

When PBMs Tell You Myths,

LEARN THE FACTS

Pharmacy Benefit Managers (PBMs) are middlemen who have strayed from their original purpose of negotiating savings for patients and now keep the profits for themselves, leaving the rest of Florida's consumers to pay higher drug prices. PBMs use anti-competitive practices to short-circuit the free market and create health care monopolies.

These predatory tactics decrease access for patients, force neighborhood pharmacies to close down, and raise costs for everyone. We need legislation that will increase transparency and accountability on PBMs and ensure that patients are prioritized over profits.

The important role Florida's neighborhood pharmacies play in patient well-being and the state's economic landscape is evident when you consider:

-  There are over 1,300 independent pharmacies in Florida
-  These pharmacies fill over 78 million prescriptions a year
-  Florida's neighborhood pharmacies contribute over \$4 billion in economic activity and create 12,000+ jobs
-  Neighborhood pharmacies are closing at an alarming rate
-  When these pharmacies close, there is a drop in customers filling and taking their prescriptions

Neighborhood pharmacies are closing at an alarming rate due to PBMs, leaving the patients and employees who depend on them to suffer. This decreases access and increases costs for all Floridians. Elected officials need to be armed with the facts — not fiction — so they can develop policies that increase accountability, improve transparency, and benefit our state's residents and visitors.



In a fight to keep up their manipulative practices, PBMs are spreading these myths:

MYTH: PBMs fulfill their purpose of ensuring cost savings for patients and state governments

Data provided by PBMs to the Centers for Medicaid and Medicare Services cannot support the claim that PBMs provide savings. In fact, states including Ohio, Kentucky, and New York have found that PBMs have cost taxpayers hundreds of millions of dollars.

MYTH: The PBM market is competitive and diverse

The PBM market is an oligarchy dominated by just three mega-corporations – Optum Rx, Express Scripts, and CVS Caremark. Nationally, these three PBMs control 85% of the entire market. This severe lack of competition limits consumer choice and puts neighborhood pharmacies in an exceedingly vulnerable position.

MYTH: PBMs increase access to drugs

PBMs make drugs less accessible by inflating costs and putting their profits over the needs of patients. PBMs also force consumers to use pharmacies they own instead of the patients' neighborhood pharmacy, a demand that could force some customers to drive miles out of their way to get critical prescriptions.

MYTH: PBMs are properly regulated, and dismantling the system would increase premiums

Florida has no comprehensive regulation of PBM rebates, transparency, or conflicts of interest. Significant overhauls of the system in other states has actually led to substantial savings – such as in New Jersey, where a reverse auction among PBMs saved \$1.6 billion over three years, without an increase in premiums.

The truth uncovers the PBM myths and shows how a lack of transparency and accountability has led to extreme costs for patients, pharmacies, and taxpayers. Florida needs comprehensive reform of this industry in order to expand patient access to prescriptions and other services and to foster a competitive market.



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