

119TH CONGRESS  
1ST SESSION

# S. 2770

To amend title XVIII of the Social Security Act to ensure appropriate cost-sharing for chronic care drugs under Medicare part D.

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## IN THE SENATE OF THE UNITED STATES

SEPTEMBER 11, 2025

Mr. CORNYN (for himself, Ms. ROSEN, Mr. TILLIS, and Mr. WELCH) introduced the following bill; which was read twice and referred to the Committee on Finance

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## A BILL

To amend title XVIII of the Social Security Act to ensure appropriate cost-sharing for chronic care drugs under Medicare part D.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Share the Savings with  
5 Seniors Act”.

6 **SEC. 2. APPROPRIATE COST-SHARING FOR CHRONIC CARE**  
7 **DRUGS UNDER MEDICARE PART D.**

8 (a) IN GENERAL.—Section 1860D–2 of the Social  
9 Security Act (42 U.S.C. 1395w–102) is amended—

1 (1) in subsection (b)—

2 (A) in paragraph (1)(A), in the matter  
3 preceding clause (i), by striking “and (9)” and  
4 inserting “, (9), and (10)”;

5 (B) in paragraph (2)(A), in the matter  
6 preceding clause (i), by striking “and (9)” and  
7 inserting “, (9), and (10)”;

8 (C) by adding at the end the following new  
9 paragraph:

10 “(10) COST-SHARING FOR CHRONIC CARE  
11 DRUGS.—

12 “(A) IN GENERAL.—For plan years begin-  
13 ning on or after January 1, 2027, in the case  
14 of a chronic care drug, the following shall  
15 apply:

16 “(i) For costs below the annual de-  
17 ductible specified in paragraph (1), cost-  
18 sharing for such drug shall not exceed the  
19 net price of such drug.

20 “(ii) Subject to subparagraph (B), for  
21 costs above the annual deductible specified  
22 in paragraph (1) and below the out-of-  
23 pocket threshold specified in paragraph  
24 (4), any coinsurance amount for such drug

1           shall be based on a percentage of the net  
2           price of such drug.

3           “(B) EXCEPTION.—The requirement under  
4           subparagraph (A)(ii) shall not apply to a chron-  
5           ic care drug under a prescription drug plan if  
6           the cost-sharing amount for such drug under  
7           such plan is based on a copayment that is not  
8           tied to a percentage of a drug price (such as  
9           the negotiated price, list price, or wholesale ac-  
10          quisition cost), a drug benchmark price (such  
11          as the average wholesale price), or a drug cost.

12          “(C) DEFINITIONS.—In this paragraph:

13                 “(i) CHRONIC CARE DRUG.—The term  
14                 ‘chronic care drug’ means a covered part D  
15                 drug that is included under any of the fol-  
16                 lowing United States Pharmacopeia Con-  
17                 vention (USP) categories and classes of  
18                 drugs, as included in the most recent  
19                 version of the USP Medicare Model Guide-  
20                 lines:

21                         “(I) Blood glucose regulators,  
22                         other than insulins.

23                         “(II) Anti-inflammatories, in-  
24                         haled corticosteroids.

1 “(III) Bronchodilators, anticho-  
2 lergic.

3 “(IV) Bronchodilators,  
4 sympathomimetic.

5 “(V) Respiratory tract agents,  
6 other.

7 “(VI) Anticoagulants.

8 “(VII) Cardiovascular agents,  
9 other.

10 “(VIII) Any category or class  
11 identified by the Secretary or USP as  
12 a successor to the categories and  
13 classes described in subclauses (I)  
14 through (VII) based on the most re-  
15 cent USP Medicare Model Guidelines  
16 at the time of such identification.

17 “(ii) NET PRICE.—The term ‘net  
18 price’ means the negotiated price of the  
19 drug net of all price concessions origi-  
20 nating from manufacturers that are re-  
21 ceived or expected to be received by the  
22 plan or pharmacy benefit manager on be-  
23 half of the plan for such product and that  
24 are not already reflected in the negotiated  
25 price.”; and

1           (2) in subsection (c), by adding at the end the  
2 following new paragraph:

3           “(7) COST-SHARING FOR COVERED CHRONIC  
4 CARE DRUGS.—The coverage is provided in accord-  
5 ance with subsection (b)(10).”.

6           (b) CONFORMING AMENDMENTS TO COST-SHARING  
7 FOR LOW-INCOME INDIVIDUALS.—Section 1860D-  
8 14(a)(1)(D)(iii) of the Social Security Act (42 U.S.C.  
9 1395w-114(a)(1)(D)(iii)) is amended by adding at the  
10 end the following new sentence: “For plan year 2027 and  
11 subsequent plan years, the copayment amount applicable  
12 under the first sentence of this subclause for a chronic  
13 drug (as defined in section 1860D-2(b)(10)(B)) furnished  
14 to the individual may not exceed the applicable cost-shar-  
15 ing for such drug under the prescription drug plan or MA-  
16 PD plan in which the individual is enrolled.”.

17           (c) REGULATIONS.—Notwithstanding any other pro-  
18 vision of law, the Secretary of Health and Human Services  
19 shall initially implement the amendments made by this  
20 section through interim final regulations.

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