



Per the HHS OIG, Medicare spending could have been 18-31% lower and seniors could have paid 12-22% less in copays if biosimilars were used more frequently in Medicare Part D. There are opportunities for lawmakers to boost biosimilar adoption and provide these savings to taxpayers and patients.¹

Increase Patient Access to Lower-Cost Biosimilar Medicines

Cosponsor the BIOSIM Act

(H.R. 2815)

Encourage physician use of
lower-cost biosimilars

- Currently, providers in Medicare Part B are reimbursed for administering biosimilars at ASP+6% of the brand-name biologic.
- BIOSIM Act would increase reimbursement for biosimilars by 2% to ASP+8% and would apply only when the biosimilar's ASP is lower than the brand-name biologic's ASP.
- Currently, biosimilars have, on average, a nearly 50% lower ASP compared to the price of the reference biologic at the time of biosimilar launch.²
- Introduced by Reps. Kurt Schrader (D-OR) and Adam Kinzinger (R-IL).

Cosponsor the Biosimilars Shared Savings Demo

(S. 1427/H.R. 2869)

Incentive for physicians, lower costs for
patients, and savings for medicare

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

Cosponsor the Ensuring Access to Lower-Cost Medicines for Seniors Act

(H.R. 2846)

Establishes a new specialty
tier for biosimilars

- Ensures seniors are able to access and fully benefit from low-cost generics and biosimilars through the Medicare Part D program.
- H.R. 2846 would ensure new generics and biosimilars are covered upon launch, provide that generics are placed only on generic tiers with lower cost-sharing and not higher brand cost-sharing tiers, and establish a new specialty tier for biosimilars and specialty generics.
- Introduced by Reps. David McKinley (R-WV) and Ann Kuster (D-NH).



1. HHS OIG. March 2022. "Medicare Part D and Beneficiaries Could Realize Significant Spending Reductions With Increased Biosimilar Use"
2. AAM. April 2022. "Analysis of Medicare ASP File"

See how you can increase patient access to lower-cost biosimilar medicines at biosimilarscouncil.org/advocacy.