



**FOR IMMEDIATE RELEASE**

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## **Pharmacy Coalition to Congressional Leaders: Enact PBM Reform Now to Protect Patient Access and Reduce Americans' Drug Costs**

***National pharmacy organizations warn Congress that failure to curb abusive PBM practices has escalated from an emerging threat to an unaddressed crisis for patients and pharmacies***

**Arlington, VA** – A national coalition of pharmacy groups today sent a [joint letter](#) to Congressional leadership urging immediate action on comprehensive pharmacy benefit manager (PBM) reform. Citing accelerating pharmacy closures, inflated prescription drug costs, and shrinking patient access to the pharmacy of their choice, the groups warn that the failure to address harmful PBM practices “is no longer a crisis in the making — it now constitutes a crisis unaddressed.” They call on Congress to seize a “win within reach” by advancing previously agreed-upon, bipartisan PBM reforms at the next available legislative opportunity.

The multi-association coalition — including the National Association of Chain Drug Stores, the National Community Pharmacists Association, the American Pharmacists Association, FMI – The Food Industry Association, the National Association of Specialty Pharmacy, and the National Grocers Association — stated the following in the letter to House Speaker Mike Johnson (R-LA), House Minority Leader Hakeem Jeffries (D-NY), Senate Majority Leader John Thune (R-SD), and Senate Minority Leader Chuck Schumer (D-NY):

*We write, united in one voice, as pharmacists, pharmacy owners, and pharmacy operators across care settings, to urge Congress to enact pharmacy benefit manager (PBM) reform. We also appreciate the legislative groundwork laid to date to reduce prescription drug costs and sustain healthcare access.*

***Despite these earnest efforts, the failure to curb harmful PBM practices is no longer a crisis in the making — it now constitutes a crisis unaddressed. PBM reform is a win within reach for patients and for the pharmacies that serve them, yet procedural and political delays have left it unresolved, while the consequences mount. Without PBM reform, patients are experiencing inflated drug costs, and many no longer have access to the pharmacy of their choice as pharmacies close and others are pushed out of network. Americans expect Congress to address these perils.***

*Since Congress' near-win on PBM reform in December 2024 — another missed opportunity that fell just short of enactment — the devastation of pharmacy access for patients and communities has only worsened. **In the months since that lost attempt to help solve the problem, pharmacies have closed at an alarming net rate of more than six per day, an acceleration of the nearly four-per-day net closing rate of 2023 and 2024. Over the past year alone, more than 2,200 pharmacies have closed, and Americans have lost more than 13 percent of their pharmacies since January 2018, on a net basis.***

*While we understand the magnitude of the broader healthcare issues before Congress, and the significant political differences on many of these issues, PBM reform stands out as an area of broad*

agreement with immediate, meaningful benefits. It is imperative that Congress bring PBM reform to a vote and enact it.

**Consistent with our outreach to date, the following aspects of reform are essential to ensure that a legislative package is effective and can be supported by pharmacies:**

- *Medicaid managed care pharmacy payment reform and a ban on spread pricing by requiring 100 percent pass-through to the pharmacy of ingredient costs and the professional dispensing fee, which could allow the federal government and states to save billions of dollars.*
  - *Ensuring fair and adequate Medicaid managed care pharmacy reimbursement from PBMs to cover the cost of acquiring and dispensing prescription drugs.*
  - *Requiring National Average Drug Acquisition Cost (NADAC) survey participation to help establish benchmarks for Medicaid reimbursement to pharmacies, which can be used to ensure fair reimbursement to pharmacies in Medicaid-managed care and commercial markets.*
- *Requiring the Centers for Medicare and Medicaid Services (CMS) to define and enforce “reasonable and relevant” Medicare Part D contract terms, including reimbursement and dispensing fees, and establishing in Medicare Part D an approach by which “any willing pharmacy” can truly participate and serve patients. More than 50 million Medicare Part D beneficiaries rely on prescription drug plans managed by PBMs. This change would ensure they have access to a broader network of pharmacies that can provide them with essential care.*

*These policies have been the subject of bipartisan and bicameral work across committees of jurisdiction, creating a robust package of Medicare, Medicaid, and commercial market reforms that also include:*

- *Prohibiting PBM compensation in Medicare Part D from being tied to the manufacturer’s list price of a drug.*
- *Promoting transparency of insurer claims and reimbursement information to the pharmacy, including independent audits and enforcement measures in Medicare Part D.*

*As Congress approaches key deadlines, we respectfully request that PBM reform be included in the next appropriate moving vehicle or advanced as a stand-alone measure. **The consensus is broad, the policy is developed, and the consequences of inaction are compounding.** We stand ready to assist with swift enactment and implementation.*

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More information about the pharmacy organizations is available online:

[National Association of Chain Drug Stores \(NACDS\)](#)  
[National Community Pharmacists Association \(NCPA\)](#)  
[American Pharmacists Association \(APhA\)](#)  
[FMI – The Food Industry Association](#)  
[National Association of Specialty Pharmacy \(NASP\)](#)  
[National Grocers Association \(NGA\)](#)