

IT'S NO SECRET THAT SENIORS PAY TOO MUCH OUT-OF-POCKET FOR THEIR MEDICINES.



PARTNERSHIP TO FIGHT CHRONIC DISEASE



PASSING ALONG REBATES TO SENIORS AT THE PHARMACY LOWERS COSTS, IMPROVES HEALTH

Out-of-pocket costs are growing, particularly for most seniors who have multiple chronic conditions.

People with two or more chronic diseases spend five times more out-of-pocket than people without any chronic conditions. People with three or more conditions pay 10 times more. Average out-of-pocket spending has grown 58% over the past decade.



Medicare patients paid more than Part D plans did for 79 out of 100 of the most rebated drugs. Patients paid almost **FOUR TIMES** more than plans.



Congress is considering bipartisan, bicameral policy solutions that ensure PBMs pass on the savings from rebates to Medicare beneficiaries at the pharmacy counter.

These efforts would significantly improve access and lower costs for the majority of Medicare recipients who have one or more chronic conditions and would reduce the high costs associated with poor adherence.

Patients often have to pay cost-sharing based on the full list price, not the negotiated net price, which can increase their expenses at the pharmacy counter.



Though PBMs and insurers negotiate discounts on drugs, they often charge patient cost-sharing on a drug's full price.



Proposed legislation aims to ensure full rebate pass-through for chronic condition medicines, benefiting patients facing high out-of-pocket costs.



The bill addresses all medicines within a therapeutic class to avoid incentives for plans to prioritize specific medicines based on rebate levels.



PASS THROUGH REBATES TO LOWER SENIORS' COSTS.

THE TIME FOR POLICY CHANGE IS NOW.

