

## Open Meeting of the Federal Trade Commission

February 17, 2022

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**February 17, 2022**

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**Open Commission Meeting Public Submissions**  
**February 17, 2022**

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**Open Commission Meeting Public Submissions**  
**February 17, 2022**

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**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:42:30 PM

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Submitted on Monday, February 14, 2022 - 15:42

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Alanda

Last Name: Carter

Affiliation: Multilevel Marketing

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement: <https://youtu.be/LJRJtqm-KWQ>

Submit written comment:

My name is Alanda Carter and I run a Youtube channel called The Recovering Hunbot.

I am a former distributor for Beachbody. I quit after I realized most people I knew were not making money; they were losing it as was I.

In my videos I investigate MLMs and provide other MLM victims the opportunity to tell their stories and share their MLM experience.

I joined the multilevel marketing company after I was laid off and had gone through breast cancer. My neighbor told me she made 6 figures by working from home on her phone. I was led to believe that I would be able to replace the income I had previously as long as I never quit.

I was taught Beachbody's 4 vital behaviors:

Be proof the products work by doing the workouts and drinking shakeology

Invite others to join and become a coach

Recognize the achievements of my teammates and fellow coaches

Do personal development daily for at least one hour to develop the proper mindset

I was taught that by following the vital behaviors and recruiting others to become Beachbody coaches, I would have time freedom and financial freedom.

I believe it is crucial for the FTC to require all MLMs to provide complete and accurate information about the true earnings and losses of the distributors, including how many people drop out each year.

These disclosures should be provided to all prospective recruits at least one week before they have to pay anything or sign anything to join as a distributor.

I believe there are many other things wrong with MLM but requiring all such companies to provide accurate information about their supposed opportunity to

recruits before they join would be a first step in protecting consumers from economic, psychological, and social harm.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/139>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:05:21 PM

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Submitted on Monday, February 14, 2022 - 16:05

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Alex

Last Name: Anderson

Affiliation: Oswald's Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I run my family's 6th generation pharmacy. We've been serving our community since 1875. Because of PBM's we're often filling prescriptions at a loss just to take care of our customers. In an industry with margins as thin as pharmacy, to be filling prescriptions and losing money will continue to put hardworking community pharmacies like ours out of business.

I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are

also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Please open a case on these PBM's! I don't want to be the generation that has to close the doors on our community pharmacy.

Thank you,

Alex Anderson  
6th Generation Owner of Oswald's Pharmacy  
Naperville, Illinois

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/211>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 10:19:52 AM

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Submitted on Monday, February 14, 2022 - 10:19

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Andre

Last Name: Barlow

Affiliation: Coalition to Protect Patient Choice

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/23>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 4:48:01 PM

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Submitted on Friday, February 11, 2022 - 16:47

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Andrew

Last Name: Thomas

Affiliation: FB Thomas Drug Store

Full Email Address: [REDACTED]

Confirm Email [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Discuss PBM corruption

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/107>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 6:07:34 PM

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Submitted on Friday, February 11, 2022 - 18:07

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Benjamin

Last Name: Jolley

Affiliation: Pharmacist

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/135>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:37:47 PM

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Submitted on Monday, February 14, 2022 - 15:37

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Benjamin

Last Name: McNabb

Affiliation: Love Oak Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement: <https://www.youtube.com/watch?v=7qLIR29NXx0>

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/115>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 1:29:48 PM

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Submitted on Sunday, February 13, 2022 - 13:29

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Beth

Last Name: Waldron

Affiliation: Independent patient advocate

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

In November, I received a letter from my pharmacy benefit manager CVS Caremark informing me that the [REDACTED] medication I've been stable on for the past 8 years, [REDACTED], will no longer be covered and I need to change to another brand [REDACTED]. Nationwide, 150,000 stable patients at high-risk for cardiovascular events [REDACTED] were impacted by this change. CVS Caremark controls the prescription access for 1 in 3 Americans—nearly 110 million covered lives.

Clinical studies show [REDACTED] to have superior effectiveness and safety compared to [REDACTED]. [REDACTED] is taken by approximately 3 million Americans, including President Joe Biden.

The removal of [REDACTED] from formulary was seen as so dangerously disruptive that 16 cardiovascular nonprofits asked CVS Caremark to reverse their decision, including the American College of Cardiology and the American Society of Hematology. Still, CVS Caremark proceeded.

Patients are captive PBM consumers. We do not choose a pharmacy benefit manager—our insurance plan does when they sub-contract out that portion of our plan's management. Patients do not have the ability to change PBMs if we do not like their policies, service, or formulary. We have no recourse. The letter I received from CVS Caremark dropping my medication did not even include a phone number to call if I had questions nor did it mention there was an appeals process. Yet, PBMs have wide latitude over our lives by determining which drugs we can access, at what price, even having the power to switch our medications over the direct prescribing advice of our physicians.

These are the very conditions in which federal consumer protections are needed. I encourage the FTC to please get engaged and help protect consumers from PBM practices such as the non-medical switching I've just experienced.

[REDACTED] are the #1 class of drugs for adverse events. They require careful clinical management. I trust my doctor of 18 years to manage my [REDACTED] therapy, not an insurance PBM who is motivated by

non-transparent profit motives. That a corporation whom I did not contract with can essentially practice medicine without a license or my consent, and against the direct medical advice of my doctor has come as quite a shock. Its legality and the lack of consumer protections to prevent such patient harm is astonishing.

Thank you.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/15>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 10:15:22 AM

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Submitted on Friday, February 11, 2022 - 10:15

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: BOB

Last Name: THOMAS

Affiliation: concerned consumer

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement: ON

Submit written comment: MLMs should be required to post accurate earning's breakdowns (ie Income Disclosure Statements) which include the effects of \$0 earners and rep churn on those numbers. Furthermore, the sources of those earnings should be broken down by both revenue earned from product sales AND revenue earned from speaking fees and the sale of training/motivation materials. Currently, MLMs use headings such as "Cash Flow", "Income" or "Revenue", rather than "Commissions", on disclosures, This allows MLMs to mislead consumers, who are lead to assume the stated numbers are potential earnings from joining an "Opportunity" to sell the products, while in fact, include revenues generated from sources not available to 99.9% involved.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/47>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 4:07:59 PM

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Submitted on Friday, February 11, 2022 - 16:07

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Brad

Last Name: Ledbetter

Affiliation: PRN Pharmacies, LTD

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

Commission,

I own and operate five retail independent pharmacies in the rural area of Southern Illinois. Pharmacy Benefit Managers are wreaking havoc on patients, pharmacies, and taxpayers across this nation. PBMs are forcing our customers to move to their pharmacies, reimbursing us below our costs to acquire medications, forcing patients to take high cost brand name drugs because of back room rebate deals, pushing full costs of medications to the patient. The list could go on for days.

Just in 2021 alone we were charged over \$ [REDACTED] in DIR fees on the back end of our transactions for not reaching unachievable performance measures the PBMs set. If we were perfect we would have been charged roughly \$ [REDACTED]. The PBMs are driving myself and other independent pharmacies out of business for no other reason than to pad their own pockets on the backs of American seniors and taxpayers.

In what other industry is your competitor allowed to decide what you are paid for a service? That is exactly what is happening with CVS/Caremark. CVS owns every level of the pharmacy business. They write the plan design through Aetna, which they own, forcing those patients to go to CVS pharmacy or have no coverage at all. So CVS owns the insurance coverage, the pharmacy benefit manager of that coverage, and the pharmacy that is forced upon the patients in that coverage.

We are here to help the patients only and we can do that without these roadblocks at every corner and for the same cost.

I appreciate the commissions time to review and hope you see what is the real problem with medications in the US.

Best, Brad Ledbetter



The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/99>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 5:14:48 PM

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Submitted on Friday, February 11, 2022 - 17:14

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Brandon

Last Name: Cooper

Affiliation: West End Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Pharmacy Benefit Mangers (PBMs) have repeatedly operated in secrecy and with little to no oversight by the federal government. The FTC has had hearings and heard from pharmacists, including myself, in person for many years. Over 10 years ago I attended a meeting where countless evidence was supplied to show the anti-competitive nature of PBMs and how they were harming local pharmacies. Not only does this hurt small business community pharmacies, but it cuts out patient choice. We've had patients be negatively impacted by the abuses of PBMs and forced mandatory mail order for years. Patients have had to go without their needed medications and it has become too expensive for them to purchase all because of the monopolistic and anti-competitive practices of PBMs. The marketplace is broken and in Arkansas we've passed laws to hold PBMs accountable. Unfortunately, these laws don't apply to federal programs such as Medicare Part D & Tricare. PBMs have held back millions of dollars from local pharmacies through DIR fees and paying below cost on countless prescriptions.

If PBMs did their job and held down prices, wouldn't we be seeing lower prescription drug costs? Just the opposite has happened and PBMs have only added to the complexity of health care and have driven up prices to consumers and taxpayers for years. It's past time for the FTC to hold them accountable. Please investigate and put an end to PBM abuses.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/115>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:12:36 PM

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Submitted on Monday, February 14, 2022 - 16:12

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Brendan

Last Name: Webber

Affiliation: Jackson Street Drug

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Brendan Webber and we own three independent, retail pharmacies in rural Missouri. PBM practices are threatening to put us out of business. The take-it-or-leave-it contracts have become more onerous every year with lower reimbursements and higher claw backs. Our retroactive payments to PBM's doubled from 2020 to 2021. All of this is going on while we have been the backbone of the COVID response in our community providing vaccines and testing. If these PBM practices are allowed to continue and we are forced to close, it would continue the pattern of fewer and fewer healthcare providers in rural communities.

I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring

transparency to the PBMs' manipulative and market foreclosing practices. As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,  
Brendan Webber

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/239>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 10:13:30 AM

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Submitted on Friday, February 11, 2022 - 10:13

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Byron

Last Name: Berry

Affiliation: Pharmacy Plus, Inc.

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment: PBMs have gained an oligopoly in healthcare. PBMs are the driving force behind prescription price inflation. Pharmacies have no ability to negotiate with these mammoth companies. PBMs have operated in secrecy for years, hiding their corrupt business practices. PBMs cost consumers billions by inflating prices at point of sale and assessing DIR fees on Pharmacies to pad their pockets. PBMs are in direct competition with Pharmacies and are allowed to steer patients to their company owned providers. PBMs (our competitors) determine our reimbursement. This system needs dramatic changes.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/43>

**From:** [REDACTED]  
**To:** [OpenMeeting](#)  
**Subject:** MLMs  
**Date:** Monday, February 14, 2022 5:35:55 AM

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Hello there. Thank you for taking the time to read my story.

I joined Young Living to learn more about the healing properties of essential oils. In my search for knowledge to use in my practice with older adults and the mentally ill, I did a lot of research and attended a lot of classes left by aromatherapists. In these courses (not affiliated with YL) I learned that ingestion of essential oils is incredibly unsafe unless you're under the direction of a trained aromatherapists (which is hundreds of hours of training - not something YL encourages or offers).

As part of Young Living, I was added to a Facebook group led by higher ranking members in the YL pyramid. One woman was complaining about burning after ingestion of several different oils and was looking for guidance from others. I pointed out that ingestion is dangerous and can cause long term damage and was blocked and banned from commenting. This left a terrible taste in my mouth and I realized that education isn't the cornerstone of these companies. It's making money by whatever means they can. Misleading information and promises of making an extra income is how they prey on people. I was all ready to sell the oils and lost so much money because I had to meet the minimum PV to be "active".

Please do something about this predatory business model before more people lose money or worse.

Thank you,  
Camella Beale

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:25:37 PM

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Submitted on Monday, February 14, 2022 - 16:25

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Carl

Last Name: Hendricks

Affiliation: Pontiac Trail Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement: MI

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/255>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:51:22 PM

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Submitted on Monday, February 14, 2022 - 15:51

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Chandrasekhar

Last Name: Eadara

Affiliation: Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/167>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 4:10:06 PM

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Submitted on Friday, February 11, 2022 - 16:09

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Charley

Last Name: John

Affiliation: Industry

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/103>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 5:13:09 PM

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Submitted on Friday, February 11, 2022 - 17:12

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Chi

Last Name: Nguyen

Affiliation: Kim Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment: PBMs anticompetitive business practice

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/111>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 10:57:25 AM

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Submitted on Monday, February 14, 2022 - 10:57

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Chloe

Last Name: Beaudreault

Affiliation: Consumer

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment: I joined a multi-level marketing company called Monat in early Spring 2021 after COVID-related layoffs. I was told by the woman who recruited me that I could replace my previous income by working from my phone (and even said she would help me pick out the “paid for” Cadillac in 6 months) - to wash and style my hair with their products and post photos, and recruit in other people to do the same. I lost around \$300 while already unemployed believing this was just another sales job. I believe Monat’s director-level distributors need to be held accountable for displaying atypical income and lifestyles, so that nobody else joins under false premises and loses money in this company.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/31>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:05:39 PM

---

Submitted on Monday, February 14, 2022 - 16:05

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Christopher

Last Name: Finley

Affiliation: Auburn Pharmacy Owner (Auburn, AL)

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/215>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:07:09 PM

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Submitted on Monday, February 14, 2022 - 16:06

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Christopher

Last Name: Finley

Affiliation: Auburn Pharmacy Owner (Auburn, AL)

Full Email Address [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

To Whom it May Concern:

I am a 35 year old independent pharmacy owner from Auburn, AL. I am writing to express my concerns with the amount of influence PBMs have on the survival of independent pharmacies, as well as, the impact they have on patient health outcomes. Both of the for mentioned topics could have grave repercussions if we continue at the status quo. I see patients often that are upset by the lack of independence they get to choose their own pharmacy. PBMs create a anti-competitive market which have the right to completely exclude certain pharmacies for even opting into their plans. We are currently experiencing this with many of our Express Script patients. It leaves us no choice but to send them to a pharmacy that they do not want to be at. Competition in the market breeds better patient outcomes/experiences. The squeeze that has been put on all pharmacies by PBMs has led to understaffing, long wait times, medication errors, lack of proper counseling, and polypharmacy. All of these things can affect patient outcomes through medication adherence and improper medication regimens. Rejecting a patient's "right to choose" their own pharmacy is rejecting a patient's "right to choose" the outcomes of their own health. The anti-competitive practices that have led us to this point have resulted in the the most inefficient healthcare system in the world. We pay more for worse outcomes. I am asking that you help relieve the burden on independent pharmacies and allow us to compete on a level playing field with the chain pharmacies that have acquired these very PBMs. If given a fair competitive chance, I feel that patient outcomes would improve at both independent pharmacies and chain pharmacies, given that the better would "win-out". Thank you for your time and effort to hear out our grievances.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/219>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:05:11 PM

---

Submitted on Monday, February 14, 2022 - 16:04

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Christopher

Last Name: Schaffner

Affiliation: National Community Pharmacy Association

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

2/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter Commissioner Noah Phillips Commissioner

Christine Wilson

Federal Trade Commission 600 Pennsylvania Ave., N.W. Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am the owner of a small independent pharmacy in Washington state. We play a critical role in the health and well being of our community, but we are under grave threat from predatory PBM practices ranging from take-it-or-leave-it contracting to outrageous DIR fees. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to

specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,

Christopher Schaffner, Pharm.D.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/207>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:07:48 PM

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Submitted on Monday, February 14, 2022 - 16:07

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Christopher

Last Name: Watts

Affiliation: Valley Pharmacy, Inc

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am an Independent pharmacy owner in Kearney, NE. I have had over \$ [REDACTED] clawed back from pharmacy benefit managers in the last year. I also had an recoupment from Aetna from claims in 2020. It is hard to run a business and even harder when you have thousands of dollars taken back. I write to express my support

of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the

three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control

so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter

the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this

request to be vitally important because the PBMs will not allow me to send you claw back

information. PBMs have already been using veiled threats against pharmacies who have

submitted comments to CMS on its proposed rule. The FTC is our only hope to bring

transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen



drastically over the years.

