- Q: Can Part D plans restrict access to certain Part D drugs to "specialty" pharmacies within their Part D networks?
- A: CMS clarifies that Part D plans may not restrict access to certain Part D drugs to "specialty" pharmacies within their Part D network in such a manner that contravenes the convenient access protections of §1860D-4(b)(1)(C) of the Social Security Act and 42 CFR §423.120(a). Specifically, Part D plans may not restrict access to Part D drugs by limiting distribution through a subset of network pharmacies, except when necessary to meet FDA limited distribution requirements or to ensure the appropriate dispensing of Part D drugs that require extraordinary special handling, provider coordination, or patient education when such extraordinary requirements cannot be met by a network pharmacy. Therefore, Part D plans may not restrict access based solely on the placement of a Part D drug in a "specialty/high cost" tier because this tier placement alone is not indicative of any special requirements associated with such drug.

Part D plans may specify, on a drug by drug basis, reasonable requirements for network pharmacies to ensure appropriate handling and dispensing of a particular Part D drug that requires special attention. These drug by drug requirements should <u>only</u> apply to special handling and dispensing that may be required for a particular "specialty" drug and not to reimbursement or other standard contracting terms and conditions. Requiring pharmacies to accept different reimbursement rates for certain "specialty" drugs is inconsistent with standard industry practice, could result in plans setting reimbursement rates below the market rates set in their standard contracts, and could be used to subvert the convenient access standards.

In addition, Part D plans may not require network pharmacies to qualify as a "specialty" pharmacy in order to dispense any drug that requires special attention if the network pharmacy is capable of appropriately dispensing the particular Part D drug or drugs in question. The convenient access standards dictate that "specialty" pharmacies be used to supplement network pharmacy access when necessary and not otherwise restrict it.