



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 1850</b>		DATE: <b>2/12/2026</b>	
COMMITTEE: <b>Health and Mental Health</b>			
<b>TESTIFYING:</b> <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>AMY MITCHELL</b>		PHONE NUMBER: <b>573-259-0314</b>	
BUSINESS/ORGANIZATION NAME: <b>MO PBC</b>		TITLE: <b>PRESIDENT</b>	
ADDRESS: <b>8600 HWY F</b>			
CITY: <b>CUBA</b>		STATE: <b>MO</b>	ZIP: <b>65453</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/12/2026 12:00 AM</b>	
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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>ANTHONY DESHA</b>		PHONE NUMBER: <b>573-826-4151</b>	
BUSINESS/ORGANIZATION NAME: <b>SUMMIT PHARMACY</b>		TITLE: <b>OWNER</b>	
ADDRESS: <b>140 NORTHSTAR DR</b>			
CITY: <b>HOLTS SUMMIT</b>		STATE: <b>MO</b>	ZIP: <b>65201</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/12/2026 12:00 AM</b>	
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<b>WITNESS NAME</b>		
<b>BUSINESS/ORGANIZATION:</b>		
WITNESS NAME: <b>ANTHONY DESHA</b>		PHONE NUMBER: <b>573-826-4151</b>
BUSINESS/ORGANIZATION NAME: <b>FLOW's PHARMACY</b>		TITLE: <b>OWNER</b>
ADDRESS: <b>1506 E. BROADWAY</b>		
CITY: <b>COLUMBIA</b>		STATE: <b>MO</b>
		ZIP: <b>65201</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/12/2026 12:00 AM</b>
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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>ARNIE "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE: <b>In-Person</b>	SUBMIT DATE: <b>2/12/2026 11:59 PM</b>	

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**I am in Support of this Bill and having Audits of the industry and saving Small Family-Owned Community Pharmacies. "Big-Pharma" NEEDS to play nice!**



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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>BRANDON GREGORY</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE: <b>In-Person</b>		SUBMIT DATE: <b>2/11/2026 3:52 PM</b>
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Great start to changing management of interactions between providers and PBM's, allowing pharmacies a fighting change to continue serving communities. Need to be mindful of language moving forward to any changes, ensuring no potential conflict with ERISA or other concerns that other states' similar bills have been held up legally for some of these issues.



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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>BRANDON GREGORY</b>		PHONE NUMBER: <b>417-855-1085</b>	
BUSINESS/ORGANIZATION NAME: <b>GOOD GRACES PHARMACY</b>		TITLE: <b>OWNER-PHARMACIST</b>	
ADDRESS: <b>857 E. MAIN ST., STE 3</b>			
CITY: <b>WILLOW SPRINGS</b>		STATE: <b>MO</b>	ZIP: <b>65703</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/12/2026 12:00 AM</b>	
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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>HENRIO THELEMAQUE</b>		PHONE NUMBER: <b>678-799-4815</b>	
REPRESENTING: <b>MISSOURI PHARMACY ASSOCIATION</b>		TITLE:	
ADDRESS: <b>221 EAST CAPITOL AVENUE</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL: <b>henrio@ttglobby.com</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>2/12/2026 8:22 AM</b>	

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**We support the Representatives efforts in trying to pass these pieces of legislation.**



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<b>WITNESS NAME</b>		
<b>REGISTERED LOBBYIST:</b>		
WITNESS NAME: <b>JACOB SCOTT</b>		PHONE NUMBER:
REPRESENTING: <b>MISSOURI STATE MEDICAL ASSOCIATION; MISSOURI ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS</b>		TITLE: <b>DIRECTOR OF LEGISLATIVE AFFAIRS</b>
ADDRESS: <b>113 MADISON ST</b>		
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>
		ZIP: <b>65102</b>
EMAIL: <b>jscott@msma.org</b>	ATTENDANCE: <b>In-Person</b>	SUBMIT DATE: <b>2/12/2026 9:27 AM</b>
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In support of