These staggering increases in claw backs have created an uneven playing field for community

pharmacies like mine. They are also so loosely tied to performance metrics where I could be the

most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug

limitations placed on pharmacies like mine, patient steering to both retail and mail order

pharmacies owned by the big three PBMs (especially in the case of specialty drugs),

administrative fees and charges, negative reimbursements (where I'm paid less than what it costs

to acquire the drug from a wholesaler), PBM's control of access to the market through their

preferred networks, malicious use of, and associated costs of audits, discriminatory

reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it

results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of

the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I

hope this study will lead to such enforcement.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/227>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 9:57:10 AM

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Submitted on Monday, February 14, 2022 - 09:56

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Chrsi

Last Name: Duty

Affiliation: Prescriptions Corner Drug

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Pharmacy benefit managers have a business model that is not beneficial to patients. Look at the price of insulin that patients now have to pay. They get huge rebates from the manufacturer and say they pass the savings on, but how do we know this? They base there savings off of AWP pricing that they force pharmacies to utilize through complex pricing arrangements. These AWP prices are not even close to real world values. They can change their reimbursement when every they choose by price manipulation which is possible by working behind multiple curtains. There is no other business model like this in the world. Then consumer suffers and they make record profits every quarter. Every other business in the chain takes a smaller cut all in an effort to save money, but they never have to.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/19>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:37:42 PM

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Submitted on Monday, February 14, 2022 - 15:37

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Cindi

Last Name: Reed

Affiliation: Reed Pharmacies, LLC

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

I am the owner of two small retail pharmacies in rural Central Illinois. Since opening my first store in 2012, I have seen first hand changes in this industry that, in my opinion, would be violations of anti-trust laws. In many cases, previous investigations are very similar to the events unfolding in the pharmacy world.

Vertical mergers which include the pharmacy benefit manager, the retail community pharmacy, and the mail order pharmacy. The pharmacy benefit manager is in charge of writing the contracts for ALL pharmacies providing services to their members, however they do not have to provide each pharmacy with the same contract. This means that the pharmacy which the PBM owns, can be reimbursed at a higher rate for the same service, while also incentivizing with lower copays, 90 day supply options, and decreased out of pocket expenses for using their pharmacy. This sounds very similar to the case cited on [ftc.gov](http://ftc.gov) regarding the ethanol supplier merging with the gasoline supplier. Example: The FTC challenged the combination of an ethanol terminal operator and a gasoline refiner. Refiners need ethanol to create specially blended gasoline, and before the merger, an independent firm with no gasoline sales controlled access to the ethanol supply terminal. After the merger, the acquiring refiner could disadvantage its competitors in the gasoline market by restricting access to the ethanol terminal or raising the price of ethanol sold to them, which would reduce competition for sales of gasoline containing ethanol and raise prices to consumers. As part of a consent agreement, the FTC required the merged firm to create an informational firewall so there could be no preferential access or pricing for its refining affiliate. The Pharmacy Benefit Manager is controlling the supply of prescriptions to the patient by restricting access to their pharmacy of choice. In 2022, a Medicare Part D plan is charging the patient \$47 for a \$5 generic medication when filled at their local pharmacy, but will charged them \$0 copay at the PBM owned pharmacy. The cash price at my pharmacy is \$15, but if I do not send the claim to the insurance, my "Star Rating" and quality score will go down, which will in turn, increased my DIR fees.

Additionally, if we again look at the case of the ethanol/gasoline firm, the FTC required there to be an "informational firewall." Within the pharmacy industry, claims submitted to a pharmacy benefit manager, must be sent through a "switch" where they are validated for active coverage, the contract rules and copays are applied, and the pharmacy receives a paid claim. In order to do this, the pharmacy must submit pricing information for the drug being dispensed, our "Usual and Customary Price" and a slew of other information about the medication, the patient, and the doctor. If we are sending claims through the switch for payment, the pharmacy benefit manager is able to collect data on ALL of our transactions, thus giving them an unfair advantage for price negotiations, payments, reimbursements, and targeted marketing to patients. There is no "informational firewall" between a pharmacy and their competition.

Horizontal Mergers have also been happening across the market, which have resulted in 4 companies, CVS/Caremark, Express Scripts, Prime Therapeutics, and OptumRX controlling 90% of the pharmacy market. Effective April 1, 2020, Prime Therapeutics has turned over control of their claims processing to Express Scripts, meaning it is now 3 major companies controlling 90% of the market share for all prescription benefits. This is a two fold problem 1) Each of these companies has their own retail pharmacy and mail order pharmacy, which it gives preferential contracts to and 2) It eliminates competition in the insurance marketplace, because most commercial and Medicare insurance being sold falls under one of these groups. In another case found on [ftc.gov](http://ftc.gov), a proposed merger between Malibu Rum (8% marketshare) and Captain Morgan Rum (33% market share) was challenged because the merger would result in the firm controlling 41% of the market, and the next dominant firm would hold 51% of the rum market. Combined, these two companies would hold 92% of the market share for rum. According to [ftc.gov](http://ftc.gov), horizontal mergers and coordinated interaction "eliminates a competitor, and may change the competitive environment so that the remaining firms could or could more easily coordinate on price, output, capacity, or other dimension of competition" Pharmacy Benefit Managers have overrun the pharmaceutical market with horizontal mergers, equivalent to the liquor industry, with no limitations or oversight.

Should the pharmacy industry continue on its current course, and both horizontal and vertical mergers continue as they have, it will inevitably lead to a total loss of competition, due to continued pressure on small independent pharmacies, forcing them to close or sell to the chains, who, again, are owned by the PBM's. In February 2020, the FTC blocked a proposed merger of two hospital systems in Philadelphia County and Montgomery County, citing it would reduce competition, and decrease quality and service to the patients. My pharmacies cover approximately 4 counties in Central Illinois, with competition from chains and other independent groups. If the PBM's cannot be regulated under FTC guidelines, as applied in previous instances, the independent pharmacies will be eliminated and the 4 counties I serve will be served by 2 chain stores under the same group. There will be no competition and you can guarantee the quality of care for these patients will suffer.

It is imperative, for the future of health care in America, for the PBM's to be investigated and regulated. I have more information I would be willing to share, and would be open to hearing any feedback from the FTC regarding these issues.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/111>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 9:48:23 AM

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Submitted on Friday, February 11, 2022 - 09:48

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: David

Last Name: Bagot

Affiliation: IPhA

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/35>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:27:44 PM

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Submitted on Monday, February 14, 2022 - 16:27

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: David

Last Name: Bagot

Affiliation: Petersburg Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement: IL

Submit written comment:

Dear Commissioners,

I am hoping you will vote to issue orders calling for the study of how PBM business practices affect reimbursements to independent pharmacies as well as other issues in the prescription drug supply chain. I've outlined a few of the problems caused by the structure of the industry as it stands today.

The Prescription Drug market in this country is an oligopoly, too few companies have an outsized impact on the industry. There is not enough competition for this market to be subject to free market principles. Given the USA has the highest prescription drug prices in the world, I am glad to see the FTC is skeptical of the PBMs claim that keeping their business practices opaque is essential to them keeping drug prices low. Obviously quite the opposite is true.

I would also like to point out, as a pharmacy owner, I am being reimbursed at a rate determined by my competition. That competitor also determines what the customer pays at my store and theirs. I'm guessing you already know they make the customer pay less if they get their prescriptions at their store.

This is a result of vertical integration of PBMs and drug stores.

One of the largest problems in the PBM industry is their process for determining which brand-named medications are covered by insurance.

Pharmaceutical companies cost to bring a drug to market are so high because they must pay a PBM for the drug to be covered by insurance. These financial transactions between drug companies and PBMs are called different things:

Rebate, Fees, price concessions, and who knows what other names. In all other industries in the country such practices are illegal and constitute extortion, they should be viewed the same in this industry if we hope to ever see prices come down through a free market.

Finally, I want to point out that through vertical integration of pharmacy, PBM, and Insurance company, competition and fairness in the market is non-existent. These companies must be broken up if we ever hope to reduce drug prices and mitigate the harm being done to: patients, payers, and pharmacies by these business practices.

Please vote to undertake a comprehensive study to the PBM industry's business practices!

Thank you,  
David Bagot R.Ph.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/263>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 2:53:53 PM

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Submitted on Friday, February 11, 2022 - 14:53

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: david

Last Name: balto

Affiliation: Law Offices of David Balto

Full Email Address: [REDACTED]

Confirm Email [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/87>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 10:41:51 AM

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Submitted on Friday, February 11, 2022 - 10:41

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: David

Last Name: Falk

Affiliation: Independent pharmacy owner

Full Email Address [REDACTED]

Confirm Email [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

I own several small, independent pharmacies in rural Illinois, over the last 8-10 years, Pharmacy benefit managers, PBM's, have stripped our patients of their choice of pharmacy by closing the network, steering the patient to their own mail order pharmacy and not giving the patient the right to choose their own pharmacy/pharmacist. The patient is not given a choice of where to get their prescriptions filled or the pharmacist they choose to have a relationship with. Every patient should have a choice what pharmacy/pharmacist they choose to utilize. Even when the patient IS given a choice of pharmacy to use, the pbm, after seeing a prescription filled for the patient via the billing process to the pbm, the pbm sends the patient a letter stating that the patient can save \$X if they had their prescription filled via the pbm owned mail order pharmacy. This is the pbm's effort to steer the patient to their own pharmacy.

Again, a total unfair business practice. PBM's, on a regular basis deny a drug specified by a physician because it isn't on their "formulary" list. This is nothing more than the drug that maximizes the rebate paid to the pbm by the drug manufacturer. In almost every case there is an equivalent generic available to the patient for far less cost than the expensive brand drug the pbm has on their "formulary". This forces alot of patients to not take the drug prescribed due to their copay being so high. This is complete interference with the Physician and patient of what the physician has prescribed, a HUGE overstep by pbms. The pharmacist should be able to discuss this with the patient, however the pbm contract prevents the pharmacist discussing lesser expensive alternatives for the patient. Again, a profiteering source for the PBM. The US is the ONLY Country in the world that utilizes PBM's, yet the US has the highest drug costs to the patient in the WORLD. This is not a coincidence. PBM's push manufacturers to raise their prices to increase the rebate paid back to the pbm, just to get that manufacturers drug on the "formulary" list. If the mfg pushes back, they lose the "formulary" status, thus lose market share. The pbm, squeezes the manufacturer, under pays the retail pharmacy, and forces the patient to switch to their own mail order pharmacies, another unfair business practice. PBM's conduct "audits" of prescriptions filled by a retail pharmacy. In 99%

of the audits we've seen, there are NEVER prescriptions that have a cost of \$10 or \$20, these audits always consist of drugs \$400, \$500 and up in cost. This is a total money grab by the pbms. If a prescription is filled incorrectly, I understand the purpose of the audit, however we have seen audit recoupments because the name of the pharmacist that accepted a transfer from another pharmacy wasn't listed on the back of the transferred prescription. (not required by any law except by the pbm) the pbm then recoups the entire cost paid to the pharmacy and any subsequent refills. Usually mounting to thousands of dollars recouped from the pharmacy and yes, straight to the profits of the pbm, and the patient never knows about the audit, or does the patient receive any portion of their copay back on audited and recouped prescriptions.

I thank the efforts of the FTC to peeling back the onion of PBM over reach, unfair business practices and profiteering over patient care.

David

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/51>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 8:54:30 AM

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Submitted on Sunday, February 13, 2022 - 08:54

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: David

Last Name: Wu

Affiliation: Independent Pharmacies

Full Email Address [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Stop DIR Fee from PBMs is a must. Stop unfair under cost reimbursement from PBMs like Express Scripts TRICARE, CVS Caremark, Optus Rx. Stop predatory PBM audits for only Expensive Brand Meds that they correct as profit after a year.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/3>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 9:23:18 PM

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Submitted on Sunday, February 13, 2022 - 21:23

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Diana

Last Name: Poliuk

Affiliation: Monat

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment: I was a student in graduate school when I was recruited to work for an MLM selling hair care products. A bunch of people I knew signed up to work for the company and we're advertising being able to work from home and make a living. I spent the money for a startup package. I ended up getting one person to buy shampoo. Their process of getting your payment is ridiculously confusing and somehow the routing/account numbers were incorrect so they charged me money. So the money I made from that sale was never received as they also charged a monthly fee for keeping my money there? I then decided that this company did not have my best interest at heart. I was told I could return the products at any time, even used and get a full refund by multiple market partners (including the girl who recruited me). I also spoke with customer service and they assured me of this. I then spent \$50 for shipping. Monday d me they could not refund me because it was used. Even though I made sure multiple times it was ok and they told me I could still get a full refund! So I was out \$350 at the end of the day which was huge money for me being a student making 600\$ a month paying for all my bills and being newly married living on our own making way below the poverty line. I was incredibly misled and manipulated by the company, market partners, and representatives.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/35>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 1:51:25 PM

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Submitted on Monday, February 14, 2022 - 13:51

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Donald

Last Name: Hedden

Affiliation: McCoy Tygart Drug Store

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment: I have a pharmacy in a rural county In Arkansas with our pharmacy & Walmart as pharmacies. We are reimbursed less per prescription now than we were in 1975. It is not a model we can sustain and remain in business for much longer. If PBM reform doesn't happen, we won't be in business.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/47>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:38:48 PM

---

Submitted on Monday, February 14, 2022 - 15:38

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: DYLAN

Last Name: LAUBSCHER

Affiliation: PHARMACIST

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment: DIR and associated fees and practices are the major reason behind pharmacies struggling to survive. Poor reimbursements and "illegal" practices like DIR fees result in negative pharmacy reimbursements.

We pharmacists are not given any say, and have to accept these poor contracts in order to accept insurance processing, hoping to break even. This cannot go on any longer and these practices must surely be illegal and contrary to FTC ideals. Thank you for your assistance.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/123>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 1:25:57 PM

---

Submitted on Friday, February 11, 2022 - 13:25

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Earl L. "Buddy"

Last Name: Carter

Affiliation: U.S. Congress

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/79>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 11:15:27 AM

---

Submitted on Sunday, February 13, 2022 - 11:15

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Ed Pat

Last Name: Wright

Affiliation: Hickory Hill Pharmacy

Full Email Address [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement: AR

Submit written comment:

I have owned an independent pharmacy in Helena, AR since 1994. Can you imagine operating a business and not knowing if you made a profit at the time of the sale. Can you imagine operating a business in a time where the cost of doing business has never been so high and you have no control over the selling price for 90% of your sales. Can you imagine operating a business where your customers are being told they have to switch to the PBM's mail order pharmacy?

This is how we are having to operate or pharmacies. The PBM's have full control of formularies, reimbursement and delivery of pharmaceuticals.

I do not see this getting any better unless CMS/Congress acts now.

On the formulary issue: All day long we are forced to fill a prescription for a high priced brand name medication when there is a lower cost generic available. There is no reason for this except the PBM's are getting a huge rebate to prefer the brand name medication.

On the Reimbursement: The drug distribution has been affected recently and we are having to pay more for product because our preferred manufacturer may not be available, but we are being reimbursed based on the cheapest product on the market. Many times this cheapest product is not available. DIR Fees continue to make it so difficult to operate the pharmacy. We have no way of knowing when we sell a prescription if we made money or if we are going to see the PBM take the entire profit or more away from us 6 months later. At minimum we need to have this reflected at the time of the sale. In my opinion if the DIR Fees continue you are going to see pharmacist refuse to fill Medicare Part D prescriptions. In my small independent pharmacy in rural Arkansas I had over \$[REDACTED] taken out in DIR Fees in 2021. What kind of an impact I could make in my community with \$[REDACTED].

