PROTECT PATIENTS, PHARMACIES & PAYERS FROM PBM CONFLICTS OF INTEREST

SUPPORT HB 1627

PBMs are using their growing power to steer patients and profits to themselves at the expense of patients & pharmacies.

THE DANGER OF VERTICAL INTEGRATION

The 3 PBMs that control 80% of the prescription market are all owned by health insurers: Express scripts is owned by Cigna, Optum is owned by UnitedHealthcare, and Caremark is owned by CVS Health (Aetna). This vertical integration concentrates financial control of pharmacy benefits with mega corporations that own their own pharmacies.

PBM SELF-DEALING RAISES Rx COSTS

These conglomerates steer patients to their own mail-order, retail and specialty pharmacies and then reimburse them at a higher rate. This conflict of interest decreases transparency and competition, raises healthcare costs and lowers patient access to care, especially in rural and medically underserved areas.

FIDUCIARY RESPONSIBILITY IS CRITICAL

- **HB 1627 will hold PBMs to vital fiduciary standards that require them to place the welfare of the patients and payers they serve above their own financial interests.**

HB 1627 IMPROVES PHARMACY ACCESS & PAYMENT EQUITY

- **It prevents PBMs from restricting patient's choice of pharmacy for medications and services.**
- It bars PBMs from charging a health plan or payer more for medications dispensed in a plan than it reimburses network pharmacies for dispensing those drugs.
- **It reduces self-dealing by prohibiting PBMs from reimbursing their own affiliate pharmacies more than they reimburse non-affiliate pharmacies.**
- **It allows a pharmacy to decline to dispense a prescribed medication if the amount to be reimbursed is below the pharmacy's cost of acquiring the drug.**
- PBMs may not restrict the right of health plans and network pharmacies to discuss drug plan benefits and costs with their patients.

Protect Missouri Patients & Pharmacies From PBMs' Self-Serving Policies

MISSOURI
Pharmacy Business Council