Consumers face increasing out-of-pocket costs at the pharmacy counter, while multi-billion-dollar corporate middlemen — pharmacy benefit managers (PBMs) — continue to find new and hidden ways to pocket ever-increasing profits, play constantly changing opaque games and avoid accountability.

**The Games**  Here are just some of the ways they drive up costs for:

**Consumers:**
PBMs calculate some patients’ out-of-pocket costs based on the list price of a medicine, rather than the lower price the PBM negotiated with the pharmaceutical company. They also control which drugs employee health plans can cover by creating lists of PBM-allowed prescription drugs called “formularies,” and steering patients to the medicines with higher price tags.

**Local Pharmacies:**
PBMs reimburse independent pharmacies for prescriptions at such low rates, dole out arbitrary fees, and often push business to PBM-owned pharmacies, that it’s hard for locally owned pharmacies to stay in business.

**Employers and Unions:**
Self-insured employer and union health plans often hire PBMs to manage the prescription drug benefits for their employees. Many employers are not seeing the savings PBMs have negotiated with pharmaceutical companies for prescription medicines.

**State Governments:**
Many states have discovered that PBMs overcharged their public employee health plans and Medicaid programs for prescription medicines, wasting taxpayer dollars and vital state resources.
Employers or Unions:
Defend your employees and members. Take these steps:
• Research transparent, fee-based PBM models for best return on investment and member benefits.
• Demand detailed drug pricing data from your PBM as a means to hold your spending accountable.

Local Pharmacists:
Safeguard your customers and your local business. Take these steps:
• Keep lawmakers and media informed about how PBMs manipulate the system and disadvantage small community pharmacies and the patients they serve.
• Review reimbursement data to ensure PBMs are delivering on contractual obligations to your pharmacy.
• Have a plan in place to make resources available to patients to find savings for instances when PBMs charge the patient more than the PBM’s negotiated rate with your pharmacy.

Consumers:
Advocate for yourself. Ask your local pharmacist:
• Is this the best price for my medicine?
• What would my medicine cost if I paid without insurance?
• Is there a generic or lower-cost option?

State Governments:
Protect your public employees and Medicaid recipients. Ask your current PBM provider to:
• Eliminate the PBM’s ability to arbitrarily mark up prescription drug claims by prohibiting spread pricing, requiring transparency into net pharmacy payment rates and disallowing PBMs from subjectively setting the prices of medicines that are dispensed by the pharmacies they own.
• Increase transparency, competition and accountability in the PBM marketplace by advocating for a reverse auction to encourage PBMs to underbid one another for the state’s contract.

HERE’S WHAT YOU CAN DO

It’s no coincidence that out-of-pocket drug costs are rising while PBM profits are increasing. It’s time to tell PBMs: enough is enough. Here’s what you can do:

LEARN MORE AT PBMACCOUNTABILITY.ORG.