On the mail order pharmacy issue: I understand that for some patients mail order is a good option. We are seeing PBM mail order pharmacies transfer prescriptions without patient authorization or being tricked into switching to their own pharmacy. The PBM's have an unfair advantage because they know what the patient is paying with us and they can undercut our price, because the PBM knows they will just charge the payor(CMS) more.

Please don't hesitate to call if this is not clear.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/7>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 5:23:25 PM

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Submitted on Sunday, February 13, 2022 - 17:23

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Elizabeth

Last Name: Walker

Affiliation: This

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement: This

Submit written comment: Thanks x

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/19>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 11:53:46 AM

---

Submitted on Monday, February 14, 2022 - 11:53

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Eric

Last Name: Bandy

Affiliation: Bandy's Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment: I would like to encourage the FTC to investigate Prescription Benefit Managers (PBMs) and their practices. The large three PBMs dominate the prescription industry and drive the cost of prescriptions up for consumers. They also are running the small pharmacies out of business and pushing patients towards their own pharmacies. There needs to be regulation on the companies to protect the consumers and the small business community.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/35>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 9:14:15 PM

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Submitted on Friday, February 11, 2022 - 21:14

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Eric

Last Name: Black

Affiliation: Self employed Pharmacist

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement: IL

Submit written comment: As an independent pharmacist serving rural southern Illinois I am very concerned with a few issues revolving around PBM practices. Firstly, the recent major mergers within the PBM industry, especially Caremark/CVS has allowed a situation to occur whereby the Caremark PBM is able to, in multiple ways, direct business to my competitor CVS and in the process enact policies that disadvantage independent pharmacies causing many to have no other choice but to close or sell out to the same competitor. Secondly, a major concern revolves around "take it or leave it" contracts that are the industry norm. Pharmacies have no ability to negotiate what are often reimbursements that are at or below net product costs. It's important to have a robust nationwide network of pharmacies and this should include more than just big box stores. To do so reimbursement rates must cover basic expenses and a process whereby below cost reimbursements can be quickly addressed. Independent community pharmacies serve thousands of rural and urban communities and do so with a level of service and accessibility that will become more important in the near future, not less so. Lastly, DIR fees have become over the last decade or so a major new revenue source for PBM's on the Part D side of things. The problem is that this revenue has come directly from community pharmacy's bottom line and often hurts the patient in the process by causing higher than necessary copays and/or causing patients to enter the coverage gap faster than they would have without DIR fees. DIR fees are retroactive and often not knowable at the point of sale. What other business operates not knowing what it will eventually be paid for a product or service?! Pharmacy does and has for at least a decade now with no end in sight. All we ask is that we know what we will be paid at the point of sale and that the reimbursement is commensurate with the personal one on one service and professional consultations taking place every day in my pharmacy and thousands just like it. Thanks for your consideration

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/147>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:47:15 PM

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Submitted on Monday, February 14, 2022 - 15:47

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Eric

Last Name: Hamik

Affiliation: NCPA / Pharmacy owner

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

I own an independent community pharmacy and activities of the PBM's are targeted to put me out of business. I think 3 PBM's own 80 percent of the market.

1. The contracts they offer me are reimbursed at a much lower rate than they offer other chain pharmacies.
2. They send letters to my customers (that come to my pharmacy) and inform them they cannot come here anymore, they have to go to their affiliate pharmacy (CVS or Walgreens). They are taking over with their vertical monopolies owning the insurance company, PBM and pharmacy even though it would cost the same or less at my pharmacy.
3. They use spread pricing often paying they pharmacies pennies and then they bill the plan sponsor much more. Often \$100s of dollars more on a single prescription.
4. They often require the use of much higher priced brand name drugs so they can pocket the rebate money. This amount is often \$50 to \$200 per prescription!
5. We are the only country in the world that utilizes the PBM model and we have the highest drug prices.

These are all facts that can be proven with a simple audit.

Thank you for your time.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/151>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 9:56:45 AM

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Submitted on Friday, February 11, 2022 - 09:56

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Esmee

Last Name: Smith

Affiliation: Truth in Advertising, Inc.

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: Yes

Link to web video statement: CT

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/39>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:56:42 PM

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Submitted on Monday, February 14, 2022 - 15:56

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Evans

Last Name: Glasgow

Affiliation: Thrift-Town Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

February 14, 2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

My name is Evans Ray Glasgow, Jr and I own Thrift-Town Pharmacy in Amite, Louisiana. I am writing to ask for your help. Pharmacy Benefit Mangers (PBMs) are for the most part unregulated and are forcing contracts on us that are non-viable. We fill prescriptions everyday at a loss due to the take it or leave it contracts we are offered. These contracts are based on unattainable performance metrics that lead to them being able to take back huge amounts of money from us months later. What they are doing to independent pharmacies across the country should be illegal because it is the same as stealing. Even if we achieve the best we can achieve in our metrics they still take back around 8 to 12% of the ingredient cost!

I am writing to show my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this



request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement

Sincerely,

Evans Ray Glasgow, Jr.  
Thrift-Town HealthMart Pharmacy



The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/179>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:02:36 PM

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Submitted on Monday, February 14, 2022 - 16:02

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Gary

Last Name: Daley

Affiliation: Randol Mill Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

February 22, 2022

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Gary Daley, RPh. I own and operate Randol Mill Pharmacy in Arlington, TX. I can site multiple incidents of egregious and unfair practices by more than one PBM. One recent example was during an audit of our prescription claims was when one of the big 4 PBMs made every effort possible to charge us back for some cancer drugs we provided to a patient over a many month time period. The prescription was 100% legal and correct in every manner, however the PBM tried to take back all the funds they had previously paid us for this patient's cancer medications, based on an invalid technicality. It was several thousand dollars. I spent many hours over several months arguing our case and finally got them to concede. But, in the meantime I was taken away from the more important responsibilities of patient care. This is but one small sample of the issues we deal with at the hands of the PBM bullies on a regular basis.

In addition to this issue I want to write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are

also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,  
Gary Daley, RPh  
President  
KVG Enterprises, Inc.  
dba Randol Mill Pharmacy  
[REDACTED]

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/191>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:37:01 PM

---

Submitted on Monday, February 14, 2022 - 15:36

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: George

Last Name: McAlanis

Affiliation: Millersburg Pharmacy, Inc

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement: PA

Submit written comment:

Dear FTC,

I am George McAlanis, a pharmacist that owns 2 stores. PBM contracts are take it or leave it, with no options. The drugs are discounted with sometimes no professional fee. Some PBMs steal back money 6 months after the claim has been processed. I can show you claims that end up having us loose \$60, \$80, or more than the medicine costs us to buy. We are being put out of business. We cannot hang on much longer. No other profession has to be in our senario that gives us negative return for our effort. Please help to expose and correct the way PBMs get rich and we are going out of business. I think this is their plan. Thank you.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/103>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:17:01 PM

---

Submitted on Monday, February 14, 2022 - 16:16

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: George

Last Name: Warren

Affiliation: Bay Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

PBM abuse should be studied to provide the proof on how this industry has evolved over time. I am an independent pharmacy owner with three pharmacies located in Central Florida. I have been a pharmacy owner for over 40 years. I have seen the evolution of the growing PBM abuse. What started as a system for centralizing how payers could more efficiently pay pharmacy providers has morphed into PBM owned pharmacies that use PBM data to steer patients into their own pharmacies. We need to know about DIR inflation, manufacturer rebates (pay to play), transaction fees and unfair audit practices. There needs to be a level playing field for small business independent pharmacies. We need to ask about quality service. I have a key to each of our pharmacies. Patients can call me anytime for help after hours. If you need it delivered today (not 3 weeks-Mail Order), our delivery driver will bring it to you.

Thank you for taking a look into this industry. Just to see that the top three PBMs are in Fortune 500 top 10 should alert you to a possible system of greed and corruption.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/243>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 12:31:17 PM

---

Submitted on Monday, February 14, 2022 - 12:31

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Greg

Last Name: Reybold

Affiliation: American Pharmacy Cooperative, Inc.

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/43>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Thursday, February 10, 2022 10:32:27 PM

---

Submitted on Thursday, February 10, 2022 - 22:32

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: HEIDI

Last Name: SECREAST

Affiliation: Citizen

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/23>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:10:49 PM

---

Submitted on Monday, February 14, 2022 - 16:10

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Hemang

Last Name: Patel

Affiliation: Hamilton Discount Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Hemang Patel, Owner of Hamilton Discount Pharmacy. I had this pharmacy since 2011. Since we opened pharmacy every year, PBM contracts goes worse year by year. It is hard for independent pharmacies to survive. We don't have control over contract or anything. Whatever price they pays us for medication and dispensing fee, we have to take it. Most of the medication claims goes into negative reimbursement, when we call them and send them our invoice prices still they don't change reimbursement. To serve our community and patient we take those loses but at end of day we have to pay bills too. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring



transparency to the PBMs' manipulative and market foreclosing practices. As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement. Thank you,  
Hemang Patel

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/231>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 6:05:54 PM

---

Submitted on Friday, February 11, 2022 - 18:05

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Hina

Last Name: Patel

Affiliation: McMinnville Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: Yes

Link to web video statement: TN

Submit written comment: I'm a young and new pharmacist. It is absolutely wrong what PBM is doing. Please help us protect our patients and my profession. It effects all of us end of the day. We are all patients and tax payers. We need to solve this pmbs. We can't let them make money off of us.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/131>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:38:16 PM

---

Submitted on Monday, February 14, 2022 - 15:38

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Jacob

Last Name: Mouchet

Affiliation: Independent Pharmacy Owner

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Jacob Mouchet, an independent pharmacy owner in West Georgia. I have been in the independent pharmacy world for over 15 years know owners that have been in business for 30-40 years. From my own experience and speaking to them, margins are the thinnest they have ever been. This can be attributed to PBMs and their predatory practices. If they aren't steering our patients to CVS, Walmart, or mail order by offering lower copays, then they are taking away profit in the form of DIR, GER, and BER. They claim these fees trickle down to the patient but that is blatantly false. It's hard to stay in business and serve my small community when the middlemen (PBMs) take away any profits I have. I enjoy being a small town pharmacy owner and being able to help my community but I can't do that if I lose money on the prescriptions I fill. On most prescriptions I fill the PBMs make more money on it than I do. There is no rhyme or reason. They take what they want, how they want, when they want. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices. As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement. Thank you,

Jacob Mouchet

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/119>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:04:08 PM

---

Submitted on Monday, February 14, 2022 - 16:03

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Jacquie

Last Name: Fitzgerald

Affiliation: CR Care Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: FTC Operations

Register to speak during meeting: No

Link to web video statement: IA

Submit written comment:

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission  
600 Pennsylvania Ave., N.W.  
Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Jacquie Fitzgerald, PharmD, a community pharmacist and independent pharmacy owner. Our pharmacy cares for community members with serious mental health issues that coincide with multiple medical issues. These patients need our support in this community. Mail order pharmacies pushed by the PBMs cannot take care of these patients and keep them in their homes and group homes as we can. They need direct patient care by our pharmacists. The continuously increasing DIR clawbacks from PBMS on our community pharmacies are making it difficult for us to stay open and support these patients. The cost of institutionalizing these patients would be exponentially greater than keeping them here in our community. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling. I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have

submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices. As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement. Thank you,

Jacquie Fitzgerald, PharmD  
CR Care Pharmacy

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/203>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:12:08 PM

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Submitted on Monday, February 14, 2022 - 16:11

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Jaime

Last Name: Barrera

Affiliation: Richard's Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission  
600 Pennsylvania Ave., N.W.  
Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Jaime X Barrera, Pharmacist and Owner of four Richard's Pharmacy in South Texas. I was in shock when I saw that our stores have to pay over \$[REDACTED] in DIR Fees for 2021. These horrible fees are bleeding us to death. If we don't stop this hemorrhage, we will be forced to close our doors down. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices. As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community

pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,

Jaime X Barrera PharmD, Rph  
Richard's Pharmacy

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/235>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 10:34:30 AM

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Submitted on Monday, February 14, 2022 - 10:34

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: JAMES

Last Name: BETHEA

Affiliation: COKER-HAMPTON DRUG CO

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment: I have owned the local drug store in my hometown for almost 30 years. I find great satisfaction in providing access to healthcare to the people of my community. I think the value of pharmacy has never been more evident than now... In the wake of the covid-19 pandemic. PBM reform is a very deep subject. PBM's egregious behavior over my career has gotten worse every year. We are at the point... That if something is not done... Millions of people will lose access to healthcare. I am not sure how much longer i can hold on. This business has been her for almost 100 years. It saddens me to think that it could all end soon. This is america. We should be able to compete on a level playing field.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/27>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 5:26:34 PM

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Submitted on Sunday, February 13, 2022 - 17:26

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Jamie

Last Name: Smith

Affiliation: former MLM distributor

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

I joined a multilevel marketing company during a very vulnerable time in my life. I was experiencing financial instability, post partum depression and complex grief after my father died. My neighbor pitched the opportunity, stating that our local upline earned 15K/mo, and wouldn't I like to make that much? I entered into the 'builder' agreement without doing my own due diligence, blindly trusting a friend, and not understanding the nature of MLM whatsoever. As I learned the systems, which relied heavily on building a team and a structure to earn bonuses (ie. recruiting) I was led to believe that if I was consistent and didn't quit, success was inevitable. I became a product of the product, aka 'consumer investor' and taught classes, held events, and attended upline sponsored events, trainings, wellness summits (with many, many illegal health claims taught), and attended conferences. I took a loss on my taxes for four consecutive years. I was taught to focus on my mindset and I could 'attract' builders, while focusing on product education. I was sold the idea that I could achieve time freedom, retire my husband, and have the lifestyle I wanted through the 'vehicle' of my MLM. I never saw an income disclosure statement, only the compensation plan.

I believe it is crucial for the FTC to require all MLMs to provide complete and accurate information about the true earnings and losses of the distributors, including how many people drop out each year.

These disclosures should be provided to all prospective recruits at least one week before they have to pay anything or sign anything to join as a distributor, with a mandatory waiting period.

I believe there are many other things wrong with MLM but requiring all such companies to provide accurate information about their supposed opportunity to recruits before they join would be a first step in protecting consumers from economic, psychological, and social harm.

Thank you for your consideration in updating the opportunity rule to include MLM.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/23>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 5:21:50 PM

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Submitted on Friday, February 11, 2022 - 17:21

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Janet

Last Name: Thames

Affiliation: Blythewood Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement: SC

Submit written comment: I am the owner of a 40 year community pharmacy that serves four generations of families. The anti-competitive practices of PBMS and the vertical integration and mergers should be seen as anti-competitive and illegal. PBM practices should be regulated and mergers and vertical integration should not be allowed. Please review the number of independent pharmacies that have been forced out of business and those us of surviving are subject to hundreds of thousands of dollars in made up fees that are "taken back" from us six months after they were paid to us. Please stop this PBM abuse.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/119>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 9:40:28 AM

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Submitted on Monday, February 14, 2022 - 09:40

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Jean

Last Name: Moore

Affiliation: Condo Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Incredibly excited about the FTC investigating the impact of the PBM industry. Their practices are detrimental to patients, to pharmacists, to other healthcare providers, and to taxpayers in every state.

