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President Biden Signs Inflation Reduction Act

This week, President Biden signed the Inflation Reduction Act, which delivers a significant legislative victory for Democrats with billions in energy and climate spending as well as subsidies for Affordable Care Act premiums and Medicare price negotiations. For pharmacies, reimbursement could be impacted under the new price negotiation framework, as any difference between the negotiated price and discounted price for a drug would be "trued-up" within prompt pay requirements. NCPA has secured language for the record in the House that CMS will not implement the Act in a way that would cause any reduction in pharmacy reimbursement because of Medicare drug price negotiation. NCPA will meet with CMS in September to further ensure that this is the case. For a full detailed analysis of the Inflation Reduction Act, please see NCPA's summary.

NCPA's Month of Action is Underway

NCPA's Month of Action is underway as several legislators or their key staff members visited community pharmacies. These visits included CMS Administrator Chiquita Brooks-LaSure and Senate Finance Committee Chairman Ron Wyden (D-Ore.) visiting River Road Health Mart Pharmacy in Eugene. NCPA President Michele Belcher was also in attendance, see NCPA's press release on the visit [here](#). Additionally, NCPA Vice President Steve Moore hosted Republican Conference Chair, Rep. Elise Stefanik (R-N.Y.) and Reps. Brendan Boyle (D-Pa.) and Dwight Evans (D-Pa.), both members of the Ways and Means Committee, visited Circle Pharmacy in Philadelphia. Rep. Lloyd Smucker (R-Pa.), another member of the Ways and Means Committee, also visited a Medicine Shoppe pharmacy in Columbia, Pa. On the Senate side, NCPA member Kevin Marchant, owner of Santaquin Pharmacy met with Sen. Mitt Romney (R-Utah) a member of the Health, Education, Labor and Pensions Committee and a staff member for Sen. Charles Grassley (R-Iowa) visited Osterhaus Pharmacy. Grassley serves on the Senate Finance Committee. These are just a few of the many pharmacy visits hosted by NCPA members over the past couple of weeks.

Hosting a legislator or their staff member in your pharmacy is an effective way to build a lasting relationship. Check out [this video](#) of Rep. Buddy Carter (R-Ga.) and NCPA Vice President Michael Kim discussing how to effectively host a legislator. We're asking all community and LTC pharmacists to

participate in our [Month of Action](#). Congressional schedules are filling up for August so if you have not yet extended an invitation don't delay any further! Please let us know of your interest in participating by completing this [interest form](#) or by [emailing Michael Rule](#) and submit your invites to your legislators as soon as possible.

Urge Senate Action on S. 4293

If you have not yet done so, [contact your senators](#) and urge them to cosponsor S. 4293, the Pharmacy Benefit Manager Transparency Act of 2022, and to voice support for prompt floor action to Majority Leader Charles Schumer (D-N.Y.) and Minority Leader Mitch McConnell (R-Ky.). Tell your senators to support this bill because it empowers the FTC to increase drug pricing transparency and hold PBMs accountable for unfair and deceptive practices that drive up the costs of prescription drugs at the expense of consumers. It only takes a minute. Please act today. So far, sponsors are Sens. Maria Cantwell (D-Wash.), Chuck Grassley (R-Iowa) and cosponsors include John Boozman (R-Ark.), Mike Braun (R-Ind.), Cindy Hyde-Smith (R-Miss.), Jerry Moran (R-Kan.), Jon Tester (D-Mont.) and Thom Tillis (R-N.C.).

NCPA Provides New York State with Regulatory Recommendations to Address Patient-Steering by Pharmacy Benefit Managers

This week, NCPA [provided recommendations](#) to New York State's Pharmacy Benefits Bureau addressing the anticompetitive practice of patient-steering. NCPA urged the state to prohibit practices such as coercive copay structures, mandatory use of pharmacies and limitations on bulk purchasing. The comments emphasized the fact that these practices are anticompetitive and remove patient choice, prevent local health care providers from competing for patients' business, and increase costs for plan sponsors and consumers.

Earlier this summer, the New York State Department of Financial Services' Pharmacy Benefits Bureau released multiple requests for information on how to best implement rules relating to the regulation of PBMs, as well as the application of existing laws to PBMs operating in New York. This bureau is a newly created entity in New York tasked with oversight and regulation of PBMs. Because state actions AFTER the passage of legislation are vitally important, NCPA responded to several of the requests. First, NCPA provided comments on the duty, accountability, and transparency of pharmacy benefit managers to health plans under NY Public Health Law Section 280-a(2). The comments can be found [here](#). Secondly, NCPA provided guidance on the application of state insurance laws to PBMs administering benefits to Medicare Part D plans. This is extraordinarily important because states are just beginning to realize their authority to regulate PBMs administering Part D plans, as that authority was confirmed in *PCMA v. Wehbi* (Eighth Circuit Court of Appeals) late last year. The comments can be found [here](#).

