

The PUTTbulletin

LEGISLATIVE MADNESS



"Here's how I'm going to beat you. I'm going to outwork you. That's it. That's all there is to it." — Pat Summitt, University of Tennessee Women Lady Volunteers (1974 to 2012)

Legendary Coach Pat Summitt had no idea how hard the army of pharmacy owners and patients would be working to overcome the PBM mafia, but hard work never scared a small business owner. We can't outspend them, since they are bankrolled by fees no one can explain and just underpay their competition to pad their pockets. Owners must get LOUD and outwork them by having patients and their community networks reach out to tell them the importance of patient access and lower drug prices.

I think it might be easier to be a Certified NCAA Bracketologist than try to follow spreadsheets tracking pending PBM legislation this year. Whether you are in a state that is working on one of your first pieces of PBM reform or building on prior year's successes, pharmacy owners and advocates across the country are continuing to fight back against egregious PBM tactics. There has been action on several PBM reform bills at the state level over the last few weeks. I am highlighting a few that have made substantial progress, and others that need every pharmacist and patient in their state to speak out against Goliath.

Kudos to the 3 states that have bills that have made it through both state legislative chambers and to the Governor's Desk. Arkansas Governor Sanders has signed Act 350, requiring PBMs to reimburse pharmacies with 7–14 days for electronic claims and 30 days for paper claims, or face a 12% penalty. Georgia's HB 196 passed both chambers,

and has been sent to Governor Kemp's desk. This bill will provide a \$11.50 dispensing fee for independents and \$10.50 for other pharmacies for state health employee plans and state university employee plans. This would help save a minimum of \$11M to the state in prescription drug costs. Social media has been abuzz since Virginia passed the Save Local Pharmacies Act. Legislators, pharmacy owners, and Cost Plus Drugs Owner Mark Cuban even weighed in on wanting Governor Younkin to sign this bill soon. We hope the General Assembly will reject the recently proposed amendments and sign the Save Local Pharmacies bill by the April deadline.

We are cheering on our members in traditional powerhouse states such as Arkansas, who has consistently led the way in PBM reform, and fighting a tidal wave of opposition ads and hit pieces. New York is back with their own bill to prohibit conflict of interest by owning a pharmacy and a PBM.

The Cinderella stories of this session would include Mississippi and Alabama. Mississippi's bill passed the Senate, and is currently being discussed in the Conference committee to hopefully go back to the House floor for a vote. It has been truly inspiring to watch these independent pharmacies work together....

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"MUST SEE" PBM Reform Events This Week

This week, PUTT President Deborah Keaveny joins FTC Commissioners Alvaro Bedoya and Rebecca Slaughter at a healthcare roundtable sponsored by Fight Corporate Monopolies. Together with physicians, pharmacists, and patient advocates, they'll discuss actionable solutions to reform a system that has been overtaken by corporate interests - including PBMs - that undermines fair competition and patient care in favor of profits and shareholder dividends. Commissioners Bedoya and Slaughter recently made headlines for possible politically-motivated firings by the Trump Administration. [Register here](#) and join this critical conversation this evening at 8 pm ET.

Arkansas Lawmakers Attempting to Say No to PBM-Owned/Affiliated Pharmacies Operating in State

Arkansas HB 1150—set to be heard on Wednesday, April 2, at 10 AM in the House Insurance and Commerce Committee—could redefine parameters for the state's ability to rein in PBM conflicts of interest by disallowing PBM-owned/affiliated pharmacies from licensure to operate in-state. State-level reform like this could redefine the competitive landscape for pharmacies, including "tiered" and "preferred" networks, which is almost always code for "pharmacies owned by PBMs and therefore allowed to receive steered patients legally (or not)".

Your voice matters. Stand up for independent pharmacies, fair drug pricing, and patient choice by staying engaged and informed.

★ Learn more about this ongoing fight and how you can get involved:

- [Watch the Fight Corporate Monopolies Live Roundtable](#)
- [Support Rx Reform Now and sign the petition!](#)
- [Read insights on the Arkansas legislative battle](#)
- [Join PUTT to ensure your voice stays loud in the PBM reform fight!](#)

Together, we can challenge the corporate grip on healthcare and advocate for a fair and just healthcare system that puts patients first.

Digging Deep

The Shadow Groups Attempting to Stall PBM Reform



Whenever lawmakers begin discussing Pharmacy Benefit Manager (PBM) reform, a familiar pattern emerges: new advocacy groups, often with vague or positive-sounding names, suddenly appear to shape the debate. Groups like "Conservatives for Lower Health Care Costs" and "Arkansas Families for Affordable Healthcare" have recently entered the conversation, raising questions about their origins and affiliations. These organizations frequently oppose PBM reform efforts, arguing that such policies would lead to higher drug costs and disrupt market-based solutions.

One of the defining characteristics of these organizations is the lack of transparency surrounding their funding. While they claim to represent consumers or conservative values, their messaging often aligns closely with the interests of PBMs and major insurance companies. In most cases, these shadow groups do not publicly disclose their donors - making it difficult to determine who is really behind their advocacy efforts. However, their policy positions and media campaigns suggest significant backing from industry players seeking to maintain the status quo.