From spread pricing, to repackaging, to formulary manipulation, to restricted

distribution channels, to patient steering, to anticompetitive business practices, these entities engage in profiteering that would make a loan shark blush. Pharmacists are afraid to speak out and have their contracts terminated, employers are afraid to be sued, and states throughout the country struggle to mitigate the harm done to their Medicaid programs. Thank you for shining a light in the black hole that allows these parasites to exist, they have been unchecked and unregulated for far too long.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/7>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 1:18:20 PM

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Submitted on Saturday, February 12, 2022 - 13:18

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Jeanie

Last Name: Horton

Affiliation: Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: FTC Operations

Register to speak during meeting: No

Link to web video statement: Arkansas

Submit written comment: I am an independent pharmacist working very hard every single day to take care of each one of my patients equally and keep my doors open to them. I lose money or profit very little on the majority of generic prescriptions that I fill. My education provides for me to look at each prescription and each patient thoroughly. I not only fill the prescription, I also look to be sure that the patient can handle the drug prescribed, make sure that it will not interact with anything they are currently taking or any disease state that they are currently battling. I also spend time counseling my patient to be sure that they are informed about their medication. I thoroughly check to be sure that the prescription is accurately filled and help to execute the purchase. It is absolutely an insult to the education that I am provided by my degree to be under reimbursed by any PBM for a prescription. When reimbursement is less than cost on a prescription, that means that I did not profit enough off that one prescription to cover the cost of the drug only. That means that my time to check the drug profile, print a label, count the prescription, put it in a bottle with a lid on it, put a label on it, counsel the patient, do a point of sale transaction, get a signature for pickup, print a receipt and send my patient away feeling like I did all that I was to do to take care of that patient ... that is all on me, for free, no reimbursement for any of that. It is wrong, totally, 100% wrong. How can we be expected to continue like this? This is only one tiny example of what we have been experiencing the last several years in our business. Please, I beg you, help us to resolve the pharmacy abuse from the PBM's.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/35>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:56:07 PM

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Submitted on Monday, February 14, 2022 - 15:55

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Jeff

Last Name: Anderson

Affiliation: Anderson Drugs

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement: Tennessee

Submit written comment:

February 14, 2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Jeff Anderson, owner of Anderson Drugs in Etowah Tennessee. The PBM's are literally trying to force me out of business. Currently I am locked out of every major employer contract in my county (McMinn). These employees are being forced to go to Walgreens or mail order by the PBM. If I am allowed in the network by the PBM, then I am met with claw backs in the form of DIR fees or audits that cause me to 40 to 80 man hours just to prepare for.

I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices. As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field

for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,  
Jeff Anderson

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/175>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:47:45 PM

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Submitted on Monday, February 14, 2022 - 15:47

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Jesica

Last Name: Mills

Affiliation: Owensboro Family Pharmacy and Wellness

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement: KY

Submit written comment:

2-14-2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission  
600 Pennsylvania Ave., N.W.  
Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Dr. Jesica Thomason Mills at Owensboro Family Pharmacy. I am a 2nd generation pharmacy owner, and I have been in Pharmacy my entire life. My parents owned an independent pharmacy, and I was lucky enough to purchase it from them and operate my own pharmacy. When Outcomes based repayment was being discussed, that was when I heard about DIR fees. I understand using positive and negative reimbursements to reward those providers who are able to educate their patients and can ensure that patients are on the proper medication regimens. However, these DIR fees that were initially tied to performance of metrics set without our discretion, have increased by over 91,500% in the last few years. You can't opt out of these contracts, and the amount in DIR/GER/BER fees we had taken from our pharmacy was over \$[REDACTED] in 2021. We are not able to make a profit. I have lost hundreds of thousands of dollars due to these unethical fees. None of the fees they steal from our pharmacy are given back to the patients or the payers, they just are used for higher profits for the PBMs. We have tried to meet the metrics they ask for us to accomplish, unfortunately I am unable to drive to each patients house at least daily and force them to take their medications. When patients die, go to a rehab facility, or are hospitalized where they are receiving medications from the facility, we are penalized since it looks like they are not adherent to their medicines. We were at 5 stars for all metrics, and still had the maximum amount of fees taken out. The fees went from 5-10% of sales to over 59% for some plans. This level of stealing from pharmacies and

facilities is not sustainable. MACRA and MIPS are the measures for medical providers, and if they perform in a certain high range, they are eligible for bonus payments. We are not afforded that luxury, we are just penalized to a lesser extent, which is still unsustainable. PBMs see no patients, provide no services, control healthcare spend, are directly responsible for the high cost of prescription medications, and are legally stealing hundreds of millions from states, the federal government, pharmacies, and patients.

I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling. I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices. As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,

Dr. Jesica Thomason Mills, PharmD, MBA, RPh, ND  
Owensboro Family Pharmacy

[REDACTED]

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/159>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 7:15:15 PM

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Submitted on Saturday, February 12, 2022 - 19:15

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Jitesh

Last Name: Zala

Affiliation: PHARMACY

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment: I am writing to encourage the FTC to look into the monopolistic practices of PBMs. As it currently stands, PBMs have a wide market share on the prescription drug market. Combine that with having in-house insurances companies which give out plans to a vast majority of the American tax-paying citizens and you have a recipe that breeds greed and waste. That is exactly what is happening right now, and in the process independent pharmacies which are located in many rural areas and metropolitan areas. Many of these independent pharmacies are capable of providing services that are special and niche specific. However, they are finding it harder and harder to survive financially because these PBMs control how much each pharmacy gets reimbursed. Often times, these PBMs who have their own in-house pharmacies often known as mail-order pharmacies or specialty pharmacies are reimbursed higher than a small independent pharmacy. How this has been allowed is simply egregious and needs to be addressed. On top of lower reimbursement paid, independent pharmacies are often saddled with numerous different types of fees including DIR fees. DIR feeds have been unregulated for years, and the conditions that these PBMs place on pharmacies to reduce their DIR fees have lead to these fees growing exponentially. Low reimbursement and high accessory fees have lead to a climate which has made it difficult for independent pharmacies to survive. I highly encourage the FTC to look into the widely abused practices of PBMs and help to foster an environment that protects the American tax payer and reduces the anti-competitive business culture.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/59>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 12:50:43 PM

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Submitted on Sunday, February 13, 2022 - 12:50

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Joe

Last Name: Hall

Affiliation: Independent pharmacy owner and pharmacist

Full Email Address [REDACTED]

Confirm Email [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

My comment is in regards to 6(b) Study on Pharmacy Benefit Managers' (PBMs)

Relationship with Affiliated and Independent Pharmacies: The Commission will vote on whether to issue Orders to large pharmacy benefits managers to study the competitive impact of contractual provisions, reimbursement adjustments, and other practices affecting drug prices, including those practices that may disadvantage independent or specialty pharmacies.

I have been a pharmacist for 14 years. During this time I have worked in an independent pharmacy and I currently own and operate my own independent pharmacy. PBMs have used their control of the reimbursement structure to creat gigantic profits for their own pharmacies and shareholders while at the same time eliminating as much independent pharmacy competition as well as creating a problem with patients having access to care.

PBMs provide no patient care, have no patient interaction and yet then and their own pharmacies (CVS Caremark/CVS Pharmacy, express scripts/express scripts mail order pharmacies) reap massive profits.

PBMs have been found to engage in illegal and harmful practices that they should be held accountable for. Numerous states (Kentucky, Ohio and Arkansas for example) have found that after they contracted with CVS to provide their state Medicaid prescription drug benefits that CVS engaged in a practice known as spread pricing. Through this practice they were found to be removing over \$100 million dollars annually from the state taxpayer dollars allocated for the program and when questioned on this practices the best response they could muster was "administrative fees".

PBMs have also been show to reimburse their own pharmacies at a higher rate than their competitors, independents and chains alike. During a study when Arkansas was investigating PBM practices they found that CVS Caremark was reimbursing CVS pharmacies way more on several hundred drugs than they are reimbursing Walgreens, Kroger and independents.

CVS maintains that their pharmacy operations and their PBM operations are separate. However every 3-4 months myself and hundreds of independent

pharmacy owners across the country receive letters from CVS about purchasing our pharmacies due to the difficulty of the current pharmacy market. The difficulty has been due to PBMs taking more and more reimbursement from independent pharmacies and keeping to boost their own profits for shareholders. My pharmacy has more than doubled the number of prescriptions filled on a daily basis in the last 5 years but PBM reimbursements have fallen to the point we are reimbursed the same amount as were 5 years ago for filling double the amount of prescriptions.

PBMs also impose DIR fees on independent pharmacists months after a prescription is filled and the pharmacy has already used the funds for daily operations. pharmacy DIR fees increased by 91,500 percent between 2010 and 2019. For context, a \$4 gallon of milk increased by that much would cost \$3,660. Every month independent pharmacies pay thousands of dollars in fees like this. My own pharmacy pays close to \$[REDACTED] each month in DIR fees. DIR fees were introduced to make sure pharmacies were involved with patient care but now they are simply a way for PBMs to boost their profits. Also I'm sure PBMs do not impose DIR fees on the pharmacies they own because there would be no additional profits if they did.

Any PBM that operates should not be allowed to have any ownership interest in a pharmacy. A competitor in an industry should never be allowed to control reimbursements for their competition. PBMs set the reimbursement rates for small independent pharmacies based on what they pay for drugs when they are buying massive quantities of these items at a discounted rate compared to what independent pharmacies are charged for them. Your local grocery store would never agree to let Kroger set the prices in their store because they don't get the same pricing and they would lose money and eventually be forced to close but somehow independent pharmacies are expected to survive off reimbursements determined by their competitors.

In conclusion I ask that the FTC do a thorough investigation of PBMs and their practices. Speak with independent pharmacy owners and their staff. Invite comments from consumers about how they have been affected. Tens of thousands of consumers have either lost the pharmacy they trusted for years or were outright forced to a PBM owned big box pharmacy or mail order pharmacy. Thank you to the FTC for the opportunity to voice my concerns.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/11>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 10:04:45 PM

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Submitted on Sunday, February 13, 2022 - 22:04

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Joey

Last Name: Robbins

Affiliation: Randolph County Drug and Imboden Medical Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

I am a 39 year pharmacist veteran with 35 years being a manager or owner. My PBM DIR fees in 2021 were the highest ever forcing me to decrease personnel expense, customer services, and community support. Our Part D Medicare customers are paying more due to ridiculously high DIR fees and other thievery PBM practices. Our federal and state governments are being robbed by PBMs and changes must be made. PLEASE consider making these changes which will benefit our seniors, our government, and our pharmacies.  
THANK YOU.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/39>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 6:35:46 PM

---

Submitted on Friday, February 11, 2022 - 18:35

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: John

Last Name: Borzilleri, MD

Affiliation: DrugPriceTruth.org

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/139>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:55:38 PM

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Submitted on Monday, February 14, 2022 - 15:55

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: John

Last Name: Brittin

Affiliation: Village Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter Commissioner Noah Phillips Commissioner

Christine Wilson

Federal Trade Commission 600 Pennsylvania Ave., N.W. Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am [describe who you are and how your pharmacy has been impacted by take-it-or-leave-it contracts, DIR/GER/BER, and unattainable performance metrics]. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen



drastically over the years.

These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,

John Brittin R.Ph.

Village Pharmacy [REDACTED]  
[REDACTED]  
[REDACTED]

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/171>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 10:45:35 PM

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Submitted on Friday, February 11, 2022 - 22:45

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: John

Last Name: Droblyn

Affiliation: NCPA

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment: PBMs need to be investigated for unfair business practices by an OUTSIDE INDEPENDENT AGENCY! Not self policed. These large middlemen have blatantly ignored countless state and Federal laws with regard to unfair practices against independent pharmacies and they must be held accountable to the US taxpayer. But must be done fairly by a neutral party. This committee cannot be represented by the PBM community. This would show unfair bias in the resulting outcomes.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/151>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Thursday, February 10, 2022 10:08:44 PM

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Submitted on Thursday, February 10, 2022 - 22:08

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Jonathan

Last Name: Gilliam

Affiliation: Direct Selling Industry Supplier

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/19>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:57:31 PM

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Submitted on Monday, February 14, 2022 - 15:57

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Joseph

Last Name: Cross

Affiliation: NM Pharmacists Association

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Danny Cross RPh, a community pharmacist and pharmacy owner from Carlsbad, NM. PBM's have significant negative impact on my practice and my patients. The biggest problem are DIR fees that they recoup after the fact based on supposed performance measures that are unattainable, unfair, and calculated totally at the discretion of the PBM. They judge a small subset of data but recoup 10-14% of the total cost of the prescriptions dispensed. Even if you were perfect (which is impossible to achieve) they take 7-10% and up to 14% if your performance is judged inadequate. These DIR fees are taking \$ [REDACTED] dollars annually from my bottom line.

The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling. I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/183>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 12:51:20 PM

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Submitted on Friday, February 11, 2022 - 12:51

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Joseph

Last Name: Stewart

Affiliation: Otsuka America Pharmaceutical, Inc.

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/71>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 10:44:26 AM

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Submitted on Friday, February 11, 2022 - 10:44

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Julie

Last Name: Carlson

Affiliation: Information Technology and Innovation Foundation

Full Email Address: [REDACTED]

Confirm Email [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/55>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:29:32 PM

---

Submitted on Monday, February 14, 2022 - 15:29

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Kacee

Last Name: Blackwell

Affiliation: Creative Care Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

I am Kacee Blackwell, an Oklahoma community pharmacist. I write to express my support

of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the

three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control

so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on pharmacies to enter

the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this

request to be vitally important because the PBMs will not allow pharmacies to send you claw back

information. PBMs have already been using veiled threats against pharmacies who have

submitted comments to CMS on its proposed rule. The FTC is our only hope to bring

transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, claw backs have risen drastically over the years.

These staggering increases in claw backs have created an uneven playing field for community

pharmacies. They are also so loosely tied to performance metrics where I could be the

most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Many of the PBM's unregulated practices erode patient choice on where to do business as unfair restrictions are placed on where they may receive medications and other pharmacy services.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug



limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/87>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:37:01 PM

---

Submitted on Monday, February 14, 2022 - 15:36

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Kari

Last Name: VanderHouwen

Affiliation: Duvall Family Drugs and Pharm-A-Save Granite Falls

Full Email Address [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission  
600 Pennsylvania Ave., N.W.  
Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Kari VanderHouwen, and I own two independent pharmacies in Washington State, Duvall Family Drugs and Pharm-A-Save Granite Falls. Both of which serve rural communities. I write

to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges,

negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,  
Kari VanderHouwen

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/107>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:49:21 PM

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Submitted on Monday, February 14, 2022 - 15:49

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Karl

Last Name: Clearwaters

Affiliation: Herbst Apothecary

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement: IN

Submit written comment:

Stop the PBM abuse, manipulation, and over all dictatorial position PBM's have forced upon Pharmacies and society.

I have practiced for 43 years, I no longer wish to be a pharmacist because of PBM abuse. FTC please stop the madness and protect society.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/163>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 9:56:29 AM

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Submitted on Monday, February 14, 2022 - 09:56

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Katie

Last Name: Deighton

Affiliation: Reporter

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/15>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 7:40:50 AM

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Submitted on Saturday, February 12, 2022 - 07:40

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Kenneth

Last Name: Kuenzel

Affiliation: Hyde Pharmacy Inc

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

Hello, I am a pharmacist at an independent community pharmacy in a small town in northeast Arkansas. I have been in practice for 25 years.

