

## Policy Tracker Archive

118<sup>th</sup> United States Congress (Q2: April 1st– June 30<sup>th</sup>, 2022)

Purported Policy Intent	Policy Mechanisms	Proposals	Source
Accountability and Oversight	Ensure 340B program is providing care for the low-income patients it is intended to serve	[340B Accountability Act of 2023; Introduced 3/30/2023] To provide clarification on rules relating to drug discounts for covered entities.	<a href="#">Sen. Braun (R-IN)</a>
Accountability and Oversight	Ensure 340B program is providing care for the low-income patients it is intended to serve	[PROTECT 340B Act of 2023; Introduced 04/06/2023] Prohibits discriminatory actions by PBMs, group health plan, health insurance issuer, or Medicare Part D sponsors against 340b covered entities and their pharmacies. Civil monetary penalties will be imposed on PBMs that violate new protections, and data will be reviewed from Medicaid State agencies to ensure there are no Medicaid duplicate discounts.	<a href="#">Rep. Spanberger (D-VA)</a>
Accountability and Oversight	Ensure 340B program is providing care for the low-income patients it is intended to serve	[340B Reporting and Accountability Act; Introduced 4/18/2023] Ensure that patients from covered entities of the 340B program are provided drugs that do not exceed a price at which the covered entity purchased the drug by increasing transparency and accountability of the program.	<a href="#">Sen. Kennedy (R-LA)</a>
Accountability and Oversight	Health Plan Transparency	[Health Care PRICE Transparency Act; Introduced 3/30/2023] To amend the Public Health Service Act to provide for hospital and insurer price transparency. Insurance plans must publish the in-network and out-of-network charges for covered items and services and the negotiated prices for covered prescription drugs.	<a href="#">Sen. Braun (R-IN)</a>
Accountability and Oversight	Health Plan Transparency	[Pharmacy Benefit Manager Reform Act; Introduced 04/27/2023] Prohibition against blocking consumer-decision support tools about all costs to the enrollee for prescription drugs covered by the health plan or sponsor, including out of pocket, copayment, and coinsurance responsibilities as well as any means that can help reduce costs to the enrollee, such as manufacturer copayment assistance, purchasing at the cash price, and purchasing through mail order benefits.	<a href="#">Sen. Sanders (I-VT)</a>
Accountability and Oversight	Health Plan Transparency	[Promoting Transparency and Healthy Competition in Medicare Act; Introduced	<a href="#">Rep. Harshbarger (R-TN)</a>

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		05/15/2023] For contracts entered with a PDP sponsor, reports with negotiated prices for each covered part D drug and the average per-drug amount dispensed must be provided to the Secretary of Health and Human Services.	
Accountability and Oversight	Health Plan Transparency	[PATIENT Act of 2023; Introduced 05/22/2023] A contract entered with a PDP sponsor is required to report the negotiated price for each covered part D drug, the average per-drug amount of direct and indirect remuneration paid by specified pharmacies for covered part D drugs dispensed during the plan year. This bill also prohibits contracts between health plans and PBMs with drug manufacturers that limits the disclosure of drug information (including wholesale acquisition costs, therapeutic categories, formularies, and more) to plan sponsors.	<a href="#">Rep. McMorris Rodgers (R-WA)</a>
Accountability and Oversight	Manufacturer Transparency	[MVP Act; Introduced 04/18/2023] Requires manufacturers to comply with quarterly reports related to price reporting under value-based purchasing arrangements.	<a href="#">Rep. Guthrie (R-KY)</a>
Accountability and Oversight	Manufacturer Transparency	[Affordable Pricing for Taxpayer-Funded Prescription Drugs Act of 2023; Introduced 05/05/2023] Manufacturers or other companies commercializing a biomedical product or service must report the costs of each trial, subsidies of costs by the Federal Government, and annual revenues generated by the product or service while also making this information publicly available.	<a href="#">Rep. Hoyle (D-OR)</a>
Accountability and Oversight	Manufacturer Transparency	[Pharmaceutical Research Transparency Act of 2023; Introduced 05/09/2023] Requiring the National Institutes of Health to create a publicly available repository of cost data from certain clinical trials that test the efficacy of drugs, biological products, and devices in human subjects. For each applicable trial, the registry must, among other information, include the total and per patient cost of the trial, as well as costs for personnel, health care services, and other categories of expenditures. Information must be added to the registry within one year of the trial's completion. The bill also requires drug manufacturers to include their research	<a href="#">Rep. Raskin (D-MD)</a>