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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>JERRY CALLAHAN</b>		PHONE NUMBER: <b>314-609-2605</b>	
BUSINESS/ORGANIZATION NAME: <b>RETAIL PHARMACY</b>		TITLE: <b>RPH OWNER</b>	
ADDRESS: <b>16442 AUDUBON VILLAGE DRIVE</b>			
CITY: <b>WILDWOOD</b>		STATE: <b>MO</b>	ZIP: <b>63040</b>
EMAIL: <b>jerryc81552@gmail.com</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>2/11/2026 2:25 PM</b>	

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**Patients can't afford their prescription medications, businesses are overpaying for prescription coverage for their employees, and pharmacies are closing. We need transparency and proper reimbursement to the pharmacies as many times we are expected to fill prescriptions below the cost of the medication, let alone covering the cost to dispense. Patients are asked to go elsewhere so pharmacies can stay in business. Don't believe the PBMs when they tell you this will increase premiums. States that have passed PBM reforms have seen a smaller increase or none at all vs states that have not had PBM reform.**



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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>JORGEN SCHLEMEIER</b>		PHONE NUMBER: <b>573-634-4876</b>	
REPRESENTING: <b>MISSOURI PHARMACY BUSINESS COUNCIL</b>		TITLE:	
ADDRESS: <b>213 EAST CAPITOL AVENUE</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/12/2026 12:00 AM</b>	
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<b>WITNESS NAME</b>		
<b>BUSINESS/ORGANIZATION:</b>		
WITNESS NAME: <b>MARTIN HINTELTRONG</b>		PHONE NUMBER: <b>636-629-2022</b>
BUSINESS/ORGANIZATION NAME: <b>THE MEDICINE SHOPPE #0961</b>		TITLE: <b>PHARMACIST/OWNER</b>
ADDRESS: <b>920 PLAZA DRIVE SUITE H</b>		
CITY: <b>ST. CLAIR</b>		STATE: <b>MO</b>
		ZIP: <b>63077</b>
EMAIL: <b>0961@medicineshoppe.com</b>	ATTENDANCE: <b>In-Person</b>	SUBMIT DATE: <b>2/11/2026 4:51 PM</b>

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Since 2022 well over six thousand pharmacy's have closed. That averages to 6 pharmacy's a day. We need PMB reform as the fox owns and is guarding the hen house. If not fixed the only pharmacy's left will be the ones they own or control, We need fiduciary responsibility now as they are not looking out for the customer, your constituents. I will be there and am asking to speak at this hearing



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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>MARTIN HINTERLONG</b>		PHONE NUMBER: <b>636-624-2027</b>	
BUSINESS/ORGANIZATION NAME: <b>THE MEDICINE SHOPPE</b>		TITLE: <b>PHARMACIST</b>	
ADDRESS: <b>920 PLAZA DRIVE, SUITE H</b>			
CITY: <b>ST. CLAIR</b>		STATE: <b>MO</b>	ZIP: <b>63077</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/12/2026 12:00 AM</b>	
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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>MARK DALTON</b>		PHONE NUMBER: <b>314-644-4800</b>	
REPRESENTING: <b>MID-AMERICA CARPENTERS REGIONAL COUNCIL</b>		TITLE:	
ADDRESS: <b>1401 HAMPTON AVE.</b>			
CITY: <b>ST. LOUIS</b>		STATE: <b>MO</b>	ZIP: <b>63139</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/12/2026 12:00 AM</b>	
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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>PHILLIP CHRISTOFANELLI</b>		PHONE NUMBER:	
REPRESENTING: <b>PCMA</b>		TITLE: <b>SENIOR DIRECTOR , STATE AFFAIRS</b>	
ADDRESS:			
CITY: <b>ST.CHARLES</b>		STATE: <b>MO</b>	ZIP: <b>63385</b>
EMAIL: <b>pchristofanelli@pcmanet.org</b>	ATTENDANCE: <b>In-Person</b>	SUBMIT DATE: <b>2/12/2026 9:19 AM</b>	
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Committee on Health and Mental Health  
 Missouri House of Representatives  
 201 W. Capitol Ave.  
 Jefferson City, MO 65101

**RE: Opposition to HB 1850 and HB 1975**

**Chairman Stinnett and Members of the Committee:**

Thank you for the opportunity to submit testimony regarding House Bills 1850 and 1975. I am writing to express significant concerns about the negative impact these proposals would have on employers, patients, and the affordability of prescription drug coverage in Missouri.

