



**April 15, 2026**

**Comments Submitted to the Department of Labor, Employee Benefits Security Administration**

**Re: Proposed Rule: Improving Transparency Into Pharmacy Benefit Manager Fee Disclosure**

**Docket ID: EBSA-2026-0001-0001**

**Submitted by: Consumer Action for a Strong Economy (CASE)**

To Whom It May Concern:

On behalf of Consumer Action for a Strong Economy (CASE), a leading voice for pro-growth, free-market policies that support American consumers, I am writing in response to the Employee Benefits Security Administration's request for comment on the Proposed Rule titled "Improving Transparency into Pharmacy Benefit Manager Fee Disclosure."

The Department's proposed rule addresses a long-overdue issue: the growing power of pharmacy benefit managers (PBMs) and their role in driving up prescription drug costs. PBMs were originally created to negotiate better prices on behalf of patients. However, over time, they have become increasingly powerful and have dominated the United States healthcare system. Today, the three largest PBMs control almost [80% of the U.S. prescription drug market](#) and are vertically integrated with major healthcare insurers, giving these healthcare intermediaries outsized influence over pricing and patient access.

The increasing consolidation within the PBM structure has given middlemen significant leverage over our drug pricing system, enabling them to squeeze out competition. Their vertical integration with health insurance companies enables them to steer patients toward affiliated pharmacies, leaving independent pharmacies—often the only providers in underserved and rural communities—struggling to survive. Between 2013 and 2022, [about ten percent](#) of independent retail pharmacies in rural America closed. In some areas, when the only local pharmacy shut down, patients were left with limited and more expensive options, forcing some to stop taking their medications altogether. All the while, the three largest PBMs generated more than [\\$7.3 billion in revenue](#) from dispensing higher-cost drugs, underscoring how the system rewards higher prices over patient access.

The recent passage of the [Consolidated Appropriations Act of 2026](#) was a win for patients as it reinforced the need for stronger oversight of PBMs by establishing new disclosure requirements, rebate pass-through provisions, and enhanced reporting obligations. These provisions promote greater price transparency by requiring PBMs to provide employer-sponsored health plans with detailed, regular reporting on prescription drug spending, including gross and net costs, formulary pricing decisions, and any systems set up that may unintentionally steer patients towards affiliated pharmacies. Additionally, these provisions will help ensure that patients can access clear summary information about how their plan handles prescription drug spending.

The Department of Labor should update its proposal to fully align employer-sponsored healthcare plans with these requirements.

In addition to these reforms and the DOL's proposed rule, there is still more work to be done to ensure PBM practices do not continue to drive up costs and limit access to medications. The Trump administration should work with Congress to advance additional reforms, including those outlined by the [Senate Finance Committee](#), such as delinking PBM compensation from drug rebates and ensuring that all negotiated savings are passed directly to patients. Policymakers should also prioritize expanding access options, such as enabling direct-to-consumer (DTC) drug sales, which allow patients to purchase medications directly from manufacturers and bypass PBMs entirely. Together, these solutions will help lower costs, increase transparency, and ensure patients can access the medications they need more affordably.

CASE applauds the Department of Labor for ensuring this issue is a top priority. Greater transparency and accountability in the PBM system are essential to restoring fairness in the prescription drug market. Aligning the rule with the updated law will help ensure that patients—not middlemen—benefit from lower drug costs and increased access to care.

Thank you so much for your time and consideration on this important issue.

Sincerely,

Gerard Scimeca, Chairman  
Consumer Action for a Strong Economy