

PBM REFORM HAS NOT RAISED COSTS FOR PATIENTS AND PAYERS

FROM THE DESK OF
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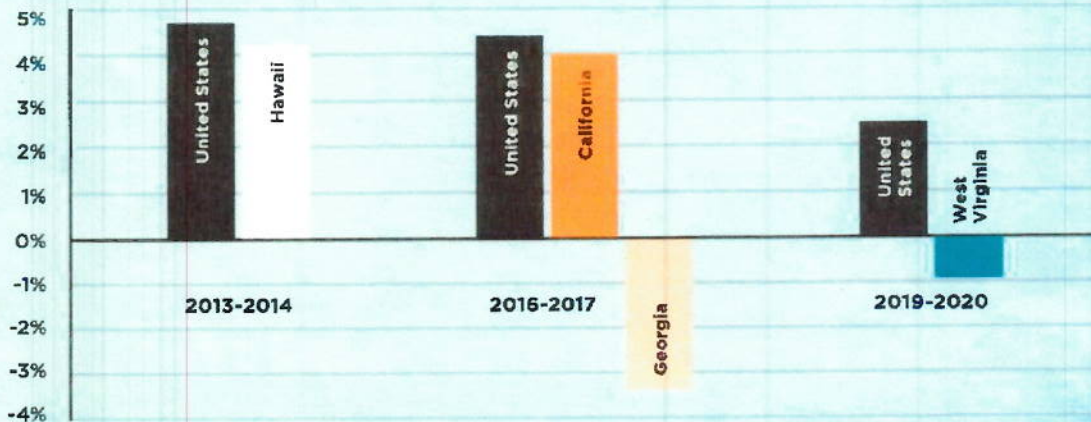
Chief Clerks Office

State legislative efforts protecting patients from pharmacy benefit managers' (PBMs) conflicts of interest do not raise health insurance premiums. PBMs claim that legislation protecting patients, payers, and pharmacies from their abusive business practices raise health insurance costs. But the facts tell another story!

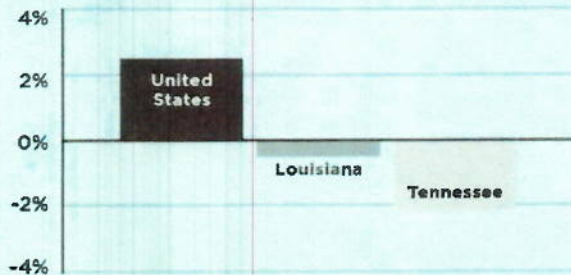
When states pass meaningful PBM reform, the increase in their average health insurance premium costs have been lower than the nationwide average. In fact, some states have actually seen a decrease in their premium costs!

Compare the change in premiums when states passed PBM reform legislation to the national average.

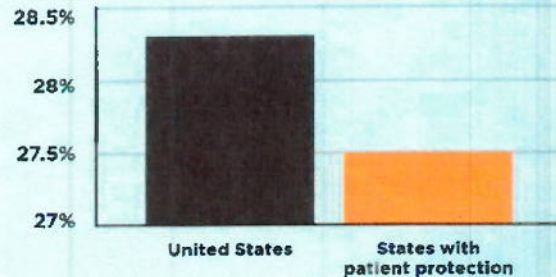
States that protect patients from mandated use of a mail-order pharmacy



States that prohibit PBMs from reimbursing PBM-owned pharmacies at higher rates than non-affiliated pharmacies (2019-2020)



States that protect patients from PBM penalties (e.g., higher copays) for utilizing the in-network pharmacy of their choice (2013-2020)¹



PBMs have enormous control over patients' prescription drug benefits. They design formularies and provider networks, giving them outsized influence over the medications and the pharmacies a patient can utilize. PBMs and their conflicts of interest are responsible for rising prescription drug benefit costs. Limiting those conflicts of interest helps patients by empowering them to make healthcare decisions for themselves, decreasing their out-of-pocket costs, and protecting access to community pharmacy services; all without raising their health insurance premiums.

1. Numbers based on data from the Kaiser Family Foundation (www.kff.org).

2. States include Delaware, Mississippi, North Carolina, and South Dakota.

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THE VOICE OF THE COMMUNITY PHARMACISTSM