



NICA'S 2025 ADVOCACY WINS



In 2025, NICA's advocacy work delivered meaningful wins for non-hospital infusion providers by elevating provider voices, shaping policy debates, and driving real-world results at the state and federal levels. Guided by member priorities, NICA advanced reforms that improve patient access, push back on harmful policies, and protect the sustainability of community-based infusion care nationwide.

STATE ADVOCACY IMPACT

Enacting Provider-Friendly and Patient-Centered Laws

- **Pharmacy Benefit Manager (PBM) Reform**, including licensing, spread pricing bans, rebate pass-throughs, de-linking, and transparency reporting (CA, CO, IA, LA, ME, NE, UT)
- **Step therapy** (AK, CT, NJ, NM, NY), **non-medical switching and prior authorization** (AK, AZ, CA, IA, MT, ND, NM, OK), and **copay accumulator/maximizer** (IA, IN, MD, ND, NJ) protections to protect patients from excessive utilization management
- Restrictions on **white bagging and brown bagging** to preserve safe, provider-administered care (MS, NE)

Defending Against Price-Setting and State PDAB Expansion

- Organized **in-person Hill Days in Illinois and Michigan** that directly contributed to stalled harmful legislation that would have established Prescription Drug Affordability Boards (PDABs) with the authority to impose reimbursement cuts through Upper Payment Limits (UPLs).
- Supported **veto, repeals, or stalled movement of PDAB and other government price-setting proposals** in Virginia, New Hampshire, Nevada, and Illinois.

AMPLIFYING THE PROVIDER VOICE AND KEEPING PROVIDERS INFORMED

- Placed **infusion provider op-eds** nationwide on PBM reform, 340B, step therapy, and reimbursement policy, elevating real-world provider perspectives in state and national policy debates.
- Launched the **State Advocacy Bulletin**, a monthly snapshot of key state legislative activity designed to keep NICA members informed and engaged.
- Developed **practical advocacy tools** for members, including the August Recess Toolkit, guidance for legislative testimony and meetings, and a comprehensive guide to the One Big Beautiful Bill Act.

FEDERAL ADVOCACY IMPACT

Shaping National Policy Conversations

- Communicated NICA concerns in major **PBM reform** efforts, including the PBM Act, PBM Reform Act, and PBM Transparency Act.
- Elevated **utilization management legislation**, including the Safe Step Act, HELP Copays Act, and Improving Seniors' Timely Access to Care Act.
- Led digital advocacy around the **Protecting Patient Access to Cancer and Complex Therapies Act (PACTA)** to push back against reimbursement cuts tied to Medicare drug negotiations, including 1,650 letters to key senators, 583,324 content views, and 11,885 clicks to NICA ads. In addition, NICA co-authored a white paper on the issue with Avalere Health.
- Led coordinated digital advocacy campaign on **state and federal 340B reform**, generating more than 90,000 content views and driving over 10,500 constituent letters and calls to more than 300 lawmakers.

Protecting Reimbursement and Pharmaceutical Research Funding

- Secured inclusion of a **Medicare Physician Fee Schedule payment increase** in the One Big Beautiful Bill Act.
- Helped **block proposed NIH funding cuts** in FY2025 spending bills.

Engaging Directly with Policymakers:

- Hosted a **Federal Hill Day** with NICA Elite Members, holding 20+ meetings with lawmakers from 10 states.
- Submitted formal **CMS and federal agency comments** on Medicare drug pricing, MFN proposals, PBM transparency, and pharmaceutical tariffs.

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NICA

BY THE NUMBERS

61

**Grassroots
advocacy
campaigns
launched** across
state and federal
issues

6,460

**Letters sent to
lawmakers by NICA
members**

6,000

**Advocacy content
views** across digital
efforts

52

**Formal testimonies or comment letters submitted to
legislative committees and regulatory bodies**

600,000+

**Advocacy content views across digital
efforts**

838

**Individual bills
tracked** across NICA
policy areas

In 2025, NICA delivered policy wins that protect patient access, defend fair reimbursement, and ensure community-based infusion centers remain a sustainable, high-value site of care.

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