providers. [For more information visit *ncpa.org*.](https://www.ncpa.org)