Medicare Part D Enrollment Begins October 15

Are you prepared to educate your patients on Medicare Part D enrollment, which begins October 15 for the 2023 plan year? See our [quick reference guide](#) to Medicare Part D plans for 2023, including information on the standard benefit design and cost-sharing, as well as our [bag stuffer](#) for patients. CMS [announced](#) that the average basic monthly premium for standard Medicare Part D coverage is projected to be approximately \$31.50 in 2023, an expected decrease of 1.8% from \$32.08 in 2022. For more information on Medicare Part D rates for 2023, see [here](#).

FDA Issues Final Rule on Over-The-Counter Hearing Aids

FDA issued a [final rule](#) establishing a regulatory category for over-the-counter (OTC) hearing aids. NCPA had supported this in its [comments](#) to the proposed rule back in January. The new OTC category applies to certain air-conduction hearing aids intended for people 18 years of age and older who have perceived mild to moderate hearing impairment. Hearing aids that do not meet the requirements for the OTC category (for example, because they are intended for severe hearing impairment or users younger than age 18) are prescription devices. Additionally, FDA [released guidance](#) clarifying the difference in regulatory requirements between hearing aids and personal sound amplification products (PSAPs). NCPA supports the regulatory framework the FDA has created to allow for OTC hearing aids which results in more significant adoption by patients and a lowering of cost barriers. In anticipation of the final rule, [NCPA has been educating members](#) on possible opportunities, as well as potential barriers to entry, to meet the needs for those with mild to moderate hearing loss. The effective date for the final rule is 60 days following publication in the Federal Register (August 17).

NCPA Discusses Managed Care Reform with Florida Medicaid

The Florida Agency of Health Care Administration, which oversees the state's Medicaid program, invited NCPA to discuss proposals to improve the Medicaid managed care program. This was a follow-up to [comments](#) NCPA had submitted in response to the Agency's "request for information" on ways to protect patient access to community-pharmacy services in the Medicaid managed care program. NCPA reiterated that the Agency must control PBM conflicts of interest that limit patient access to pharmacy services while driving up costs for taxpayers.

Delaware Judge Rules in Favor of Medicaid Transparency

NCPA is cheering the decision of a Delaware Superior Court judge who last week ruled that the Delaware Department of Health and Social Services must hand over Medicaid records to State Auditor Kathy McGuinness. For nearly two years, McGuinness has been [seeking access to the information](#), which she says her office needs to determine whether DHSS's Division of Medicaid and Medical Assistance is complying with federal and state requirements.

CMS Addresses NCPA Concerns on Flu Vaccine Reporting in Final Rule

CMS released its [final rule](#) for skilled nursing facilities for CY 2023. NCPA submitted [comments](#) to the rule back in June, which largely focused on the value of consultant pharmacists in SNFs in response to a request for information on minimum staffing levels. In the final rule, CMS states that it will continue to review the comments received and anticipates future rulemaking within one year. CMS addressed NCPA's concern regarding the reporting of influenza vaccination among health care personnel potentially being overly burdensome to pharmacists. CMS noted that the rule neither requires the influenza vaccine to be administered to health care personnel at SNFs, nor does it require the vaccine to be administered by a pharmacist or a long-term care pharmacy. For other highlights of the final rule, see this [fact sheet](#).

Community Pharmacies Continue to Suffer from Labor Shortages

For the third time in 14 months, NCPA members say they are having a tough time filling open positions, and the result is higher payroll costs and longer wait times for patients seeking to fill prescriptions, according to a survey. The result on labor conditions is barely changed from similar NCPA surveys [last May](#) and [last November](#), when roughly 79 percent and 70 percent of community pharmacists,

respectively, said they were struggling to find workers. This year and last year, applicants for pharmacy technician are in short supply. More than 88 percent of respondents this year said finding pharmacy techs was their No. 1 problem, followed by front-end staff at 56 percent. Roughly 73 percent of respondents say they're dealing with the labor shortage by offering higher wages and benefits. Fifty-four percent say fewer hands means it's taking longer to fill patient prescriptions. Read more about the survey results [here](#).

NCPA State Legislative Activity Update

NCPA tracks state legislation related to our top three state priorities: [Medicaid reform](#), [scope of practice and compensation for services](#), and [PBM reform and regulation](#). Click each issue for a report of bills that have been introduced so far this session specifically dealing with these three issue areas. You can access the individual bill language and basic information on the bill by clicking on the bill numbers in the attached report. Bills that have moved this week are listed at the top in the "Recently Updated" section.