

Pharmaceutical Research and Manufacturers of America (PhRMA):

“Health plans and middlemen get significant discounts on insulin and pay less today for these medicines than they did 15 years ago, but they don’t always share these savings with patients at the pharmacy. No patient should have to pay more for insulin than what their insurance company pays, and that’s why we have proposed solutions that will fix the insurance system and help make sure medicines are accessible and affordable for all patients.”

Pharmaceutical Care Management Association, which represents pharmacy benefit managers:

“We believe the key to reducing drug costs is increasing competition, including for insulin products. Unfortunately, tactics used by drug manufacturers to avoid competition, including ongoing patent extensions on insulin products, are a significant barrier to getting costs down even further for people with diabetes.

Pharmacy benefit managers, PBMs, have held [net insulin costs flat](#) for patients, while average [out-of-pocket costs are declining](#). In addition, PBMs have introduced programs to cap, or outright eliminate, out-of-pocket costs for insulin and have stepped up efforts to help patients living with diabetes by providing clinical support and education, which help patients maintain their insulin regimens and lead healthier lives.”

California Association of Health Plans:

“High medical and prescription drug costs are a main driver of health plan premiums, and lowering these costs has long been a top priority for California’s health plans. We applaud innovative ideas including creating a state generic prescription drug label. This could be particularly helpful in countering some of the patent protection schemes the big pharmaceutical companies have been using for decades to keep generic drugs off the market, such as pay-for-delay deals. For example, there is currently no generic equivalent for insulin. If California could bring a generic insulin drug into the market, it could help to address the high prices consumers are currently paying for these drugs.”

“We believe that the responsibility for high insulin prices rests with those who raised the prices. Drug manufacturers. Higher drug prices don’t benefit our health care system and health plans are committed to reining in these out-of-control cost increases. Shifting the blame to those who are trying to reduce costs is a classic Pharma trick. Negotiating rebates is one way to lower costs to those who

purchase insurance. Those rebate savings are passed along to consumers in their premiums. Without high drug prices there would be no need for rebates.”