## Drug Middlemen Aim to Avoid New Rules With Voluntary Changes

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Pharmacy middlemen are working on a proposal to voluntarily change some of their business practices in an effort to avoid new regulation from the Trump administration, according to people familiar with the discussions.

The main lobbying group that represents so-called pharmacy benefit managers, the Pharmaceutical Care Management Association, has drafted proposals to bring to the Centers for Medicare and Medicaid Services, according to a document viewed by Bloomberg News.

Among the proposals under discussion are ensuring patients don't pay more than a pharmacy would charge to someone without insurance, increasing the use of lower-cost versions of expensive biologic drugs and boosting payments to rural and independent pharmacies.

CMS regularly meets with health-care industry members but doesn't comment on the details of those talks, CMS spokesperson Catherine Howden said in a written statement. PCMA spokesperson Greg Lopes said it's regularly in communication with the administration and Congress "to find ways to achieve everyone's shared goal to lower drug costs for patients."

PBMs have been under pressure in Washington. Both Republicans and Democrats are demanding stricter guardrails around how the companies negotiate discounts on prescription medication from drugmakers on behalf of health plans and employers.

The three biggest PBMs — units of UnitedHealth Group Inc., CVS Health Corp. and Cigna Group — have 80% of the market, and their parent companies also own large health insurers and pharmacies.

UnitedHealth declined to comment. CVS didn't comment on the discussions but said it stands "ready and willing to work with the administration and Congress to support efforts that make prescription drug coverage more affordable and easier to use." Cigna didn't immediately comment.

Part of the industry's pitch to the agency is that a splashy announcement of the initiative will generate favorable news coverage, according to the document viewed by Bloomberg.

The strategy PBMs are using is similar to one deployed by health insurers earlier this year, when they pledged to cut red tape for approvals.

CMS Administrator Mehmet Oz said in June that the largest PBMs should "consider doing away with the rebate-slash-kickback system" on their own before the government acts.

The association that represents nearly 19,000 local pharmacies nationwide called the PBMs' proposal a "gambit" the administration should reject.

"Whatever they are promising to do, it would be foolish for the administration to trust the PBMs to regulate their behavior," the National Community Pharmacists Association said in a statement. "They could have been doing that all along. But they have refused."