



## NCPA's Legislative Agenda: Pro-Patient, Pro-Pharmacist

- **Finalize Direct and Indirect Remuneration (DIR) Fee Reform:** Congress has included some version of pharmacy DIR fee reform in every current drug pricing package (S. 2543, H.R. 3, H.R. 19, & S. 3129). Congress must finalize pharmacy DIR fee reform that prohibits DIR clawbacks and standardizes pharmacy quality metrics. Additionally two stand-alone bills to reform pharmacy DIR fees have been introduced. S. 988/ H.R. 803, *the Improving Transparency and Accuracy in Medicare Part D Spending Act* would address clawbacks. S. 640/H.R. 1034, *the Phair Pricing Act* addresses both clawbacks and quality measures.
- **Ensuring Seniors Access to Local Pharmacies Act (H.R. 4946):** This bill would allow community pharmacies that are in medically underserved areas, medically underserved populations, health professional shortage areas, or Federal Office of Rural Health Policy's designated rural areas to participate in Medicare Part D preferred pharmacy networks so long as they are willing to accept the contract terms and conditions. It also would require that pharmacies are reasonably reimbursed so that PBMs are not reimbursing their affiliated pharmacies more than they do other pharmacies and that reimbursement covers acquisition and dispensing costs.
- **Drug Price Transparency in Medicaid Act (H.R. 5281):** This bipartisan bill would ban the use of spread pricing by PBMs in Medicaid managed care (MMC). Currently, PBMs can overbill MMC programs, under-reimburse pharmacies for medications dispensed, and retain the difference, which is referred to as the "spread." The bill would require pharmacies in MMC plans to be reimbursed on actual drug acquisition costs and a dispensing fee that must be no less than that in fee-for-service.
- **Prescription Drug Price Transparency Act (H.R. 1035):** This bill would codify Medicare transparency provisions concerning maximum allowable costs for generics and apply them to FEHB. It would also establish a MAC appeals process and prohibit PBM requirements to use a PBM-owned pharmacy, a clear conflict of interest.
- **Preserving Patient Access to Compounded Medications Act (H.R. 1959):** This bill preserves patient access to compounded medications by directing the FDA to act within Congressional intent.

For more information on these issues please visit [www.ncpanet.org/advocacy](http://www.ncpanet.org/advocacy)



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