## Primary PBM Bills Under Consideration

Bill	Status	PBM Provisions	CBO Score
H.R.5378, the Lower Costs, More Transparency Act	Passed by the House	<ul> <li>PBM transparency requirements</li> <li>Prohibiting spread pricing in Medicaid</li> </ul>	<ul> <li>Score:</li> <li>Transparency: Net decrease of \$2.5 billion. Decreases spending by \$23 million and increases revenue by \$2.157 billion</li> <li>Prohibiting spread pricing:         <ul> <li>Decreases spending by \$1.078</li> <li>billion</li> </ul> </li> </ul>
S. 2973, The Modernizing and Ensuring PBM Accountability (MEPA) Act provisions included in the Better Mental Health Care, Lower- Cost Drugs, and Extenders Act	Advanced out of Senate Finance Committee	<ul> <li>PBM transparency requirements, including information related to rebates, formulary placement, affiliated pharmacies.</li> <li>Prohibiting spread pricing in Medicaid</li> <li>Delinking PBM reimbursement from drug price and utilization in Medicare</li> <li>Establishing standardized pharmacy performance measures</li> <li>Addresses network pharmacies and access to Part D drugs</li> <li>Adds PBMs to conflict of interests for pharmacy and therapeutics (P&amp;T) committees</li> <li>Any pharmacy willing</li> <li>Surveying of Medicaid pharmacy prices</li> <li>Limiting cost sharing for certain highly rebated drugs</li> <li>Facilities midyear formulary changes for biosimilars</li> <li>Requires HHS to hold at least one beneficiary focused listening session on potential improvements in Part d plan management</li> <li>Reports and studies on price-linked compensation across the supply chain, inappropriate pharmacy rejections, drug shortages, and biosimilar and generic drug access</li> </ul>	<ul> <li>Score:         <ul> <li>Transparency and delinking provisions: Decreases spending by \$719 million</li> <li>Pharmacy performance measures in Part D: Increases spending by \$4 million</li> <li>Pharmacy transparency in Part D: Increases spending by \$2 million</li> <li>Prohibiting spread pricing in Medicaid: Decreases spending by \$306 million</li> </ul> </li> <li>Allowing midyear formulary changes for biosimilars:         <ul> <li>Decreases spending by \$222 million</li> </ul> </li> </ul>
H.R. 8261, the Preserving Telehealth, Hospital, and Ambulance Access Act	Advanced out of the W&M Committee	<ul> <li>PBM transparency requirements</li> <li>Delinking PBM reimbursement from drug price and utilization in Medicare</li> <li>Prohibiting spread pricing in Medicaid</li> </ul>	No CBO score



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Features provisions from the MEPA Act			
H.R. 7623, the Telehealth Modernization Act Features provisions from the MEPA Act	Advanced by E&C Health Subcommittee	<ul> <li>PBM transparency requirements</li> <li>Delinking PBM reimbursement from drug price and utilization in Medicare</li> <li>Prohibiting spread pricing in Medicaid</li> </ul>	No CBO score
S. 1339, the Pharmacy Benefit Manager Reform Act	Advanced out of HELP Committee	<ul> <li>PBM transparency requirements</li> <li>Prohibiting spread pricing in commercial plans</li> <li>100 percent rebate pass-through to plans</li> </ul>	No CBO score
6283, the Delinking	House version advanced by Ed & Workforce Committee	<ul> <li>Delinking PBM reimbursement from drug price and utilization in the commercial market</li> <li>Prohibits patient steering</li> </ul>	No CBO score
H.R. 9096, the Pharmacists Fight Back Act	Introduced	<ul> <li>Requires the use of national average drug acquisition cost         (NADAC) as a benchmark for pharmacy reimbursements in federal         health programs</li> <li>Beneficiary cost-sharing must be calculated based on a price that         is reduced by an amount that is equal to at least 80 percent of all         rebates received</li> <li>Prohibits patient steering</li> <li>Prohibits spread pricing in federal health programs</li> </ul>	No CBO score

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## PBM bills in the 118<sup>th</sup> Congress by Committee