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		and development expenditures for drugs and biological products in annual disclosures made to the Securities and Exchange Commission.	
Accountability and Oversight	PBM Transparency	[Pharmacy Benefits Manager Accountability Act; Introduced 04/18/2023] Increase oversight of pharmacy benefit management services by Require all group insurance plans or insurers to report information on the past year's pharmacy benefits and drug costs to the Secretary of Labor and the Secretary of the Treasury.	<a href="#">Rep. Kuster (D-NH)</a>
Accountability and Oversight	PBM Transparency	[Pharmacy Benefit Manager Sunshine and Accountability Act; Introduced 04/25/2023] Require PBMs to report all information related to costs from contractual entities and drug/pharmaceutical manufacturers that will be publicly reported annually on a Department of Health and Human Services website.	<a href="#">Rep. Harshbarger (R-TN)</a>
Accountability and Oversight	PBM Transparency	[Protecting Patients Against PBM Abuses Act; Introduced 04/26/2023] Increase transparency among the discounts, rebates, fees, prices of any covered part D drug, or other remunerations by requiring annual certifications of compliancy to the Secretary with respect to prescription drug plans, and this information is to also be publicly available on an annual basis, at the least.	<a href="#">Rep. Carter (R-GA)</a>
Accountability and Oversight	PBM Transparency	[Pharmacy Benefit Manager Reform Act; Introduced 04/27/2023] PBMs must disclose information collected from drug manufacturers related to copayment assistance, a list each of each drug covered by health plans or sponsors, total out-of-pocket spending by beneficiaries and participants for prescriptions. Spread pricing will also be prohibited under the enactment of this bill.	<a href="#">Sen. Sanders (I-VT)</a>
Accountability and Oversight	PBM Transparency	[DRUG Act; Introduced 05/10/2023] To enhance services provided by pharmacy benefit managers by prohibiting practices that relate to inconsistent charges and steering methods.	<a href="#">Sen. Marshall (R-KS)</a>
Accountability and Oversight	PBM Transparency	[Promoting Transparency and Healthy Competition in Medicare Act; Introduced 05/15/2023] For a contract to exist between a plan and a PBM, the PBM must report the	<a href="#">Rep. Harshbarger (R-TN)</a>

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		total amount of rebates passed through to the PDP sponsor, the total amount of rebates retained by the PBM of other entities, the total amount paid by PBMs to pharmacies, and all payments and admin costs to PBMs.	
Accountability and Oversight	Provider Transparency	[340B Reporting and Accountability Act; Introduced 4/18/2023] Covered 340B entities must report (at least annually) the total amount paid by the covered entities per drug, the total amount received for covered drugs by covered entities, and if new revenue has been received because of charging a covered drug that exceeds its purchasing price and how this revenue was spent. This information is to be made publicly available.	<a href="#">Sen. Kennedy (R-LA)</a>
Accountability and Oversight	Provider Transparency	[Health Care Fairness for All Act; Introduced 05/09/2023] To enforce hospitals to make standard charges public.	<a href="#">Rep. Sessions (R-TX)</a>
Accountability and Oversight	Provider Transparency	[Transparent PRICE Act; Introduced 05/15/2023] To require hospitals to annually publish a list of their standard charges for as many of the 70 Centers for Medicare and Medicaid Services-specified shoppable services, and as many additional hospital-selected shoppable services within both the hospital inpatient and outpatient settings.	<a href="#">Rep. McMorris Rodgers (R-WA)</a>
Accountability and Oversight	Provider Transparency	[To amend title III of the Public Health Service Act to ensure transparency and oversight of the 340B drug discount program; Introduced 5/15/2023] To ensure transparency and oversight of the 340B drug discount program.	<a href="#">Rep. Buschon (R-IN)</a>
Accountability and Oversight	Provider Transparency	[PATIENT Act of 2023; Introduced 05/22/2023] To require hospitals to publish their standard charges for as many of the 70 Centers for Medicare and Medicaid Services-specified shoppable services, and as many additional hospital-selected shoppable services that will be updated annually.	<a href="#">Rep. McMorris Rodgers (R-WA)</a>
Foster Competition	Incentivize generic and biosimilar entry	[INSULIN Act of 2023; Introduced 04/25/2023] The Secretary of Health and Human services have the authority to expedite the development and review of a biosimilar biological product that is designated as a competitive biosimilar insulin therapy.	<a href="#">Sen. Shaheen (D-NH)</a>