Over this time period I have witnessed the unmitigated proliferation and egregious practices perpetrated by pharmacy benefit managers. These PBMs, operating with literally no oversight, have fostered an uncompetitive atmosphere that is heavily in their favor. They force us to sign take it or leave it contracts knowing that if we don't we will have no patients to serve. They operate mail order pharmacies that they use data from our filled prescriptions to steal our patients. They do the same with brick and mortar pharmacies they own to take our patients. They operate spread pricing schemes where they will pay our pharmacy one dollar amount only to charge the insurance plan they are hired to work for a much higher amount, pocketing the balance. This practice was laid bare for all to see with CVS/Caremark in Arkansas by pharmacists in a state/federally funded Medicaid expansion plan. In this instance patients were showing us their explanations of benefits showing the costs of their medicines and what their plan paid. We were able to compare what we showed was paid to what the plan was charged and the difference was staggering. Sometimes thousands of percent difference. PBMs have single-handedly increased the prices of brand name medications by utilizing rebate programs where they will dangle formulary status to a pharmaceutical manufacturer. In this case the manufacturer will kick back to the pbm monies for each rx filled in exchange for a favorable copayment on a plan. These rebates are frequently kept in part or full by the pbm and not passed back to the plan or patient as savings. This practice of extorting rebates from the manufacturer forces them to increase the list price on their medicine in order to make a profit. This practice is most easily seen with medicines in classes where there are many different competing choices of drugs to use. Insulins are a great example. Ninety nine percent of the problem we have in this country regarding drug pricing can be traced back to PBMs and this practice.

We have 3 large PBMs in America that process the vast majority of prescriptions. Express Scripts, CVS/Caremark and OptumRx. They have all become so powerful they often flout the laws and regulations that states have

enacted to try to reign them in. Many times they have to pay fines or penalties that amount in the millions of dollars but it does not deter them. These penalties only amount to basically a speeding ticket to them. At the end of the day all that we ask for as pharmacists is a level playing field and fair reimbursement for the prescriptions and services we provide so we can provide the best care possible for the patients that we serve.

Thank you for your consideration.  
Kenneth Kuenzel Pharm D

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/7>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 10:52:30 PM

---

Submitted on Sunday, February 13, 2022 - 22:52

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Keyur

Last Name: Shah

Affiliation: Community Independent Pharmacy.

Full Email Address [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Pharmacy benefit managers in United States run unfair practice and create unlevel playing field by creating limited pharmacy networks, do not offer independent pharmacies a fair PBM contract, use their control of insurance and patients to drive prescriptions out to their own retail, mail order and specialty pharmacies. Citizens of this country has the right and freedom to choose healthcare services from providers of Thierry choice. PBMs by creating complex contractual language and unrealistic data , manipulate Payers and their brokers to forcefully select the network they (PBM) create to keep their completion out of network, make patients and pay or pay more copy as at their competition, and deliberately do not include their competition out of 90day fill network and on top of that pay them at a different (lower) rate then what they pay their own pharmacy for same drug. The abuse, unfair competition, REBATES,DIRfees, and starring MUST STOP. It is costing Americans not only more money but it is costing them their health and life.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/43>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 1:29:35 PM

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Submitted on Friday, February 11, 2022 - 13:29

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: KIMBERLY

Last Name: FROMM

Affiliation: MEDICINE SHOPPE PHARMACY

Full Email Address: [REDACTED]

Confirm Email [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment: PBMS ARE HURTING INDEPENDANT PHARMACIES AND THE COMMUNITIES THAT WE SERVE.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/83>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 5:48:57 PM

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Submitted on Saturday, February 12, 2022 - 17:48

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Krystal

Last Name: Soo

Affiliation: Independent pharmacist at Soo's Drug Store

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement: AR

Submit written comment: Please review PBMs. They have gone from processing claims via computer on a fee per transaction basis, to profiting billions each year. They have integrated with insurance companies, chain drug stores, and in some cases hospitals and medical practices, as well as the switch companies that process every claim submitted by a pharmacy. They also profit via rebates from drug manufacturers by more or less "bidding out": formulary status for medications based on the amount of discount received from the manufacturer. The patient receives no benefit from this process, especially when forced to pay a higher brand name copay rather than a generic copay. I have lost so many customers because they structure and market their plans to funnel people to the mail order and chain pharmacies owned under the same umbrella. We are offered take it or leave it contracts, if we are allowed to participate at all. Arkansas pharmacists proved how these PBMs were using spread pricing to pay retail pharmacies less than the insurance was paying, which resulted in higher health care costs to both the employer and the consumer. We had all the documents to show how CAREMARK manipulated our prescriptions for our own policy through Arkansas Blue Cross using spread prices and paying a much higher reimbursement at the CVS pharmacies they also own. Patients are being forced to drive longer distances and wait days for prescriptions due to not being allowed to get their prescriptions filled for the same price at a locally owned pharmacy, from a pharmacist they know and trust. In addition, being forced to use mail order is often a nightmare for elderly patients that are more likely to be scammed on the telephone.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/47>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:24:28 PM

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Submitted on Monday, February 14, 2022 - 16:23

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Kumar

Last Name: Suraneni

Affiliation: NCPA

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips Commissioner Christine Wilson

Federal Trade Commission  
600 Pennsylvania Ave., N.W.  
Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Kumar Suraneni, owner of Melbran Pharmacy, a small business providing health care needs to local residents for almost 35 years and counting. Unfortunately my survival is at stake because of PBM's take-it-or-leave-it contracts, DIR/GER/BER, and unattainable performance metrics. My DIR/GER/BER fees 4 years ago was [REDACTED] and now it is over [REDACTED]. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have

created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Sincerely,

Thank you

Kumar Suraneni, Community Pharmacist

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/251>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 11:38:49 PM

---

Submitted on Friday, February 11, 2022 - 23:38

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Kyle

Last Name: Keenum

Affiliation: Rexco Drug & Gifts

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment: I am an independent pharmacy owner at Rexco Drug & Gifts in Altus, OK. I bought my store in September of 2020. Since that time I have been fighting an uphill battle every step of the way against various pharmacy benefits managers (PBM's). Everything from required credentialing fees that were in violation of Oklahoma law, to direct mailers to customers directing my patients away from my pharmacy in order to use a corporate chain pharmacy, to clawback DIR fees have been tactics utilized by PBM's with a biased interest to create unnecessary hurdles for my business to have to overcome. It baffles my mind how difficult it is to own and operate a pharmacy when you have no idea what your true revenue is or will be. While initially the revenue numbers may look favorable, the fact that PBM's can "true up" past payments years after the fact make it practically impossible to invest in the growth of the business since the funds utilized to make those investments can be taken back by PBM's. I applaud the FTC for initiating this investigation into the vertical alignment and abusive practices utilized by PBM's, but without direct action against the PBM's, many of the struggling independently owned pharmacies in rural America will be forced to close their doors and, thus, limiting vital healthcare access for many Americans. Thank you for your time and for your decision to begin an investigation that could ultimately save my livelihood.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/155>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 8:51:26 AM

---

Submitted on Saturday, February 12, 2022 - 08:51

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Laura

Last Name: Cross

Affiliation: Consumer

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement: VA

Submit written comment: Accredo and express scripts are risking the lives of those of us with chronic illness.. things must change

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/15>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 3:56:20 PM

---

Submitted on Friday, February 11, 2022 - 15:56

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Leah

Last Name: Adsms

Affiliation: Granddaughter of Hugh Richard Adsms

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Interested in how the community is dealing with our funds and our protection. Also looking to see how I might be able to use my innate communication skills to help out. I'm in need of a job and I possess very unique skills.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/95>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 4:42:02 PM

---

Submitted on Saturday, February 12, 2022 - 16:41

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Leena

Last Name: Amin

Affiliation: Camden pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement: DE

Submit written comment: New pharmacy owner, with these DIR fees I am afraid to feel any brand name medicine.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/39>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 9:47:17 AM

---

Submitted on Saturday, February 12, 2022 - 09:47

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Loretta

Last Name: Boesing

Affiliation: Unite for Safe Medications

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/19>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 9:34:09 AM

---

Submitted on Friday, February 11, 2022 - 09:33

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Marc

Last Name: Ost

Affiliation: Eric's Rx Shoppe

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/31>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:03:44 PM

---

Submitted on Monday, February 14, 2022 - 16:03

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Mark

Last Name: Barnes

Affiliation: Barnes Pharmacy & Gifts

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

The FTC is the last ditch effort to reign in PBM practices. My grandfather started our family owned pharmacy in 1921. Back then the competition was always friendly, helping each other and looking out for each other. My father came back to run the pharmacy business in 1954. Again competition was always friendly and everyone helped each other. I came home and bought my father's part of the pharmacy in 1993. As "drug cards" became popular in the late 1980's the birth of PBM's took place. From that day until present the practices of PBM's have been anything but legal. They go right to the line of legality, not caring who or what they destroy.

From DIR fees that should be illegal due to being charged to pharmacies AFTER

the sale, to charging the patient's insurance outrageous prices for prescription drugs that would be hundreds of dollars LESS at their local independent pharmacy. I ask the FTC to please investigate these and other practices of the nation's PBM's. I am positive that your findings will substantiate all the allegations that have been made nationwide.

Thank you in advance for your work that will help all citizens, that take prescription drugs.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/199>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 9:33:40 AM

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Submitted on Friday, February 11, 2022 - 09:33

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: mark

Last Name: cuker

Affiliation: Jacobs Law Group

Full Email Address [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement: Pennsylvania

Submit written comment: I would like to speak on the how PBMs use their power to suppress competition for independent pharmacies and drive them out of business

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/27>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 9:48:04 AM

---

Submitted on Saturday, February 12, 2022 - 09:47

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Mark

Last Name: Vogler

Affiliation: Martin Tipton Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement: TX

Submit written comment: PBMs are using the DIR fees and other retroactive fees to try to run their competitors out of business which would severely inhibit good medical care to patients from independent pharmacies

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/23>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 7:59:02 AM

---

Submitted on Friday, February 11, 2022 - 07:58

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Matthew

Last Name: Seiler

Affiliation: National Community Pharmacists Association

Full Email Address [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/19>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:38:56 PM

---

Submitted on Monday, February 14, 2022 - 15:38

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Mehulkumar

Last Name: sureja

Affiliation: BIG BROTHERS PHARMACY

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

Chair Lina Khan Commissioner Rebecca Slaughter Commissioner Noah Phillips Commissioner Christine Wilson Federal Trade Commission 600 Pennsylvania Ave., N.W. Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips and Wilson  
I am Mehul Kumar Sureja, Pharmacist & Owner of small independent pharmacy in Flint, MI which is severely affected by financial burden that has been put on pharmacies & patients due to unfair practices of PBMS. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. They take the marketplace and get into one of those take-or-leave-it contracts that the PBMs force on me to enter their networks and the associated fees are appalling. I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have

submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices. As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most profitable pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through

their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement. Thank you, Mehul Sureja

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/127>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 1:08:54 PM

---

Submitted on Friday, February 11, 2022 - 13:07

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Miguel

Last Name: Rodriguez

Affiliation: American Pharmacies General Counsel

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/75>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 2:23:55 PM

---

Submitted on Monday, February 14, 2022 - 14:23

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Misti

Last Name: Evans

Affiliation: Atkins Family Pharmacy, Pharmacist in Charge

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

PBMs have long stayed behind the shadowy curtain between insurance companies, patients, and pharmacies. With back door rebates that do not help save patients money to having mail order pharmacies where they pay themselves much higher rates compared to independent pharmacies, PBMS have long used many different schemes to pad their pockets with no added benefits. It is beyond time for them to hand over information on contracts, reimbursements, and other practices affecting drug prices, including those practices that may disadvantage independent or specialty pharmacies.

PBMs are modern day monopolies, there should be no way that CVS and Caremark should have ever teamed up. What other industry allows the competition to dictate what they will pay their competitors. Free market works when there is a free market. The Pharmacy market is broken and the PBMs are monopolies that need to be stopped.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/67>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:43:47 PM

---

Submitted on Monday, February 14, 2022 - 15:43

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Monique

Last Name: Whitney

Affiliation: Pharmacists United for Truth and Transparency

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/147>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:29:54 PM

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Submitted on Monday, February 14, 2022 - 16:29

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Neal

Last Name: Presley

Affiliation: Larry's Prescriptions, Inc Opp, Al

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment: I am an independent pharmacy owner in a small rural town in Alabama. We serve Medicare/Medicaid patients as well as commercially insured patients as well. The PBM industry has run rampant and unchecked over the entire patient, doctor, provider relationship. They are making BILLIONS of dollars and have none of the previously mentioned entities best outcomes in mind. They use spread pricing to manipulate the system to their benefit, give us veiled contracts that pay us less than our acquisition cost for goods, and use audit practices that are just downright shameful and plain wrong. Please, please, please look into this as they have one of the largest lobbies in the country and we have no way to fight them fairly. We are struggling to make ends meet and they are raking in BILLIONS of dollars. Simply look at the profit margins of their companies since they began PART D.

I could go on and on but its simply time we have some relief from these one sided monsters.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/267>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 8:01:41 AM

---

Submitted on Saturday, February 12, 2022 - 08:01

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: NeneL

Last Name: Brisk

Affiliation: Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement: Florida

Submit written comment: We are a newer independent pharmacy struggling to keep our doors open. With every claim submitted we are lucky to get pennies on the dollar. Most of the time we're in a loss due to the PBMs reimbursements. It is surely not fair that the PBM is paying itself (ex. Caremark/CVS) more and an independent processing the same claim, less. Also, just yesterday I had Humana call for a transfer of a prescription. I called the patient and he told me he never asked for a transfer. In summary the playing field is not fair. Whether it's Caremark, Optum, Humana, etc. they do so many things to steer people their way, especially with letters to patients letting them know they can ONLY use THEIR pharmacies. Please, we need a major change soon.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/11>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 4:55:57 AM

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Submitted on Friday, February 11, 2022 - 04:55

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Nokuthula Lucia

Last Name: Sithole

Affiliation: Emergency services (safety officer) CO

Full Email Address [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: FTC Operations

Register to speak during meeting: Yes

Link to web video statement: [REDACTED]

Submit written comment: All I want to say we are treated buy managers , commander's and other people who own the offices when I introduce my letter to work with them tell us to go to the head department and they do the same not respond .So I don't know what to do or say even vaccines sites managers they have pride to not give us what we want as now I do follow up on pharmacies I need our work freedom not treating from them

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/3>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 5:58:58 PM

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Submitted on Friday, February 11, 2022 - 17:58

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Pal

Last Name: Kahlon

Affiliation: Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

Pharmacy Benefit Managers (PBM) are prohibiting independent pharmacies to run business. They are enforcing patient's to use their own pharmacies by offering less copay than any other independent pharmacy. They are giving these "take it or leave it" contracts to independent pharmacies without any negotiation. Therefore they are making patients to pay more copay at independent pharmacies rather than any of their affiliated pharmacy. Copay should be same regardless the choice of the pharmacy by the patients. Patients are threatened to chose PBM's affiliated pharmacies or patient end up paying more at their choice of the pharmacy. This is the violation of Trust, personal choice, freedom to choose the service/pharmacy. Patients and independent pharmacies shouldn't penalized because of the Greed of PBMs. They control the prices and access to the medications. PBM abuse must stop. There should be an equal opportunity for everyone to succeed. My success in my pharmacy business shouldn't be dependent on the mercy of PBMs. PBMs need to be abolished, otherwise corporate world will crush the small businesses without the help of the government. I am available to discuss it with anyone, at any time.  
Please help!!

