Community pharmacists cite problems with DIR fees

“[W]e never know and it is not itemized when it is withdrawn from our reimbursements. We are not even sure what the takebacks are for as there is no notation, the reconciliation reports just show an amount that was withheld. What a scam!”

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“Almost always on the statement you will see a deduction from reimbursement with no explanation what constitutes this charge, only a total amount. No time period, no patient info or Rx number. Impossible to even guess how it is applied.”

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“[I]t is very hard to plan a budget or allow for the same amount of employees to remain at our store if we are uncertain as to how much we will actually make that week. We will be forced to cut back or lay off employees due to these fees.”

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“One claim we processed adjudicated for $511.77. Our cost was $458.34. A profit of $53.43, right? But on our EOB there was a DIR fee of $316.83. Now a loss of $263.40 for one prescription. There were several other claims of lesser losses for this man and his wife.”

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“One claim was clawed back to the tune of approximately $180 each month for 10 months. In this case, this prescription was a major factor in pushing this poor patient into the donut hole. Meanwhile, the PBM is getting paid and the patient goes further and further into the hole.”

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“[Insurance plan] has $4.50/claim on reimbursements of $0.48 or $1.86 as examples. Think about that. Seriously. Think about that.”

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“A dear friend that sold his pharmacy in 2014 … started receiving billings for DIR fees about six months later and continues to this date to receive these billings.”

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“This is an accounting nightmare.”

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“One PBM requires we dispense the brand name version for Nexium, Abilify and Niaspan and their DIR is five percent of the drug cost. Therefore the DIR is five percent of the expensive versions in addition to forcing patients into the donut hole earlier! I’m sure they are getting a rebate on the brand name so they win while everyone else loses.”

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“[PBM] was deducting $1,800 on a Harvoni prescription per fill. Leaving us making zero dollars on a $30,000 medication.”

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“We have seen fees for thousands of dollars – with no explanation as to why. We call the insurance company for answers but get nothing.”

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“I’m a one-man small store doing only 60 prescriptions daily. This is going to eventually put me out of business. My store has been serving this community since 1901 and I have owned it for 45 years. Would be a shame to close it.”

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 “[PBM] is taking back $4.26 per claim over the next 12 weeks but we have all five-star ratings in our EQuIPP data. The pharmacy has no clue what or how the patients’ medication state could’ve been managed any greater.”

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“Having a DIR when your practice has a five-star rating does not make any sense.”

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“We are assessed over $6,000/month in DIR fees, but they are never tied to performance, and there is no transparency regarding how they are set, it is totally arbitrary.”

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