

# Increase Patient Access to **Lower-Cost Biosimilar** Medicines

The U.S. health care system has lost more than **\$2.2 billion in savings due to slow biosimilar adoption since 2015.**<sup>1</sup> This is a result of CMS payment policies that do not encourage use of lower-cost biosimilars. Three legislative proposals below would encourage biosimilar adoption and provide savings for patients and Medicare.

## Cosponsor the BIOSIM Act (H.R. 2815)

ENCOURAGE PHYSICIAN USE OF LOWER-COST BIOSIMILARS

- Currently, providers in Medicare Part B are reimbursed for administering biosimilars at ASP+6% of the brand-name biologic.
- The BIOSIM Act would increase reimbursement for biosimilars by 2% to ASP+8% and would apply only when the biosimilar's ASP is lower than the brand-name biologic's ASP.
- Currently, biosimilars have, on average, a 30% lower ASP than their respective reference biologic.<sup>2</sup>
- Introduced by Reps. Kurt Schrader (D-OR) and Adam Kinzinger (R-IL).



## Cosponsor Biosimilars Shared Savings Demo (S. 1427/H.R. 2869)

INCENTIVE FOR PHYSICIANS, LOWER COSTS FOR PATIENTS, AND SAVINGS FOR MEDICARE

- Directs CMS to establish a voluntary, national demonstration project under Medicare Part B to evaluate the benefit of providing a shared savings payment for biosimilars.
- Participating providers would receive a portion of the **savings for prescribing a biosimilar** with a lower ASP than the reference biologic.
- This program would create a financial incentive to administer biosimilars, guaranteeing savings for Medicare and taxpayers.
- Introduced in the Senate by Sens. John Cornyn (R-TX) and Michael Bennet (D-CO) and in the House by Rep. Tony Cardenas (D-CA).



## Cosponsor the Ensuring Access to Lower-Cost Medicines for Seniors Act (H.R. 2846)

ESTABLISHES A NEW SPECIALTY TIER FOR BIOSIMILARS.

- Ensures seniors are able to access and fully benefit from low-cost generics and biosimilars through the Medicare Part D program.
- H.R. 2846 would ensure new generics and biosimilars are covered upon launch, provide that generics are placed only on generic tiers with lower cost-sharing and not higher brand cost-sharing tiers, and establish a new specialty tier for biosimilars and specialty generics.
- The FDA has approved 29 biosimilars to date. However, only 20 are available to patients as new biosimilars become available in Medicare Part D in the next few years.
- Introduced by Reps. David McKinley (R-WV) and Ann Kuster (D-NH).



<sup>1</sup> <https://biosimilarscouncil.org/news/policy-and-market-failures-stifle-biosimilar-adoption-in-the-u-s/>

<sup>2</sup> IQVIA. October 2020. "Biosimilars in the United States 2020-2024"

Support of the three legislative proposals described above would be the most impactful in the short-term to the biosimilars market. [See how you can increase patient access to lower-cost biosimilar medicines at biosimilarscouncil.org.](https://biosimilarscouncil.org)