



Wednesday, February 21, 2024

The Honorable Chuck Schumer
Senate Majority Leader
United States Senate
Washington, D.C. 20510

The Honorable Mike Johnson
Speaker
U.S. House of Representatives
Washington, D.C. 20510

The Honorable Mitch McConnell
Senate Minority Leader
United States Senate
Washington, D.C. 20510

The Honorable Hakeem Jeffries
Democratic Leader
U.S. House of Representatives
Washington, D.C. 20510

Majority Leader Schumer, Minority Leader McConnell, Speaker Johnson, and Democratic Leader Jeffries:

As a leading advocate for increasing access to affordable low-cost treatments for consumers, the National Consumers League is writing to share our support for the pharmacy benefit manager (PBM) reforms included in several recent legislative packages.

We appreciate the reform efforts taken by this Congress under your leadership, especially those to delink compensation, enhance transparency, and curb potentially anticompetitive behavior. We believe that these provisions, among others, would begin to address and mitigate the current PBM schemes that block lower-cost biosimilars from being accessible and available to Medicare patients.

Given the ongoing surge in prescription drug costs, expanding access to lower cost biosimilars represents a bipartisan solution that would benefit all Americans. For example, last year saw the launch of nine *adalimumab* biosimilars with little to no uptake for Medicare Part D patients. Despite discounts ranging from 5 percent to 86 percent for these nine biosimilars, most patients are unable to access these more affordable options. Out of 42,000 potential Medicare Part D patients, less than 1,000 have received access to the *adalimumab* biosimilars. These barriers are not exclusive to one treatment as all FDA approved biosimilars may face similar challenges, but this lack of uptake underscores the barriers to access patients face and reveals the systemic shortcomings of the U.S. health care system.

This situation is unacceptable. When formularies, especially Medicare formularies, prioritize high-cost, high-rebate products, patients suffer. The three largest PBMs began excluding biosimilars from their formularies in 2018/2019, and a total of 14 biosimilars have been excluded by at least one PBM since then.¹ It is crucial for consumers to have the ability to access FDA-approved, lower-cost biosimilars, and as such, we urge Congress to deliver on these policies. Policy support at the federal level is required to realign PBM incentives within Medicare Part D and enhance the uptake, availability, and accessibility of biosimilars.

These policies would not only help to alleviate barriers to accessing more treatment options for patients but also lead to significant savings. According to one study, biosimilars could save consumers and the U.S. health care system \$133 billion by 2025.²

We thank you for your work in this area and urge its continued momentum. With a shared commitment to advancing these policy changes from both chambers, we believe this is an opportunity to significantly enhance health care in our country and ensure Medicare patients have access to lower-cost biosimilars.

Sincerely,

A handwritten signature in black ink, appearing to read "Sally Greenberg". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Sally Greenberg
Chief Executive Officer

¹ https://www.xcenda.com/-/media/assets/xcenda/english/content-assets/white-papers-issue-briefs-studies-pdf/xcenda_pbm_exclusion_may_2022.pdf

² <https://www.cardinalhealth.com/content/dam/corp/web/documents/Report/cardinal-health-2022-biosimilars-report.pdf>