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Increase price awareness throughout the supply chain	Disclosure of pricing information to beneficiaries at decision-making	[Patient Right to Shop Act; Introduced 04/27/2023] Prohibiting health insurance plans from entering contracts with PBMs that conceal drug pricing information that would be otherwise available through consumer decision-support tools.	<a href="#">Sen. Marshall (R-KS)</a>
Increase price awareness throughout the supply chain	Public disclosure of pricing information	[Drug-price Transparency for Consumers Act of 2023; Introduced 04/20/2023] Require that each direct-to-consumer advertisement for a drug or biological to disclose the wholesale acquisition cost for their 30-day supplies and be presented 'clearly and conspicuously'.	<a href="#">Sen. Durbin (D-IL)</a>
Reduce costs and improve access for patients	Alternative payment plans	[Expanding Care in the Home Act; Introduced 4/25/2023] To expand access to clinical care in the home in part by improvements in Medicare coverage for home infusions and allowing for monthly capitated payments as an alternative to fee-for-service.	<a href="#">Rep. Smith (R-NE)</a>
Reduce costs and improve access for patients	Increase beneficiary choices under Medicare	[PACE Part D Choice Act of 2023; Introduced 05/18/2023] To ensure that Medicare-only PACE program enrollees have a choice of prescription drug plans under Medicare Part D.	<a href="#">Rep. Wenstrup (R-OH)</a>
Reduce costs and improve access for patients	Lower OOP costs	[INSULIN Act of 2023; Introduced 04/25/2023] Prohibiting cost-sharing, deductibles, and high out of pocket costs on negotiated prices for selected insulin products. 'Select' meaning at least one of each dosage form on insulin when such form is licensed and marketed as selected by the group health plan or health insurance issuer.	<a href="#">Sen. Shaheen (D-NH)</a>
Reduce costs and improve access for patients	Lower OOP costs	[ACCESS Act; Introduced 04/28/2023] Implement a temporary expansion of health insurance premium tax credits for certain low-income populations in which cost-sharing will not be applied.	<a href="#">Rep. Fletcher (D-TX)</a>
Reduce costs and improve access for patients	Lower OOP costs	[Cutting Medicare Prescription Drug Prices in Half Act] To implement a cap on costs for covered prescription drugs under Medicare parts B and D; costs are not to exceed the lower of either the amount paid by the Secretary of VA to procure the drug under laws administered by the Secretary, or the amount paid to procure the drug through the Federal Supply Schedule of the General Services Administration.	<a href="#">Sen. Sanders (I-VT)</a>