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/127>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 8:01:03 PM

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Submitted on Saturday, February 12, 2022 - 20:00

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Paul

Last Name: Vo

Affiliation: Michoud Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment: I am an independent pharmacy owner in Louisiana and I want to comment about PBM abuses. They do not pay for prescriptions on a fair level. Many of our claims are always reimbursed below cost. Also, DIR fees that are increasing year after year. DIR fees are money that are clawed back from our pharmacies months after we have already sold prescriptions. Imagine after billing for a service/claim and thinking you're profiting \$10 after cost and labor. Then, months later PBM's take back \$15 for that same claim. You're now -\$5 in the minus. Imagine thousands of prescriptions like this for Medicare Part D claims. How do one expect a business that provides care to its community to stay in business? In the end, small business hurt and also patients are hurt because these practices increase in copay cost for seniors. These unfair practices are implemented to profit billions of dollars from pharmacies all over the country. Leaving us to suffer and patients to suffer, which all in all decreases the health of seniors and pharmacies wondering how long are we able to keep our lights on.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/63>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 6:55:37 AM

---

Submitted on Friday, February 11, 2022 - 06:55

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Peter

Last Name: Matz

Affiliation: FMI-The Food Industry Association

Full Email Address [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/11>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 11:46:37 AM

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Submitted on Saturday, February 12, 2022 - 11:46

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Peter

Last Name: Vander Nat

Affiliation: retired FTC economist

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment: I am a retired FTC economist and I continue my work on business ventures that make false & deceptive earnings claims. My most recent case with a federal government agency involved a company claiming that its affiliates could earn hundreds and even thousands of dollars per day.

This scheme has a documented number of more than 3 million victims world-wide, with several hundred thousand of these victims in the US. I strongly support the FTC's ongoing efforts to prohibit & prosecute deceptive earnings claims.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/31>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 9:34:36 AM

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Submitted on Monday, February 14, 2022 - 09:34

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Peyton

Last Name: Harvey

Affiliation: Stotts Drug Store

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment: DIR fees threaten patients access to pharmacy care.

The back door DIR fees are creating a dangerous situation in todays pharmacy.

These fees cause independent pharmacies to loose money on most of the prescriptions they fill today. Many pharmacies have closed or have had to not fill a person's prescriptions because they can't afford to continue to fill prescriptions at a loss. DIR fees also have caused chain pharmacies to cut staff which has created wait times to exceed reasonable times in which a patient needs their medication. Staff is often stretched so thin causing more of a chance of errors. The PBMs are increasing the percentage they charge back to pharmacies each year. The DIR model does not allow a pharmacy know if they will fill a prescription at a small profit or lose a significant amount of money on a prescription. DIR fees are unfair and are just adding to a way the PBMs are making records profits while pharmacies suffer loss which threatens patients quality and access to pharmacy care.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/3>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 11:21:37 AM

---

Submitted on Friday, February 11, 2022 - 11:21

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Pritesh

Last Name: Patel

Affiliation: Carepoint Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/63>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 11:04:07 AM

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Submitted on Saturday, February 12, 2022 - 11:03

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Rachel

Last Name: Jarboe

Affiliation: MA at very large multi specialty medical group

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement: TN

Submit written comment:

I just want to submit concerns over Accredo/ Express Scripts (PBM). I have worked as an MA for 21 years. I work in GI where we prescribe specialty drugs that are very expensive. I have watched my patients get strong armed in to using Accredo by their insurance for years. But further, I have watched my patients nearly lose their colons and small bowels BECAUSE of Accredo. They are so disorganized and careless that I'd be surprised if there are not lawyers already working on cases. In my experience, many of my patients have had to go without their life saving drugs for months. Most recently I had to refer a patient to a surgeon to have his colon removed since Accredo was the only pharmacy he was allowed to use and they had a new excuse every week why they couldn't ship his medication. He went months without it and wasn't allowed to change specialty pharmacies. He became sick and I informed my patient he needed to contact an attorney. I contacted Accredo to let them know I had advised my patient seek legal counsel. Within 24 hours it was magically approved.

Their most common excuse to delay drugs (that I feel financially benefits them to delay, is that they are waiting on approval. They tell me they're waiting on the patient to approve it when I know the patient has. Then they tell the patient they are waiting on the doctors office when I've already done it. It happens constantly and people are suffering.

This is just one case of many I have experienced and I have a whole host of nurses and MAs that share the same story with their own patients.

They should be held responsible. They're going to kill someone and likely already have.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/27>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:32:31 PM

---

Submitted on Monday, February 14, 2022 - 15:32

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Raimon

Last Name: Cary

Affiliation: Independent Pharmacy Owner - Member of NCPA

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan Commissioner

Rebecca Slaughter Commissioner

Noah Phillips Commissioner

Christine Wilson Federal Trade Commission 600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Dr Raimon Cary, PharmD owner and pharmacist of an independent pharmacy in Carroll County Maryland. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling. I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices. As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory

reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,  
Dr. Raimon Cary, PharmD

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/95>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:20:13 PM

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Submitted on Monday, February 14, 2022 - 16:19

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Ramesh

Last Name: Rakholia

Affiliation: Pharmacist

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

February 14, 2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am an independent pharmacy owner/pharmacist serving low-income patients since 1999 with a free home delivery to my patients. We employ 7 people from the community. PBMs TAKE IT OR LEAVE IT contracts affected our pharmacies bottom line adversely in a big way where sometime we end up losing money by serving my patients! DIR/GER/BER fees and UNATTAINABLE metrics by these PBMs are a perfect recipe to put INDEPENDENT SMALL Pharmacy owners like me out of business.

I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect



pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you!

Sincerely,

Ramesh Rakholia, Rph

Alvarado Community Pharmacy

San Diego, CA [REDACTED]

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/247>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:39:38 PM

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Submitted on Monday, February 14, 2022 - 15:39

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Rasik

Last Name: Nagrecha

Affiliation: Pres.

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

Hurting Patients Halting Progress

Pharmacy Benefit Managers (PBMs) are the middlemen that come between patients and their doctors, causing unnecessary suffering by delaying, denying, or obstructing care.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/131>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:41:19 PM

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Submitted on Monday, February 14, 2022 - 15:40

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Rebecca

Last Name: Tam

Affiliation: NCPA

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

2/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter Commissioner Noah Phillips Commissioner Christine Wilson

Federal Trade Commission 600 Pennsylvania Ave., N.W. Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Rebecca Tam, owner of a small independent pharmacy - Medical Arts Pharmacy in San Leandro, CA. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the

three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits,

discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/135>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 8:11:59 AM

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Submitted on Friday, February 11, 2022 - 08:11

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: RICH

Last Name: GANDHI

Affiliation: Reform Lodging

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: Yes

Link to web video statement: Reform Lodging (Fair Franchising Laws)

Submit written comment:

Reform Lodging's mission is to advocate vigorously on behalf of all hotel owners and be the foremost industry think tank, influencing every corner of the hospitality industry.

We envision an organization with a vibrant member base by cultivating influential relationships across the industry. We will identify and support other emerging leaders who share our principles of fairness and equity for owners. By using a multi-pronged approach including legislative and legal strategies, we will level the playing field for small business owners.

Our vision entails collaborating with other hotel ownership and hospitality associations, policymakers, and various industry stakeholders to positively influence not only owners, but the employee and guest experience as well.

We will aggressively pursue all initiatives and efforts which safeguard the viability and rights of hotel owners across the United States, including ensuring a healthy relationship between franchisee and franchisor.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/23>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 12:05:11 PM

---

Submitted on Friday, February 11, 2022 - 12:04

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Rob

Last Name: Geddes

Affiliation: Albertsons Companies Inc

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/67>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 1:59:48 PM

---

Submitted on Monday, February 14, 2022 - 13:59

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Robert

Last Name: Ekiert

Affiliation: Hometown Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:  
[REDACTED]

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/51>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 2:04:28 PM

---

Submitted on Monday, February 14, 2022 - 14:04

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Robert

Last Name: Ekiert

Affiliation: Hometown Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

<https://drive.google.com/file/d/1ItPG3isAofTpRt9wt7sbMIEPLoz2sILU/view?usp=sharing>

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/59>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Thursday, February 10, 2022 8:39:33 PM

---

Submitted on Thursday, February 10, 2022 - 20:39

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Robert

Last Name: gant

Affiliation: government

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment: Send email information

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/15>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 5:32:50 PM

---

Submitted on Friday, February 11, 2022 - 17:32

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Robert

Last Name: Taveggia

Affiliation: owner Chenoa & Fairbury Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: No

Link to web video statement: IL

Submit written comment: We are trying to survive out here in small town.

Please make these PBM's have some transparency. How do they continue to post hundreds of millions in profit while we continue have to close our doors and lose jobs. We are not looking to get rich like them greedy hogs. Just pay us a fair reimbursement for trying to help our communities.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/123>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 2:03:14 PM

---

Submitted on Monday, February 14, 2022 - 14:02

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Ron

Last Name: McDermott

Affiliation: Hometown Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

[https://drive.google.com/file/d/1eFImuG2\\_k7U\\_ELsuT-7QX4ribIABU-OB/view?usp=sharing](https://drive.google.com/file/d/1eFImuG2_k7U_ELsuT-7QX4ribIABU-OB/view?usp=sharing)

Submit written comment:

Dear FTC,

Community pharmacies are a vital part of the health and wellbeing of our communities. Many patients rely on the nimbleness and willingness of our pharmacies to do the little extras that they need whether is it delivery, medication adherence programs, customized packaging or patient specific counseling. These things cannot be and are not provided by “large chains”. We are the ones taking the extras steps to help keep your grandma and grandpa, or a child with special needs, or a group home for folks with mental disabilities..... out of the hospital and healthy....and NOT costing the employer insurance plan or the state more money than they should be when their healthcare is properly managed.

All that being said, we battle a broken system while taking care of each patient.

We are a business and we must pay our bills and keep the lights on in order to be able to take care of the patients as I just described. In business, you sell a widget, there is a markup on that widget and you make a profit. If that profit is not enough you push back and renegotiate to make sure that it is enough.

Now enter the daily world of the community pharmacy. We are stuck taking contracts that the big PBMs send to us at deteriorating rates. If we choose not to accept these rates, we cannot push back, they will leave us out of their network and we just no longer have the ability to take care of our patients. And so for years now we have taken these bad contracts to try to continue to take care of the patients that so dearly need us.

Things like this happen

-Fill lantus (insulin) and lose [REDACTED]

- Fill Jardiance (a diabetes med) and lose [REDACTED]

-Fill Januvia (a diabetes med) and lose [REDACTED]

-Fill entresto (a CHF med) and lose [REDACTED]

And how about fill invega trinza (a specialized injectable anti-psychotic) and lose [REDACTED]

And that was just in the first couple hours of our day yesterday!!!!

This works in the favor of the big PBM. Community pharmacies cannot continue to take these ridiculous rates as you would imagine....so little by little we are making the tough decisions to no longer take these contracts. Once that happens across multiple contracts worse results are impending.....we start to see community pharmacies close, access for these high need patients decreases, and they end up in the hospital cost the system money and putting undue burden on themselves and their families.

My pharmacy group has strong business acumen and a varied background of leadership across healthcare and finance. We have battled this broken system for years and watched our profit margin and consequently our ability to take care of our patients decrease.....and now even we have been put in a situation that we must close a pharmacy. Our pharmacy in Greensburg, PA will close its doors this week, on 2/17, the date of this Federal trade commission open meeting.

We have spent the past 2 weeks on the phone with patients upset and concerned about how they will get the services that they have come to rely upon from their community pharmacy in Greenburg. When we try to explain the PBM system and the outrageous negative margins that we encounter daily they are in disbelief. It really is hard to understand how anyone would stay in business dealing with this!!!

I ask you to please unveil the truth behind the PBM broken system. A PBM is in the middle of the patient and their healthcare provider. And it cost the provider, often a community pharmacy, their ability to stay in business. Driving community pharmacies out of business pushes patients to larger pharmacies which are often affiliated with a PBM (example for be CVS and Caremark among other). Following along, I want you to note that the same company in many of these scenarios that is forcing the closure of these community pharmacies is actually the one who now ends up filling the prescriptions for the displaced patients!!!! These patients, who so desperately need the extra level of care that a community pharmacy provides, will get lost in this system and often become non-compliant with deteriorating health conditions. Limited access and limited service is a direct result of this elimination of competition!!!

Please help to correct this system so that community pharmacies can stay in business and take care of the ones who need us most....your families and loved ones and you community.

Thank you.

Ron McDermott

Hometown Pharmacies – Ohio and Pennsylvania  
[REDACTED]

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/55>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 5:54:15 AM

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Submitted on Friday, February 11, 2022 - 05:54

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Safiatou

Last Name: Tahirou Halidou

Affiliation: Grw Niger

Full Email Address [REDACTED]

Confirm Email [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Hello everyone , thanks

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/7>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 7:05:15 AM

---

Submitted on Friday, February 11, 2022 - 07:05

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Sandip

Last Name: Patel

Affiliation: Crossroads Hospitality Inc

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment: I am a small hotel operator going through difficult times during the pandemic which made me realize the cost of operating room from excessive charges from my franchisor. The initial FDD I signed does not detail all of this fees which is driving our NOI down especially fees that are newly created after I signed my franchise agreement. Our projections from our pro-form to our banks are not correct when we built or purchase hotel when we do not know our exact cost of franchising.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/15>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:28:58 PM

---

Submitted on Monday, February 14, 2022 - 15:28

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Sandip

Last Name: Patel

Affiliation: Dynamic Care Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

2/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Dr. Sandip Patel with Dynamic Care Pharmacy. PBM's have been hurting our industry as independent pharmacy providers for years and is hurting the general public from being able to obtain the care they need and deserve. PBM's are the reason why drug costs are so high and they are taking from everyone's pockets. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect

pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you

Sandip Patel

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/83>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 3:17:20 PM

---

Submitted on Friday, February 11, 2022 - 15:17

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Scott

Last Name: Knoer

Affiliation: CEO, American Pharmacists Association

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/91>

**From:** [REDACTED]  
**To:** [OpenMeeting](#)  
**Cc:** [REDACTED]  
**Subject:** 2.17.2022 FTC Meeting - Public Comment  
**Date:** Saturday, February 12, 2022 8:34:07 PM  
**Attachments:** [2.17.2022 FTC Submission for Consideration.pdf](#)

---

Dear FTC Commission:

Please find the attached statement and supporting documents for consideration by the FTC for the 2/17/2022 Open Meeting. Thank you kindly.