As you consider these bills, I urge the Committee to closely examine the extensive cost increases and structural disruptions they would impose on the state's health care system.

The Pharmaceutical Care Management Association (PCMA) is the national association of America's pharmacy benefit managers (PBMs). PBMs are hired by employers, unions, government programs and others to drive down prescription drug costs and administer prescription drug plans for more than 289 million Americans. Before getting into specifics on HBs 1850 and 1975, there are five things to know about PBMs:

- PBMs are the only part of the drug supply chain whose primary role is to lower prescription drug costs. On average, they save patients and families about \$1,154 per person each year.
- PBMs are extremely effective at reducing prescription drug costs for employers and patients, which is why some industries that profit from high drug prices oppose them.
- PBMs work for employers, unions, and government programs who have the ultimate say on what a drug benefit looks like. PBMs carry out the chosen plan by negotiating lower drug prices, processing claims, performing safety checks, and handling related services.
- For the enormous savings and value that PBMs provide, they operate on thin profit margins.
- Hiring a PBM is optional. Employers, unions, government programs, and others choose to use PBMs because they help lower drug costs and manage prescription benefits more efficiently.

**HB 1850: Increased Mandates and Higher Prescription Drug Costs**

HB 1850 would mandate minimum dispensing fees and restrict the tools that pharmacy benefit managers (PBMs) use to reduce drug costs for patients and employers.. Mandating minimum dispensing fees will significantly drive up costs for patients and those paying for prescription

drug coverage without improving care. Based on a PCMA cost analysis, HB 1850 is projected  
Pharmaceutical Care Management Association  
505 9th Street, NW, 10th Floor  
Washington, DC 20004  
www.pcmanet.org

to tax prescription drug costs in Missouri by more than \$7 billion over the next 10 years—an unnecessary and avoidable burden on families, small businesses, and taxpayers. Mandating minimum dispensing fees would cause prescription drug spending to surge across the private sector. Furthermore, limiting PBMs' ability to design pharmacy networks would diminish employer choice, reduce plan flexibility, and undermine competition that currently benefits Missouri consumers.

#### **HB 1975: Expanded Litigation Risk and Reduced Employer Discretion**

HB 1975 would impose new fiduciary mandates that significantly expand employers' litigation risk and liability costs. By inserting additional and unnecessary regulatory requirements into the administration of pharmacy benefits, this bill would diminish employers' ability to structure prescription drug coverage that meets the unique needs of their workforce.

PCMA estimates that HB 1975 would increase prescription drug costs by more than \$3.9 billion over the next decade, placing yet another massive and unnecessary financial strain on Missouri's health care system.

#### **Federal ERISA Preemption**

These bills pose clear Constitutional concerns and would likely result in costly litigation for the state. ERISA broadly preempts "any and all State laws insofar as they may now or hereafter be related to any employee benefit plan." 29 U.S.C. § 1144(a). This ensures that ERISA plan benefits are governed by a uniform body of federal law and prevents an inconsistent patchwork of state laws that would make plan sponsorship costly and burdensome.

It is widely recognized that ERISA preempts state laws that regulate ERISA plan "reporting, disclosure, and recordkeeping," because such matters "are central to, and an essential part of, the uniform system of plan administration contemplated by ERISA." *Gobeille v. Liberty Mut. Ins. Co.*, 577 U. S. 312, 323 (2016). In *Gobeille*, the U.S. Supreme Court held that a Vermont law requiring plans and third-party administrators ("TPAs") to report plan-related data to the state's health care data base was preempted. *Id.* at 320. The Court's opinion is also controlling with regard to any attempt by the DOI to compel reporting of ERISA plan data from such plans directly or indirectly via their TPAs/PBMs.

At minimum, clarifying language should be included to limit application of these measures to the state-regulated commercial marketplace.