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Reduce costs and improve access for patients	Lower OOP costs	[Medicare for All Act; Introduced 05/17/2023] Prohibiting cost-sharing or balance billing for beneficiaries who enroll in this universal coverage plan.	<a href="#">Rep. Jayapal (D-WA)</a>
Reduce costs and improve access for patients	Utilize international reference pricing	[Fair Prescription Drug Prices for Americans Act; Introduced 04/19/2023] To require that the list and retail price of certain prescription drugs and biological products not to exceed the average retail price of six reference countries.	<a href="#">Sen. Hawley (R-MO)</a>
Reduce costs and improve access for patients	Utilize international reference pricing	[Affordable Pricing for Taxpayer-Funded Prescription Drugs Act of 2023; Introduced 05/05/2023] Pricing formulas for biomedical products or services must ensure that residents of the United States are not charged more than the reference price in countries with large economies and high incomes, for the same product or service.	<a href="#">Rep. Hoyle (D-OR)</a>
Reduce costs for government health programs	Allow the Medicare program to negotiate with manufacturers	[SMART Prices Act; Introduced 04/25/2023] Heightens provisions of drug pricing reform in the Inflation Reduction Act by improving certain definitions (i.e 'maximum fair price' and 'qualifying single source drug') while also accelerating the selection of negotiation-eligible drugs under the Medicare Drug Price Negotiation Program.	<a href="#">Sen. Klobuchar (D-MN)</a>
Reduce costs for government health programs	Allow the Medicare program to negotiate with manufacturers	[Medicare for All Act; Introduced 05/17/2023] To require annual negotiation of prescription drug prices between the Secretary and drug manufacturers.	<a href="#">Rep. Jayapal (D-WA)</a>
Reduce costs for government health programs	Implement pass-through pricing requirement to plan sponsors associated with government health programs	[INSULIN Act of 2023; Introduced 04/25/2023] PBMs must remit 100% of rebates, fees, alternative discounts, and all other remuneration services received from a drug manufacturer or distributor that relates to utilization of insulin under health plan or health insurance coverage to the respective group health plan.	<a href="#">Sen. Shaheen (D-NH)</a>
Reduce costs for government health programs	Implement pass-through pricing requirement to plan sponsors associated with government health programs	[Pharmacy Benefit Manager Reform Act; Introduced 04/27/2023] Require remittance of 100 percent of rebates, fees, alternative discounts, and other remuneration that a PBM negotiates related to the utilization of drugs under group health plans or sponsors.	<a href="#">Sen. Sanders (I-VT)</a>
Reduce costs for government health programs	Increasing manufacturer rebates to	[Lower Drug Costs for Families Act; Introduced 03/30/2023] To apply prescription drug inflation rebates to drugs furnished in the commercial market (under	<a href="#">Sen. Cortez Masto</a>

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	government programs	Medicare Parts B and D) and to change the base year for rebate calculations.	
Reduce costs for government health programs	Increasing manufacturer rebates to	[Drug Price Transparency Act of 2023; Introduced 03/30/2023] Remove previous safe harbor protection for rebates involving prescription drugs. Establishes a new safe harbor protection that allows a rebate from a drug manufacturer to a health insurer or pharmacy benefit manager to be exempt only if the rebate (1) is disclosed to the consumer at the point of sale, or (2) is a flat fee paid for pharmacy benefit management services.	<a href="#">Sen. Braun (R-IN)</a>
Reduce costs for government health programs	Increasing manufacturer rebates to	[ACCESS Act; Introduced 04/28/2023] Requires that in order for a payment to be available under the proposed Federal Medicaid program for covered outpatient drugs of a manufacturer, the manufacturer must establish a rebate agreement to the program that is consistent with its State Medicaid rebate agreement.	<a href="#">Rep. Fletcher (D-TX)</a>
Reduce costs for government health programs	Share risk between payers and manufacturers	[MVP Act; Introduced 04/18/2023] To organize rules for value-based agreements between State plans and drug manufacturers of the 'multiple best price' policies from the Center for Medicare and Medicaid for both inpatient and outpatient drugs. Drugs that are subject to sales will have their average sales price calculated if the manufacturer of the drug has agreed to report multiple best prices.	<a href="#">Rep. Guthrie (R-KY)</a>