Sincerely,  
Seema Kazmi

---

**Seema Z. Kazmi, Pharm.D.**  
**Pharmacist**

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 5:01:18 PM

---

Submitted on Saturday, February 12, 2022 - 17:01

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Seema

Last Name: Kazmi

Affiliation: Pharmacist

Full Email Address [REDACTED]

Confirm Email [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement: <https://m.youtube.com/watch?v=GmiRT7BSZjU>

Submit written comment: Video on importance of pharmacists and pharmacies during coronavirus pandemic and why their viability is paramount.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/43>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 8:16:17 PM

---

Submitted on Saturday, February 12, 2022 - 20:16

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Seema

Last Name: Kazmi

Affiliation: Pharmacist

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Submission made via email [REDACTED] to [openmeetings@ftc.gov](mailto:openmeetings@ftc.gov) on 2.12.2022.-SZK

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/67>



**Maryland Pharmacists Association**

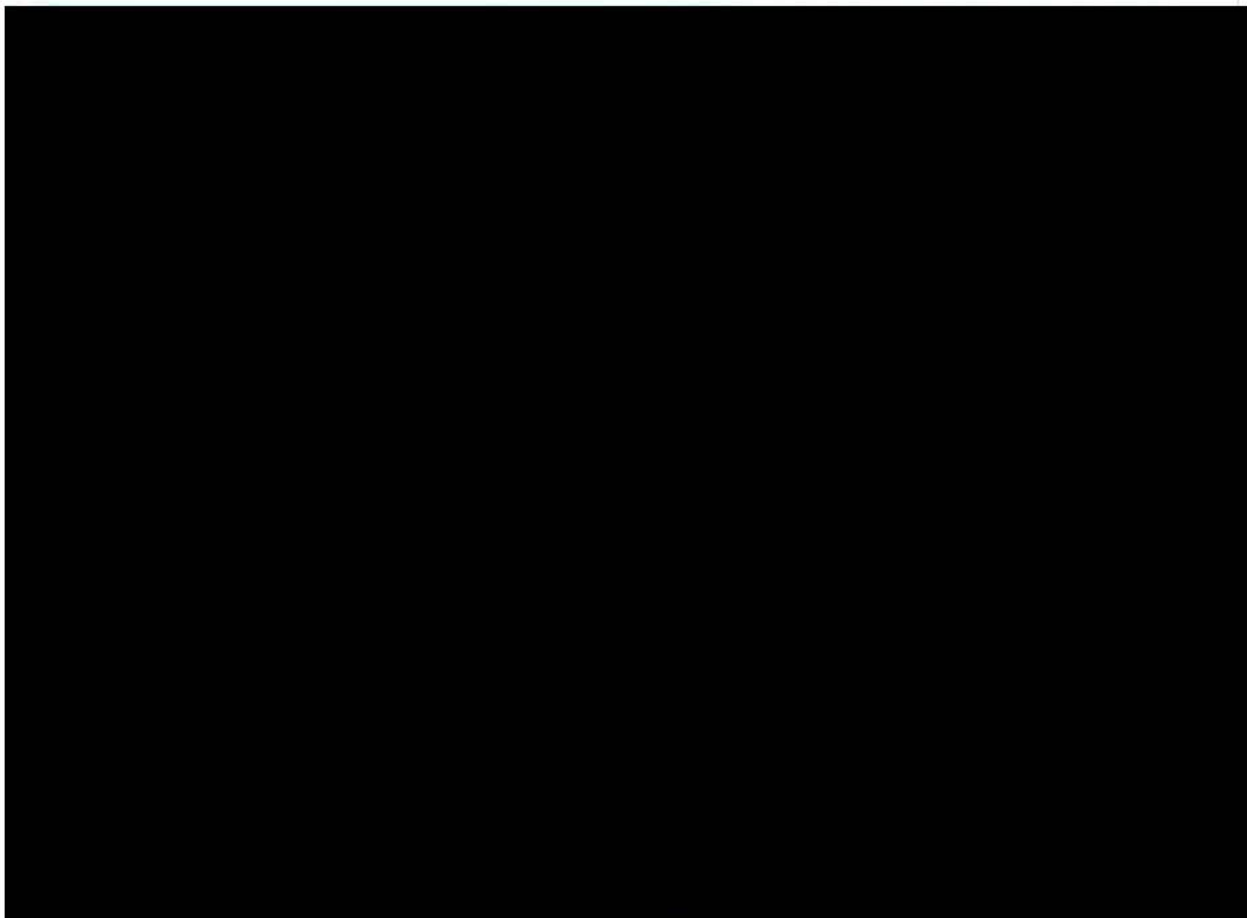
October 6, 2020 · 🌐

Pharmacists love Leslie Rutledge! MPhA is watching the news coming out of DC- are you?

[#wearempha](#)

[#scotusrx](#)

[#StrongerByAssociation](#)



**Arkansas Attorney General Leslie Rutledge**

October 5, 2020 · 🌐

Spotted outside the U.S. Supreme Court today! Tomorrow 10/6, we argue Rutledge v PCMA. Fighting to protect patients & defending family pharmacies! [#SCOTUS](#) [#PBMs](#)

7

2 Shares

# Courier Times

**YOUR-VOICE | Opinion** *This piece expresses the views of its author(s), separate from those of this publication.*

## America's pharmacies get a win over PBMs

**By Seema Z. Kazmi**

Published 5:17 a.m. ET Dec. 15, 2020

As the coronavirus pandemic is ravaging across our country, America's pharmacies have been supporting our communities and maintaining services with the utmost professionalism. Sadly, local pharmacies are under the duress of declining prescription drug reimbursements and are struggling to stay in business.

On Dec. 10, in the matter of *Rutledge v. Pharmaceutical Care Management Association*, the United States Supreme Court in a unanimous decision, 8-0, supported states' rights to regulate practices of Pharmacy Benefit Managers that serve as intermediaries between health plans and pharmacies, and reimburse pharmacies for dispensing prescriptions to plan beneficiaries.

Specifically, Pharmaceutical Care Management Association (PCMA), the trade association representing PBMs was opposing the enactment of the Arkansas law, Act 900, which would require reimbursement to the pharmacies for the cost of drugs paid to purchase the drugs from the wholesaler. PCMA had won a decision at United States Court of Appeals for the Eighth Circuit under the argument that such a regulation is pre-empted by the Employee Retirement Income Security Act (ERISA) of 1974. After PCMA won a decision in its favor in the lower federal court, the Attorney General of Arkansas Leslie Rutledge petitioned the United States Supreme Court to hear the matter.

PCMA had also argued that enacting such a law would drive up healthcare costs. If the purpose of pharmaceutical benefit management is to manage overall healthcare costs, access to medications that sustain life would be paramount. For example, if someone gets hospitalized for a stroke secondary to poorly controlled sugars due to rationing his insulin, how does that reduce costs? Hospitalizations are far more expensive than a vial of insulin. Health plans, employer groups, and various stakeholders need to scrutinize the administration of pharmacy benefits to ensure that plan beneficiaries have access to medications for optimal health outcomes and adequate pharmacy providers that can stay in business to service members.

There is an opportunity to utilize community pharmacists, who are arguably the most accessible healthcare providers, to champion chronic disease management to reduce healthcare costs, especially in rural and underserved communities. Clearly, poor reimbursement of prescriptions to pharmacies and denial of access to medications is not a sustainable pharmaceutical care model in our country.

States have had to address these issues head on due to lack of regulation at the federal level. On May 24, 2011, H.R. 1971 — Pharmacy Competition and Consumer Choice Act — was introduced in Congress. It had a simple purpose, "To amend the Public Health Service Act to ensure transparency and proper operation of pharmacy benefit managers."

I and fellow pharmacists from Bucks County directly engaged with late Congressman Mike Fitzpatrick on this bill, and he became a co-sponsor of H.R. 1971. Bucks County has a number of community pharmacies, as well as residents that own and operate pharmacies in underserved communities in Philadelphia, so this was an important issue. However, H.R. 1971 and similarly introduced bills, never made it out of their referred Congressional committees for a debate or vote. Such bills would stagnate and die in committee, never to see the light of the house floor of the United States Capitol.

During Supreme Court arguments, PCMA argued that states passing their own laws would interfere with national plan administration uniformity under ERISA. To date, no federal laws have been passed by Congress regulating the matter of appropriate reimbursement for pharmacies by pharmacy benefit managers.

Nevertheless, the 10th Amendment of our beloved constitution states: “The powers not delegated to the United States by the Constitution, nor prohibited by it to the States, are reserved to the States respectively, or to the people.” Briefs to support petitioner, Attorney General Rutledge in this case were submitted by the United States Solicitor General, and the Attorney General of California Xavier Becerra, leading a multi-state amici brief co-signed by attorneys general of 44 states and the District of Columbia. This is a testament to the healthcare services pharmacies provide to our nation.

This landmark decision was not only a win for America’s pharmacies, but also a win for America’s patients.

*Dr. Seema Z. Kazmi, Pharm.D., is a Langhorne-based pharmacist from Morrisville.*

MICHAEL G. FITZPATRICK  
8TH DISTRICT, PENNSYLVANIA

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Washington, DC 20515-3808

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(202) 225-4278  
FAX: (202) 225-9511

DISTRICT OFFICE:  
1717 LANGHORNE NEWTOWN ROAD, SUITE 400  
LANGHORNE, PA 19047  
(215) 579-8102  
FAX: (215) 579-8108

January 04, 2012

Seema Kazmi  


Dear Seema,

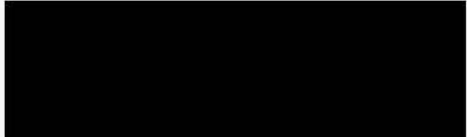
Thank you for contacting me regarding H.R. 1971, the Pharmacy Competition and Consumer Choice Act of 2011. I appreciate you sharing your concerns and I welcome the opportunity to respond.

The Pharmacy Competition and Consumer Choice Act of 2011 was introduced by Representative Cathy McMorris Rodgers [R-WA] on May 24, 2011. This bill would provide transparency and regulation for the large Pharmacy Benefits Managers (PBMs), which independent local pharmacies often have to deal with. I believe that it is important that individuals be able to work directly with doctors and pharmacists to ensure that they have the best medications and care available.

H.R. 1971 is currently being reviewed by the House Education and the Workforce Committee, Subcommittee on Health, Employment, Labor, and Pensions. Should this bill reach the House floor, I will vote with your input in mind.

Again, thank you for contacting me with your concerns. If you have further questions, or need assistance in another matter, please call my office at . Also, sign up for my e-newsletter on my webpage: <http://fitzpatrick.house.gov/contact-me/newsletter>. My e-newsletter will provide you with important updates on legislation in Washington and my work on behalf of the residents of the Eighth District. I'm also on Facebook at [www.facebook.com/RepFitzpatrick](http://www.facebook.com/RepFitzpatrick) and Twitter @RepFitzpatrick.

Sincerely,

  
Mike Fitzpatrick  
Member of Congress



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:21:14 PM

---

Submitted on Monday, February 14, 2022 - 15:20

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: shelyn

Last Name: davis

Affiliation: community care rx

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment: I am appalled that our government is allowing the big 3 chains to literally put independent pharmacies out of business by the practices of preferred pharmacies. I would like to think my voice is heard and I see so much of the true hard workers of this nation being ignored where people who want had outs truly are handed so much free. We have to stand up and start taking care of all people and let them have free choice of where they want to shop. I love my patients and I know them and their health and I feel like I truly help take care of them. Please let me continue to do this by removing the barriers of preferred pharmacies.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/79>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Thursday, February 10, 2022 8:30:32 PM

---

Submitted on Thursday, February 10, 2022 - 20:30

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Sherri

Last Name: Woodward Palasiewicz

Affiliation: Care New England Employee

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

I am writing to you today to express my thoughts and concerns regarding the possible merger of Lifespan and Care new England.

My name is Sherri Woodward. I grew up in the Elmhurst section of Providence and attended St Pius the V school, LaSalle Academy class of 1989 and Rhode Island College.

I have been employed as a Clinical Access Specialist at Butler Hospital for the past 22 ½ years serving patients and their families.

I have several concerns that I hope you, the FTC will take into consideration when making your decision this February..

I believe this merger will have a negative impact on the State of RI, its residents and employees of both entities for the following reasons:

A merger of this size will increase the cost of Health Care for members , affect the cost of insurance for small business already devastated by the pandemic, and increased cost for services to patients.

I believe it will impact the quality of care by employing approximately 23000 staff creating a “factory type” setting for services. In addition

I think it will have a devastating impact on Our lady of Fatima and Roger Williams Hospitals employees who provide crucial services the their communities as well as the patients that they serve.

Thank you for your attention to this matter.

Sincerely , Sherri Woodward

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/11>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Saturday, February 12, 2022 1:05:37 AM

---

Submitted on Saturday, February 12, 2022 - 01:05

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Siddhesh

Last Name: Jagushte

Affiliation: Independent Pharmacy

Full Email Address: [REDACTED]

Confirm Email [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Pbm owning pharmacies is a huge conflict of interest.

It suppress competition and inflates cost for patients, employers and taxpayers. Their draconian tactics such as patient steering, unfair reimbursement rates, non clinical audits, no negotiation contracts and unspecified undisclosed pricing structure which works like a moving target are driving pharmacy competition out, leaving consumer with few to none options and authoritarianism in prescription drug market. FTC also need to look at undisclosed rebates, rebate accumulators, spread pricing, formulary exclusions, DIR fees & DAW9 issues.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/3>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:30:02 PM

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Submitted on Monday, February 14, 2022 - 15:29

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Steve

Last Name: Burney

Affiliation: Foothills Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

On the subject of DIR fees being excessive, here is just one example off of my most recent remittance advice from Prime Therapeutics (BCBS). Please keep in mind that the cost to the pharmacy to dispense a prescription is about \$[REDACTED]. On this particular claim, Prime paid the pharmacy [REDACTED] CENTS for the prescription. They then came back and charged us \$[REDACTED] in DIR fees for that same prescription, or more than [REDACTED] times what they originally paid us.

In what scenario is it OK that the provider be forced to PAY for the privilege of coming to work and taking care of patients? BCBS has the obligation to cover the patients' medications, but they're forcing the pharmacy to assume that obligation (and then some) in a manner that is totally opaque at the time of the transaction.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/91>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 11:45:41 PM

---

Submitted on Sunday, February 13, 2022 - 23:45

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Steve

Last Name: Hoffart

Affiliation: Magnolia Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment: PBM's have created unfair and monopolistic conditions for community pharmacies to serve the needs of their patients. As more and more pharmacies are forced to close due to unnegotiable and continually reduced reimbursement by PBMs, many patients are losing availability to the most accessible and trusted healthcare practitioner they know. PBMs continue to game the Medicare Part D plans and have increased pharmacy DIR fees by 107,000% over the last 10 years : This has resulted in below cost payment on claims, unpredictable reimbursement, and dramatically affects patient access to local pharmacies. The fees charged are wholly unrelated to the metrics measured (eg, fees taken on high dollar arthritis medication when metric measured are diabetes adherence). With no ability to negotiate and demonstrate how contract terms are simply in violation of fair business practices, pharmacies are left to decide between losing money or caring for patients. This problems cuts across all pharmacies, large and small, and the uncontrollable power that 3 companies have over 80% of the covered lives in the US is in violates the long standing business principles of our country. I have countless individual examples occurring daily in my pharmacy that makes taking care of patients virtually impossible.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/47>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 8:29:58 PM

---

Submitted on Sunday, February 13, 2022 - 20:29

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Steve

Last Name: Moore

Affiliation: Condo Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/31>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 2:54:56 PM

---

Submitted on Monday, February 14, 2022 - 14:54

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Ted

Last Name: Okon

Affiliation: Community Oncology Alliance (Executive Director)

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

Pharmacy Benefit Managers (PBMs) have had a devastating impact on the treatment of cancer patients in this country. Increasingly, they dictate what treatment is preferred -- based on the most profitable drugs to them -- and how/where that treatment is delivered. Three PBMs, who own or are owned by the number one, three, and four largest health insurers, control 79% of the U.S. prescription drug market

([https://www.hirc.com/system/files/public/MM\\_PBM%20Landscape\\_2021\\_1.pdf](https://www.hirc.com/system/files/public/MM_PBM%20Landscape_2021_1.pdf)).

Given this consolidation, and consolidation with the nation's top health insurers, PBMs have oligopolistic control of prescription drugs in this country. This lack of market competition allows PBMs and their affiliated health insurers to profit while creating treatment access problems for cancer patients and other Americans with serious diseases.

<https://communityoncology.org/category/horror-stories/>

Additionally, something the Commission should be aware of is that the top PBMs have established offshore drug group purchasing organizations (GPOs) not only as tax havens but to further hide their dealings and profiting on prescription drugs.

I would ask the Commission to allow me to make a brief live (virtual) statement on PBMs and how the lack of market competition is increasingly hurting Americans with medical conditions like cancer.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/71>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:43:10 PM

---

Submitted on Monday, February 14, 2022 - 15:42

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Thomas

Last Name: Duesbout

Affiliation: Millington Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

To: Blue Cross Blue Shield of Michigan

FROM: Thomas Duesbout RPh Millington Pharmacy Millington, MI

DATE: 2/11/2022

RE: Serious Reimbursement Errors by OptumRx

I am writing to make you aware of serious errors in pharmacy reimbursements executed in your health plan by your contracted agent, OptumRx. These errors are producing a significant volume of below-cost reimbursements — approximately 50% of the brand reimbursements I have received from OptumRx since Jan. 1 are well below my acquisition costs for the covered medications.