Pharmaceutical Care Management Association  
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Washington, DC 20004  
www.pcmanet.org

#### **Protecting Employer Flexibility and Patient Affordability**

PBMs currently support access to affordable, high quality prescription drug coverage for more than 289 million Americans. They offer employers a wide array of tools to design cost effective pharmacy networks tailored to the needs of their employees. Employers—not the government—are best positioned to determine how to structure these benefits.

Lower drug costs are achievable, but not if well-meaning proposals like HB 1850 and HB 1975 continue to pile costs onto the system and raise the very costs we are trying to control.

For these reasons, I respectfully urge the Committee to oppose both measures.

Thank you for your consideration. I welcome the opportunity to discuss these issues further and provide any additional information the Committee may find helpful.

Sincerely,

Philip Christofanelli

Senior Director, State Affairs

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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>SARAH BERRY</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>2/10/2026 12:40 PM</b>	
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To the Members of the Committee:

I submit this testimony in opposition to House Bill 1850 because, while it contains policy provisions framed as pharmacy and consumer protections, it is structured in a manner that creates substantial constitutional and federal preemption risk and authorizes state programs without adequate statutory standards.

First, HB 1850 regulates the administration and disclosure architecture of prescription drug benefits in ways that conflict with federal law governing employee benefit plans. Several provisions mandate disclosures, audit standards, and legal duties that materially affect plan administration and the relationships among plan sponsors, pharmacy benefit managers, and pharmacies. When state law crosses from consumer protection into the governance and administration of benefit plans, it triggers ERISA preemption and Supremacy Clause invalidation.[1]

Second, the bill imposes state-law fiduciary duties on pharmacy benefit managers by statute. Fiduciary status is a consequential legal designation that expands liability and alters contractual risk allocation. Imposing such duties broadly, without clear standards or transition provisions, invites Contract Clause and due-process challenges and further collides with federally defined fiduciary frameworks.[2]

Third, HB 1850 compels disclosure of highly sensitive pricing and rebate information to state regulators without establishing strong statutory confidentiality and records-handling safeguards. This creates exposure involving proprietary business information, trade secrets, and unintended public release risks—an avoidable flaw that will invite litigation and undermine regulatory credibility.[3]

Finally, the bill creates a “critical access care pharmacy program” without defining eligibility criteria, standards, or oversight. Establishing a government assistance program without statutory limits invites arbitrary administration and unequal treatment, violating basic constitutional norms of accountable legislation.[4]

Missouri can address PBM practices without enacting constitutionally defective statutes that will be immediately challenged and potentially enjoined. HB 1850, as drafted, exposes the state to costly litigation and uncertain enforcement while failing to provide the standards and safeguards required for lawful regulation.

For these reasons, I respectfully urge the committee to oppose House Bill 1850.

**Rights-based governance requires that laws be written with standards, safeguards, and accountability. HB 1850 instead replaces transparent rulemaking with sweeping mandates, rewrites private legal duties by fiat, and invites federal preemption. Missouri should not pass legislation that cannot be lawfully enforced.**

**FOOTNOTES:**

[1] U.S. Const. art. VI, cl. 2; ERISA §514, 29 U.S.C. §1144; *Gobeille v. Liberty Mut. Ins. Co.*, 577 U.S. 312 (2016)

[2] U.S. Const. art. I, §10; Mo. Const. art. I, §13; *Energy Reserves Group, Inc. v. Kansas Power & Light Co.*, 459 U.S. 400 (1983); *Rutledge v. Pharmaceutical Care Mgmt. Ass'n*, 592 U.S. \_\_\_\_ (2020) (limits of PBM regulation vis-à-vis plan administration)

[3] *Ruckelshaus v. Monsanto Co.*, 467 U.S. 986 (1984) (trade secrets as protectable property interests); Mo. Const. art. I, §10

[4] Mo. Const. art. III, §1; *State ex rel. Missouri Growth Ass'n v. State Tax Comm'n*, 998 S.W.2d 786 (Mo. banc 1999)



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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>SHANNON COOPER</b>		PHONE NUMBER: <b>660-890-1432</b>	
REPRESENTING: <b>AMERICA'S HEALTH INSURANCE PLANS, MISSOURI INSURANCE COALITION</b>		TITLE:	
ADDRESS: <b>208 MADISON</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/12/2026 12:00 AM</b>	
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