

Ensuring Seniors Access to Local Pharmacies Act

The *Ensuring Seniors Access to Local Pharmacies Act of 2017* would require that community pharmacies in medically underserved areas (MUAs), medically underserved populations (MUPs), or health professional shortage areas (HPSAs) be allowed to participate in Medicare Part D preferred pharmacy networks if they are willing to accept the contract terms and conditions that other preferred providers operate under.

The Problem: Seniors Lack Access to the Pharmacy of Their Choice

Current law requires Medicare Part D plans to permit any state board certified pharmacy to participate in the plan's network. In recent years, the overwhelming majority of Part D plans have created separate preferred pharmacy networks. More than 86 percent of Part D plans now include preferred pharmacy networks, up from 15 percent just five years ago.¹

Many community pharmacies are not included in preferred pharmacy networks within the Medicare Part D program. If their local pharmacy is not included in a preferred network, a senior must either switch to a preferred network pharmacy or pay a higher copayments or coinsurance in order to access the local pharmacy of their choice. In rural areas, accessing a preferred pharmacy may require significant travel. In urban areas, CMS recently found that 54 percent of preferred pharmacy networks fail to meet standards for access to pharmacies.

In medically underserved areas, local pharmacies are an important part of the health care delivery system where patients can not only access prescription drugs but also receive services like preventative screenings and medication therapy management. Excluding community pharmacies from preferred pharmacy networks takes away choices from seniors and could lead to reduced access to medical services.

The Solution: Allowing Community Pharmacists to Participate in Preferred Networks

The *Ensuring Access to Local Pharmacies Act of 2017* benefits senior citizens on Part D drug plans, medically underserved areas, and community pharmacies. Under the bill, any state board certified pharmacy located within a MUA, MUP, or HPSA must be allowed to participate in the preferred network if they are willing to accept the same terms and conditions that other preferred pharmacies operate under. This gives seniors more choice, allows community pharmacies to compete, and preserves access to medical services in underserved areas.

¹ Suzanne M. Kirchoff, Medicare Preferred Pharmacy Networks, In Focus, *Congressional Research Service*, Jan. 6, 2015. Report No. IF10037.