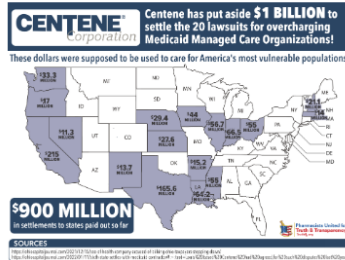
Beyond the emergence of these shadow groups, another pattern becomes evident: a wave of op-eds, social media posts, and influencer endorsements pushing the same talking points. This is no coincidence. Well-funded industry groups strategically invest in media campaigns to sway public opinion. Influencers, journalists, and policy experts are often compensated—directly or indirectly—to amplify anti-reform narratives across social and news media outlets. [Continue Reading](#)

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Connecting the Dots

Is Centene Still a Problem in Your State?



Following the startling revelation last week that [Centene-owned Superior HealthPlan had been involved in collecting sensitive personal information](#) on plan insured, journalists and state legislators, Texas Attorney General Ken Paxton took immediate action. Within hours [AG Paxton announced an investigation](#) into illegal spying and possible blackmail. Hours after that, news broke that Superior HealthPlan CEO Mark Sanders had been fired.

State attorneys general are among the most active when it comes to enforcing the laws PBMs like to flout, with the results to match (see Centene settlement map above). Don't put up with bad behavior from MCOs or PBMs - talk to your state attorney general. If you have questions or would like advice on building a case for your AG to investigate, we're here to help. [Contact us here](#) to schedule a time to talk with PUTT's Executive Director, a PUTT Board member, or a member of the PUTT network.

Data Tracking: Pharmacy Closures



PBM reform has bipartisan support at both the state and federal levels, but until it is broadly enacted pharmacies are continuing to be forced into closure, resulting in expanding 'pharmacy deserts' across the U.S.

To ensure you have data to present to your legislators, we've included news, report and tracking map links below. Need more information? Contact us at info@truthrx.org

Maps:

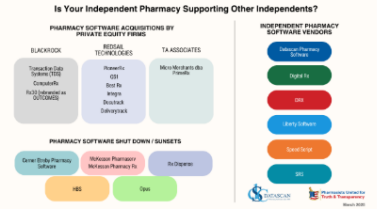
- [University of Pittsburgh: Mapping US Pharmacy Closures: 2014 - 2024 \(interactive\)](#)
- [Cencora US Pharmacy Deserts Map \(interactive\)](#)

Articles & Reports:

- [326 Pharmacies Have Closed Since Elon Musk Tanked PBM Reform](#) | American Economic Liberties Project (includes links to closure research)
- [Over 300 Pharmacy Closures Reported in the Last 3 Months](#) | Drug Topics
- [Ohio Pharmacy Closures Lead to Fears of Medicine Deserts, Especially in Rural Areas](#) | Ohio Capital Journal (includes timeline data)
- [The Powerful Companies Driving Local Drugstores Out of Business](#) | New York Times (includes map)
- [Independent Drugstore Closures Threaten to Turn Communities into Pharmacy Deserts](#) | CBS News
- [As Pharmacies Shutter, Some Western States, Black and Latino Communities are Left Behind](#) | Associated Press (includes interactive map)

Pharmacy Business

Is Your Pharmacy Software the Next to Shut Down?



It's happening again. Independent pharmacies across the country are receiving notices that their pharmacy software is being phased out. Could yours be next?

Take RX Dispense as an example. Recently, they informed clients they would no longer be supporting their software. Pharmacists scrambled to find replacements—a scenario that's becoming all too familiar due to the pharmacy software industry's growing consolidation. Major private equity firms like Blackrock and RedSail Technologies are behind many acquisitions, introducing higher prices and surprise fees, such as PioneerRx's "usage fee" of 8.6 cents per prescription, including cash transactions!

If your current software provider has already been acquired by a private equity firm, it's worth asking yourself one question: *Can you trust their longevity or affordability?*

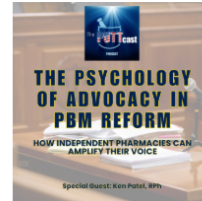
Don't Be Pressured Into Quick Decisions

When your pharmacy software vendor sells to a large firm and starts pushing you toward another product they own, consider it a warning sign... [Continue Reading](#)

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Listening In



At its core, PBM reform is not just a critical pharmacy issue - it's a patient care issue. Join us for this insightful episode as we explore how independent pharmacies can use psychology, AI, and community-building strategies to craft testimony, fight misleading PBM narratives, and create a united voice for reform.

[LISTEN NOW](#)



How can independent pharmacies tackle major challenges like reimbursement disparities, PBM legislative gaslighting, and advocating for fair policies in the healthcare industry? Join host Lord Dr. Jeremy, [Alabama Independent Pharmacy Alliance's](#) Trent McLemore, and the PUTT cocktail crew as they dive deep into the power of association and independent pharmacy unity and grassroots action as tools to amplify pharmacy and patient voices to get meaningful state legislation passed.

[LISTEN NOW](#)

Scan the QR to catch all episodes of PBM on the Rocks



Scan the QR to catch all episodes of the PUTTcast



PUTT is the only 501c3 nonprofit 100% dedicated to fighting against PBM anticompetitive business practices on behalf of pharmacies and their patients.

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