These losses are unsustainable for my pharmacy.

As you know, OptumRx became the pharmacy benefit manager for Blue Cross Blue Shield of Michigan health plans as of January 1, 2022. However, this transition from your prior PBM, Express Scripts, is not going smoothly, and there are alarming errors in my reimbursements paid by OptumRx.

While I and other Michigan independent pharmacies have reached out to our PSAO and to OptumRx about this serious situation, OptumRx has not responded in any way. I want to ensure that you are fully aware of the magnitude of this crisis and urge you to ensure that Optum Rx corrects these errors as soon as possible.

I know you agree that having a robust network of provider pharmacies across Michigan is vital to your health plan patients. My pharmacy not only dispenses vital medications but is an important destination for in-person counseling and advice. Independent pharmacies are particularly important in rural and other underserved areas of our state, where they often are the only pharmacy and sometimes even the only healthcare provider.

However, this robust provider network is at risk. Like every other independent pharmacist in Michigan, I have made important contributions and concessions to help control healthcare costs in my state. But OptumRx's errors in reimbursement go beyond cost-containment and are so severe as to be punitive. If this situation is not corrected soon, your pharmacy network will fail, and your health plan patients will lose access to the medication and counseling needed to avoid much more expensive health outcomes. In light of OptumRx's lack of response and apparent indifference to the



serious financial harm they are causing, it is critical that BCBSMI address this issue with the utmost urgency and direct OptumRx to correct its flawed reimbursement standards in your plan. We must be allowed to resubmit all affected claims and be compensated for any shortfalls in our reimbursements. Please intervene and direct Optum Rx to address these reimbursement errors. This situation is dire and cannot continue indefinitely. I look forward to your resolution of this matter.

Sincerely,

(Signature)

Thomas Duesbout RPh

Millington Pharmacy



The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/143>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:47:26 PM

---

Submitted on Monday, February 14, 2022 - 15:47

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Tim

Last Name: Redline

Affiliation: Redline Specialty Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

I am a pharmacist and owner of an independent specialty pharmacy in Hastings, Nebraska. Our pharmacy and our patients are impacted every day by PBM practices that steer patients to PBM owned pharmacies and impose retroactive fees based on performance metrics that are unattainable and extremely difficult to understand. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/155>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:07:37 PM

---

Submitted on Monday, February 14, 2022 - 16:07

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Timothy

Last Name: Bond

Affiliation: Bond's Drug Store

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

Dear Sir/Madam,

Please study the practices of PBM's! They have created a monopoly where they set all the rules and pharmacies have no recourse. In our state of WV, a law was passed to require that we receive a fee for commercial insurance prescriptions but the PBM's refused to abide by the law. We (the state) will now need to go to court again. They have become way too big, feel they are above the law, and answer to absolutely no one.

Thank You

Tim Bond

Bond's Drug Store

Washington, WV

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/223>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:27:11 PM

---

Submitted on Monday, February 14, 2022 - 16:26

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Timothy

Last Name: Harvey

Affiliation: Grieb's Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

02/14/2022

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Tim Harvey and I am part owner, and manager at Grieb's Pharmacy in

Darien, CT. I write to express my support

of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the

three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control

so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter

the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this

request to be vitally important because the PBMs will not allow me to send you claw back

information. PBMs have already been using veiled threats against pharmacies who have

submitted comments to CMS on its proposed rule. The FTC is our only hope to bring

transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years.

These staggering increases in claw backs have created an uneven playing field for community

pharmacies like mine. They are also so loosely tied to performance metrics

where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Throughout the pandemic, independent pharmacies, like ourselves, have proven to be vital to their communities. When local chain pharmacies that are affiliated with the PBM's were struggling to find staff to keep their doors open, we were here every day providing our small community of almost 20,000 with 15,000 COVID vaccines as well as their normal prescriptions. We were the only pharmacy in town that stayed open through the entire pandemic. If PBM's are allowed to continue robbing money with arbitrary DIR fees, then pharmacies like us won't be here to serve the community. Please take swift action to end this practice.

Sincerely,  
Tim Harvey

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/259>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:34:04 PM

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Submitted on Monday, February 14, 2022 - 15:33

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Tom

Last Name: DePietro

Affiliation: DePietro's Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

My name is Tom DePietro, owner of DePietro's Pharmacy in Dunmore, PA. I opened my pharmacy in 2012. Shortly after working for a chain pharmacy I quickly realized patients could be better served. Over the past 10 years, I've visited and written letters to numerous elected officials over this topic. I simply can't understand how this industry is allowed to self manage themselves and make their own rules. The actions they take on a daily basis certainly impact patient care across the country. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs. Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/99>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Sunday, February 13, 2022 6:20:59 PM

---

Submitted on Sunday, February 13, 2022 - 18:20

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Tony

Last Name: Rogers

Affiliation: Independent retail Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Competition
- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment: No retail business should sell a product for whatever the price, then have a third party take all your profit back when paying.

This is fraud in the first degree. Many times they take more money than we are paid in total. Tell me how that's legal. Please protect your people.

Thanks

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/27>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 11:59:10 AM

---

Submitted on Monday, February 14, 2022 - 11:58

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Travis

Last Name: Ezell

Affiliation: Pharmacist

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: FTC Operations

Register to speak during meeting: No

Link to web video statement: Arkansas

Submit written comment: Please support this vote, this information is vital to pharmacists trying to have transparency in our industry and curb some of the malicious practices implemented by PBMs.

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/39>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 4:03:05 PM

---

Submitted on Monday, February 14, 2022 - 16:02

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Travis

Last Name: Jackman

Affiliation: Desert Canyon Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment: Please refer to the email that I will send following this submission. PBMs need to be investigated and stopped. They are the true cause of why medications cost so much. Thank you for being willing to look into their practices.

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/195>

**From:** [REDACTED]  
**To:** [OpenMeeting](#)  
**Subject:** PBMs  
**Date:** Monday, February 14, 2022 4:04:23 PM  
**Attachments:** [FTC.pdf](#)

---

FTC,  
Attached is a letter that I would like to share with you about PBMs and what they are doing to our small community pharmacies. Thank you for your time on our behalf.  
Travis Jackman

--  
Travis Jackman, Pharm D

Desert Canyon Pharmacy



02/14/2022

Chair Lina Khan  
Commissioner Rebecca Slaughter  
Commissioner Noah Phillips  
Commissioner Christine Wilson

Federal Trade Commission  
600 Pennsylvania Ave., N.W.  
Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Travis Jackman, owner and pharmacist in charge at Desert Canyon Pharmacy. I am grateful that you are willing to investigate the shady practices of Pharmacy Benefit Managers. Our profession has suffered tremendously from their illegal and abusive practices. Especially now as the most accessible healthcare provider to our community, we need relief from their tactics. As an owner, I am struggling to keep our pharmacy afloat due to claw backs, DIR fees, lopsided contracts and other abusive techniques. One in 4 prescriptions that I fill, is filled at a loss. I pay patients to take their medications. This is obviously not good business, but I have no ability to negotiate contracts. Especially with COVID and the supply issues with our medications, I cannot get access to some drug pricing because there aren't any drugs to purchase at that price. I'm doing all that I can to provide medication and services at a reasonable price. I write today to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,

A handwritten signature in black ink, appearing to read 'Travis Jackman', with a long horizontal line extending to the right.

Travis Jackman, Pharm D

Desert Canyon Pharmacy



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Monday, February 14, 2022 3:59:58 PM

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Submitted on Monday, February 14, 2022 - 15:59

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Tyler

Last Name: Soo

Affiliation: Soo's Drug Store

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic:

- Consumer Protection
- FTC Operations

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

2/14/22

Chair Lina Khan

Commissioner Rebecca Slaughter

Commissioner Noah Phillips

Commissioner Christine Wilson

Federal Trade Commission

600 Pennsylvania Ave., N.W.

Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

I am Tyler Soo, third generation owner of Soo's Drug Store in Jonesboro, Arkansas. Our pharmacy was opened in 1959 by my grandfather, Albert Soo. Our pharmacy has taken care of generations of families in this area for over 50 years, and I am concerned that pharmacies like our own will be extinct in the years to come if the current pharmacy reimbursement landscape is not altered. The numerous ways in which corrupt PBMs steal money from our businesses through clawbacks, DIR fees, and horrible reimbursement contracts should be brought to light.

I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the

most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients. Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,

Tyler Soo  
Owner, Soo's Drug Store

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/187>



**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 6:35:50 PM

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Submitted on Friday, February 11, 2022 - 18:35

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: Van

Last Name: Hodges

Affiliation: Super H Pharmacy

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Competition

Register to speak during meeting: No

Link to web video statement:

Submit written comment:

HI, I own and operate Super H Pharmacy in Bristow, OK and I would like to say that the PBM practices have not only gotten so far out of hand but allowing them to review their own practices makes no sense at all.

If I read this right, 6(b) Study on Pharmacy Benefit Managers' (PBMs)

Relationship with Affiliated and Independent Pharmacies: The Commission will vote on whether to issue Orders to large pharmacy benefits managers to study the competitive impact of contractual provisions, reimbursement adjustments, and other practices affecting drug prices, including those practices that may disadvantage independent or specialty pharmacies.

This is saying that they will put together their own study about how they do business. They have proven time after time that they only are concerned about their bottom lines and their shareholders. There is clearly anti-competitive clauses in the contracts I have to sign with no ability to negotiate the terms of these contracts. They have a take it or leave it approach because they would rather these patients fill their medications through the PBM owned mail order pharmacies. Now how does it make any sense for a company who sets the prices for medications be allowed to also set contracts for the pharmacies that are competing against them for business. My pharmacy is in direct competition with these PBMs who tell me what rates I must take in order to fill medications for their patients who they will steer to the Mail order pharmacy and give the patient incentives to fill at their mail order pharmacy by offering lower copays.

Why do you think these companies spend millions of dollars lobbying in states who try to pass laws to reign in their predatory practices. I am sure many of the US Senators and House Reps have directly benefited from their donations. We have to do what is right for the people of this nation who suffer at the hands of these greedy corporations.

Thanks, Van Hodges

The results of this submission may be viewed at:  
<https://www.ftc.gov/node/1591350/submission/143>

**From:** [Federal Trade Commission via Federal Trade Commission](#)  
**To:** [OpenMeeting](#)  
**Subject:** Form submission from: Speaker Registration and Public Comment Submission Form for February 17, 2022 Open Commission Meeting  
**Date:** Friday, February 11, 2022 11:14:58 AM

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Submitted on Friday, February 11, 2022 - 11:14

Submitted by anonymous user: [REDACTED]

Submitted values are:

First Name: William

Last Name: Keep

Affiliation: The College of New Jersey

Full Email Address: [REDACTED]

Confirm Email: [REDACTED]

Telephone: [REDACTED]

FTC-Related Topic: Consumer Protection

Register to speak during meeting: Yes

Link to web video statement:

Submit written comment:

Dear FTC Chair Khan:

Thank you for the opportunity to comment on the important issue of a proposed rule regarding earnings claims "for business ventures, gig or other work opportunities, or educational, coaching or training offerings." My experience with this topic comes from the multi-level marketing (MLM) industry. In my occasional work as an expert witness with public and private cases over twenty-five years (e.g., U.S. v Gold Unlimited) and my academic and public writings I have noted the considerable and continuing consumer harm caused by ever-present misleading earnings claims. In growing and sustaining an MLM the parent company and top upline distributors bear responsibility for and reap economic rewards from the lack of transparency regarding earnings. The FTC has long held "typical" earnings to be the standard yet that is not the standard commonly used. The shroud over earnings is multi-layered. First, earnings claims presented as "averages" make opaque the underlying, highly skewed earnings distribution. Second, the lack of data on top earner persistence makes the probability of success unknowable. By top earner persistence I mean the persistence of the same individuals occupying top earner positions year-after-year. Third, the structural economic self-interest of recruiting others incentivizes unverifiable and misleading person-to-person messages regarding the potential and/or probability of positive earnings, And, finally, the lack of information of typical out-of-pocket expenses in pursuit of earnings further obscures the amount of net earnings. To remove this multi-layered shroud Rule language will need to expose the highly skewed underlying earnings, the persistence of top earners, and the typical expenses incurred (including training, events, etc.), while shifting accountability for accurate on ongoing statements regarding earning to the parent company and top spline distributors. I welcome the opportunity to share my thoughts at the meeting.

With regards,

William Keep

The results of this submission may be viewed at:

<https://www.ftc.gov/node/1591350/submission/59>



**From:** [REDACTED]  
**To:** [OpenMeeting](#)  
**Subject:** PBM transparency  
**Date:** Monday, February 14, 2022 4:15:41 PM  
**Attachments:** [Scanned from a Lexmark Multifunction Product02-14-2022-151046.pdf](#)

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Hello,

Please find the enclosed letter for your review. I can be reached via phone [REDACTED] or email: [REDACTED]. I appreciate your time on this matter.

Sincerely,

Yvonne M. Margo, RPh

February 14, 2022

Chair Lina Khan  
Commissioner Rebecca Slaughter  
Commissioner Noah Phillips  
Commissioner Christine Wilson

Federal Trade Commission  
600 Pennsylvania Ave., N.W.  
Washington, D.C. 20580

Dear Chair Khan and Commissioners Slaughter, Phillips, and Wilson:

My name is Yvonne M. Margo, RPh. I am an independent pharmacy owner in Donna, TX. PBM's have and continue to make it very difficult to run our small business in South Texas. Their lack of transparency, their take-it-or-leave-it contracts and their unattainable performance metrics have made it next to impossible to survive. I write to express my support of the Federal Trade Commission's study of Pharmacy Benefit Managers, and specifically, the three biggest, Aetna, Cigna, and UnitedHealth Group's vertically integrated PBMs that control so much of the marketplace. The take-it-or-leave-it contracts that the PBMs force on me to enter the marketplace and get into one of their networks and the associated fees are appalling.

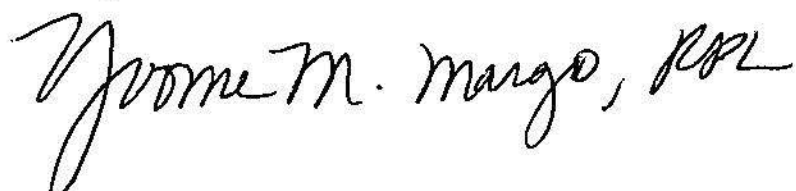
I encourage you to ask PBM's for a sample of individual pharmacy claw backs. I believe this request to be vitally important because the PBMs will not allow me to send you claw back information. PBMs have already been using veiled threats against pharmacies who have submitted comments to CMS on its proposed rule. The FTC is our only hope to bring transparency to the PBMs' manipulative and market foreclosing practices.

As I am sure the information will show you, my claw backs have risen drastically over the years. These staggering increases in claw backs have created an uneven playing field for community pharmacies like mine. They are also so loosely tied to performance metrics where I could be the most perfect pharmacy in the land and still face crippling claw backs from the PBMs.

Finally, I would also encourage the FTC's study to pay close attention to specialty drug limitations placed on pharmacies like mine, patient steering to both retail and mail order pharmacies owned by the big three PBMs (especially in the case of specialty drugs), administrative fees and charges, negative reimbursements (where I'm paid less than what it costs to acquire the drug from a wholesaler), PBM's control of access to the market through their preferred networks, malicious use of, and associated costs of audits, discriminatory reimbursement practices where the PBM pays its own affiliated pharmacy more, and how all of it results in harm to my patients.

Independent pharmacies are facing many economic challenges, most of which are the result of the anticompetitive nature of the PBMs. I want enforcement that will level the playing field and I hope this study will lead to such enforcement.

Thank you,

A handwritten signature in black ink that reads "Yvonne M. Margo, RPh". The signature is written in a cursive, flowing style.