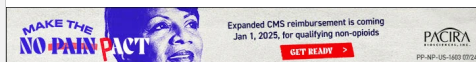




Now Available: Access, Affordability, and Outcomes: The Value of Managed Care Pharmacy Report 2024

On Oct. 10, AMCP unveiled the 2024 edition of Access, Affordability, and Outcomes: The Value of Managed Care Pharmacy report. This facts and figures report is designed to raise awareness of the existence, prevalence, and importance of managed care pharmacists, and it offers a reliable source of data to inform key policymakers and stakeholders involved in the development of health care and prescription drug coverage policy in the United States. This year's report analyzes relationships and comparisons between pharmacy types and pharmacy networks, spending and cost saving strategies between medical and pharmacy benefits, and comparative spending on prescription drugs by fee-for-service Medicaid programs vs. managed Medicaid programs. The report also highlights the most widely used managed care pharmacy tools: prior authorization, drug utilization, medication therapy management, and formulary design. Read the 2024 Access, Affordability, and Outcomes report today.

[Access the AAO Report](#)



Make a Difference: Help Pass AMCP's Priority Legislation

Visit AMCP's [Action Center](#) to call on Congress to enact AMCP's federal policy priorities: the [Access to PDTs Act \(S. 723/H.R. 1458\)](#) and [Medicaid VBPs for Patients Act \(S. 4204/H.R. 2666\)](#). Following the election, Members of Congress will return to Washington D.C. for a final legislative sprint before the next Congress is sworn in on Jan. 3, 2025. This lame duck period will be crammed with 'must-pass' priorities, such as government appropriations for 2025 and the National Defense Authorization Act. Additionally, lame duck offers legislators and advocates a chance to advance additional policy priorities before the end of the 118th Congress. AMCP encourages members to make their voices heard in these policy negotiations. This year, the lame duck session is also a perfect time to explore AMCP's additional advocacy opportunities, including the [Pharmacy Advocacy Leaders program](#). AMCP members also receive access to AMCP's [Find Legislation](#) and [Find Politicians](#) tracking software.

[Sign-up to receive AMCP Advocacy Action Alerts](#)

CA Governor Vetoes Significant PBM Reform Bill

On Sept. 28, California Governor Gavin Newsom (D) vetoed



[Senate Bill 966](#), rejecting what was expected to be one of the most significant PBM reform laws to be passed out of state legislatures this year. Last month, AMCP drafted [a summary of the bill's provisions](#), which would have mandated PBMs to implement transparency requirements, including annual reporting on contracts and revenues, costly drugs, and product benefits. The bill also would have required PBMs to pass through price concessions to contracted health plans, register with the state Department of Insurance, and implement other measures intended to limit unfair trade practices. Failure to comply with these provisions would've resulted in civil penalties, such as the revocation of a PBM's license or monetary fines. In his veto message, Governor Newsom applauded the bill's efforts to rein in pharmaceutical prices but argued that more information on PBM business practices would be needed before implementing PBM regulation. The veto message also highlighted existing policies designed to lower drug prices, including the [CalRx generic drug and biosimilar manufacturing program](#) and state [Office of Health Care Affordability](#).

[Read the full veto message](#)

Election Update: CBO Releases Analysis on Alternative Approaches to Reducing Drug Prices

In 2022, the Biden-Harris administration began implementation of the Inflation Reduction Act, which granted Medicare the power to negotiate prices for certain Part D and Part B drugs for the first time. In 2021, CMS pulled the proposed [Most Favored Nation](#) model, a Trump-era drug pricing policy that would have used international reference prices to lower Part B drug costs in the United States. Earlier this month, the nonpartisan Congressional Budget Office (CBO) released a report which examines several policies designed to reduce drug prices, including expansion of Medicare drug price negotiation and full implementation of the international reference pricing model. While CBO's analysis of the Most Favored Nation model anticipated a reduction in drug prices of up to 5%, former President Trump [recently rescinded his intent to pursue the model](#) if reelected next month. CBO's report found that expansion of Medicare price negotiations, [which Vice President Harris supports](#), would lead to a small reduction (1% to 3%) in average drug prices in the United States. The report's analysis also found that policies such as commercial

importation of drugs outside the U.S., elimination of direct-to-consumer pharmaceutical advertising, and increased transparency around drug prices, would have no or negligible effect on prescription drug prices.

[Read the full CBO report](#)

CMS Issued Final Guidance for the Second Cycle of the IRA's Medicare Drug Price Negotiation Program

On Oct. 2, 2024, the Centers for Medicare & Medicaid Services (CMS) and the Department of Health and Human Services (HHS) issued the Final Guidance for the Second Cycle of the Medicare Drug Price Negotiation Program for Fiscal Year 2027. The guidance discussed requirements for the Medicare Transaction Facilitator data and payment modules, how CMS intends to gather feedback from patient advocacy organizations and clinicians, and manufacturer compliance with effectuating the MFP and mitigating material cashflow concerns for dispensing entities. Stay updated with AMCP's Regulatory NewsBREAKs on federal actions

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