



Washington

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## Seniors Deserve A Real Medicare Drug Benefit

(NAPSA)—Medicare beneficiaries deserve a modernized Medicare program that offers them meaningful prescription drug coverage, one that includes the same choices in prescription coverage as those in the private and government-sponsored employee health plans.

That is the opinion not only of many Americans, but of health care experts as well. Experts also feel that America's Pharmacy Benefit Managers (PBMs) are crucial to affordable drugs for seniors. This is because these professionals are a proven source of providing consumers access to safe, affordable, and effective prescription drugs.

In January 2003, the General Accounting Office (GAO)—the federal government's own analysts—concluded that the savings PBMs provided for federal employee health plan enrollees were up to 53 percent below the regular cost at retail pharmacies.

Simply put, PBMs have been trusted to provide both private-sector and government employees with comprehensive prescription benefits—benefits which should be expanded to our nation's seniors.

But, without the right tools, PBMs can't help seniors.

In the past, PBMs have excelled at:

- Creating and maintaining nationwide pharmacy networks;
- Aggressively negotiating discounts with manufacturers to drive down the cost of drugs;
- Ensuring drug safety, cutting down fraud, and employing drug quality checks; and,
- Creating competition through the use of clinically-based formularies.



Many feel that Congress should allow PBMs to employ the same tools and techniques that benefit government workers to benefit Medicare beneficiaries.

Unfortunately, some special-interests are threatening a Medicare Drug Benefit. To avoid that, Congress must put the interest of America's seniors before those who are pushing proposals that could drive up costs, and, ultimately derail the drug benefit by handcuffing PBMs.

The Congressional Budget Office recently reported that one special interest-backed amendment undermining PBMs' ability to negotiate drug discounts and giving more leverage to drug manufacturers and retail pharmacies would cost the system \$40 billion over 10 years.

Provisions in the bill fail to require retail pharmacies to tell seniors that cheaper mail-order alternatives are available—a convenience much-needed by the mobility-impaired.

To let your legislator know how you feel about this issue, write to the U.S. Senate, Washington, D.C. 20510 and the U.S. House of Representatives, Washington, D.C.