Committee	Bills	Status	PBM and Drug Pricing Provisions
Senate Health, Education, Labor, and Pensions (HELP) Committee	S. 1339, the Pharmacy Benefit Manager Reform Act  S. 1542, the Delinking Revenue from Unfair Gouging (DRUG) Act S. 3330, a bill to require the Sec. of Labor to conduct a study on fiduciary duties of PBMs	Advanced out of Committee Introduced Introduced	<ul> <li>PBM transparency requirements</li> <li>Prohibiting spread pricing in commercial plans</li> <li>100 percent rebate pass-through to plans</li> <li>Delinking PBM reimbursement from drug price and utilization in the commercial market</li> <li>A study on PBM fiduciary duties</li> </ul>
Senate Finance Committee	S. 2973, The Modernizing and Ensuring PBM Accountability Act provisions included in the Better Mental Health Care, Lower-Cost Drugs, and Extenders Act	Advanced out of Committee	<ul> <li>PBM transparency requirements, including information related to rebates, formulary placement, affiliated pharmacies.</li> <li>Prohibiting spread pricing in Medicaid</li> <li>Delinking PBM reimbursement from drug price and utilization in Medicare</li> <li>Establishing standardized pharmacy performance measures</li> <li>Addresses network pharmacies and access to Part D drugs</li> <li>Adds PBMs to conflict of interests for pharmacy and therapeutics (P&amp;T) committees</li> <li>Any pharmacy willing</li> <li>Surveying of Medicaid pharmacy prices</li> <li>Limiting cost sharing for certain highly rebated drugs</li> <li>Facilities midyear formulary changes for biosimilars</li> <li>Requires HHS to hold at least one beneficiary focused listening session on potential improvements in Part d plan management</li> <li>Reports and studies on price-linked compensation across the supply chain, inappropriate pharmacy rejections, drug shortages, and biosimilar and generic drug access</li> </ul>
	S. 1967, the PBM Act	Introduced	Delinking PBM reimbursement from drug price and utilization
	S. 2436, the NO PBMs Act	Introduced	Any pharmacy willing requirements
	S. 2406, the PBM Oversight Act of 2023	Introduced	<ul> <li>Transparency requirements for pharmacy and therapeutics (P&amp;T) committees and justification for coverage, formulary placement, and UM decisions</li> </ul>



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	S. 2456, Protecting Seniors from	Introduced	Limit cost sharing to no more than net price
	High Drug Costs		
	S. 2474, the Share the Savings with	Introduced	Limits cost sharing for chronic care drugs to coinsurance based on
	Seniors Act		net price
S. 2254, the Medicare PBM		Introduced	PBM transparency requirements
	Accountability Act		
	S. 2493, PBM Reporting	Introduced	PBM transparency requirements
	Transparency Act		
	S. 1038, the Drug Price Transparency	Introduced	Prohibits spread pricing in Medicaid and requires pass-through
	in Medicaid Act		pricing model
Senate CST	S. 127, the PBM Transparency Act of	Advanced out of	PBM transparency requirements
Committee	2023	Committee	Incentives for rebate pass-through to plans
E&C, W&M,	H.R.5378, the Lower Costs, More	Passed by the House	PBM transparency requirements
and Ed &	Transparency Act		Prohibiting spread pricing in Medicaid
Workforce			
	H.R. 3285, the Fairness for Patient	Advanced out of	Limits cost sharing for highly rebated drugs
	Medications Act	Committee	
	H.R. 6283, DRUG Act	Advanced out of	Delinking PBM reimbursement from drug price and utilization
		Committee	Prohibits spread pricing
			Prohibits patient steering
	H.R. 4507, the Transparency in	Advanced out of	PBM transparency requirements
	Coverage Act	Committee	
	H.R. 2679, the PBM Accountability	Introduced	PBM transparency requirements
	Act		
	H.R. 4846, Better Deals and Lower	Introduced	PBM transparency requirements
	Prices Act		
E&C	H.R. 3561, the Promoting Access to	Advanced out of	PBM transparency requirements
Committee	Treatments and Increasing Extremely	Committee	Prohibiting spread pricing in Medicaid
	Needed Transparency (PATIENT) Act		
	H.R. 2880, the Protecting Patients	Advanced out of	Delinking PBM reimbursement from drug price and utilization
	Against PBM Abuses Act	Committee	PBM transparency requirements
			Prohibiting spread pricing



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	H.R. <u>5385</u> , the Medicare PBM	Advanced out of	PBM transparency requirements
	Accountability Act	Committee	
	H.R. 4881, to limit cost sharing for	Advanced out of	Limits cost sharing to no more than the net price
	drugs under the Medicare program;	Committee	
	<u>H.R. 5400</u> , NO PBMs Act	Introduced	Any pharmacy willing requirements
	H.R. 6844, Ensuring PBM	Introduced	Prohibits HHS from entering into contracts with PDP sponsors
	Competition Act		that have contracts with PBMs that own their own pharmacies
	H.R. 1613, the Drug Price	Introduced	Prohibits spread pricing in Medicaid and requires pass-through
	Transparency in Medicaid Act		pricing model
E&C and W&M	H.R. 5376, the Share the Savings	Introduced	Limits cost sharing for chronic care drugs to coinsurance based on
	with Seniors Act		net price
	H.R. 2816, the PBM Sunshine and	Introduced	PBM transparency requirements
	Accountability Act		
	H.R. 7623, the Telehealth	Advanced by E&C	PBM transparency requirements
	Modernization Act	Health Subcommittee	Delinking PBM reimbursement from drug price and utilization in
			Medicare
			Prohibiting spread pricing in Medicaid
	H.R. 8261, the Preserving	Advanced out of the	PBM transparency requirements
	Telehealth, Hospital, and Ambulance	W&M Committee	Delinking PBM reimbursement from drug price and utilization in
	Access Act		Medicare
			Prohibiting spread pricing in Medicaid
	H.R. 7717, to amend title XI of the	Introduced	PBM transparency requirements
	SSA to enhance pharmacy benefit		
	manager transparency requirements.		
Ed &	H.R. 4508, the Hidden Fee	Introduced	Increases transparency of PBM and third-party administrators
Workforce	Disclosure Act		(TPAs) compensation to plan fiduciaries