DCAN
DERMA CARE ACCESS NETWORK

ADVOCACY TOOLKIT

for Medicare Drug Price Negotiations



BACKGROUND

The Inflation Reduction Act, or IRA passed in 2022, gave the Centers for Medicare and Medicaid Services, or CMS, the authority for the federal government to negotiate the prices that Medicare pays for selected prescription medications. Before the passage of the IRA, Medicare had no role in determining drug prices, relying instead on prices negotiated between manufacturers and health plans.

But government price negotiations may come with unintended consequences for patient access.

These include:

- **Barriers to Access.** Utilization management tools like prior authorization, step therapy and non-medical switching undermine optimal care for patients. Patient advocates have cautioned that patients may experience more utilization management for medications that undergo Medicare price negotiation.
- **Undermine Innovation.** Many conditions don't yet have treatments, making innovation and the development of new medications critical to address unmet medical needs. However, studies have found that IRA price negotiation may slow innovation, leading to fewer new treatments for those who need them.

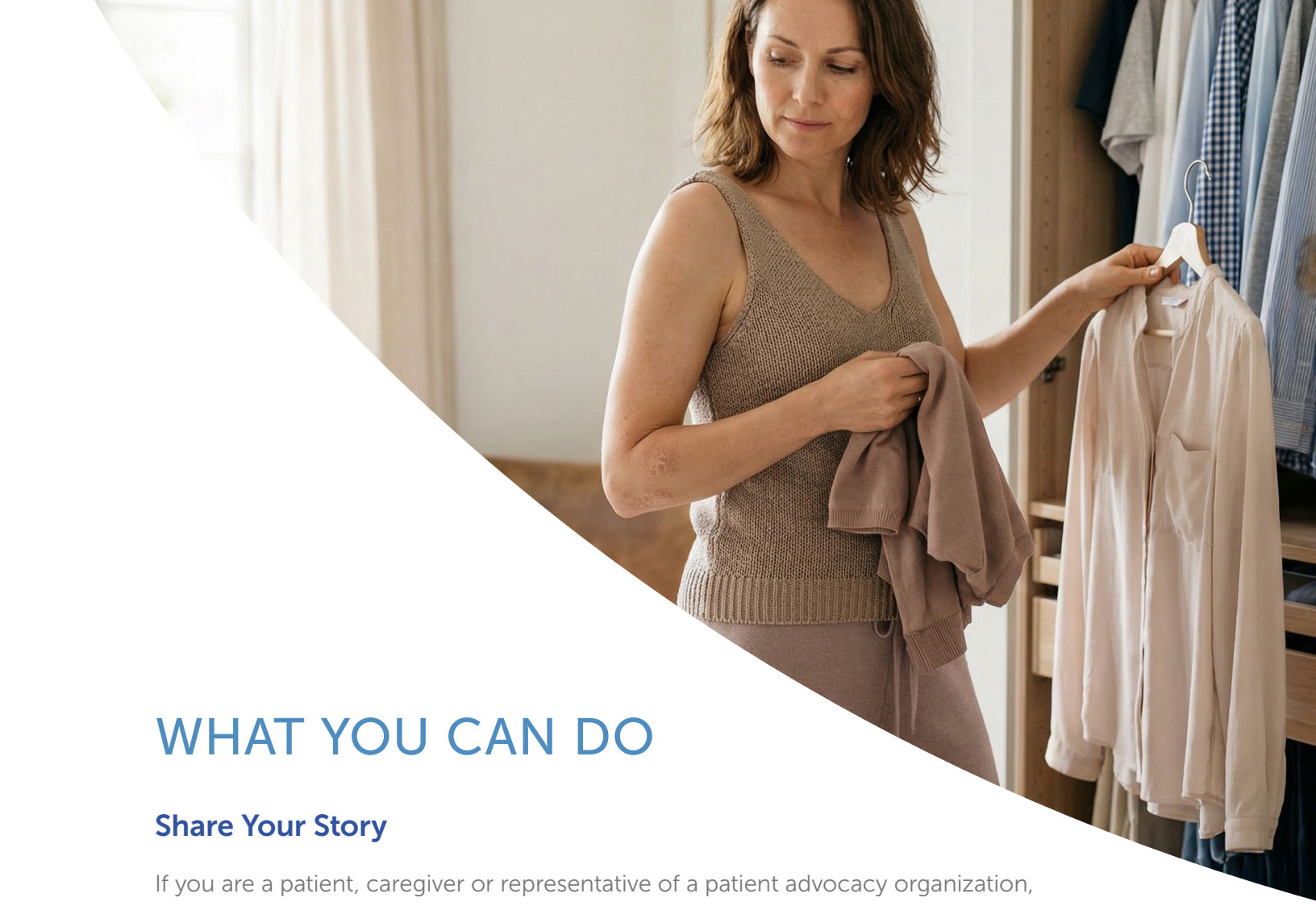
IRA AND PATIENT ACCESS

In January 2026, CMS announced the next 15 medications that are up for government price negotiation. The list includes medicines used to treat dermatological conditions:

- Plaque psoriasis and psoriatic arthritis
- Chronic spontaneous urticaria
- Hidradenitis suppurativa

The full list of medications can be found here.

CMS needs to hear from patients, health care providers and caregivers on why these medications are beneficial options—and why patients living with skin conditions need continued access to appropriate therapies.



WHAT YOU CAN DO

Share Your Story

If you are a patient, caregiver or representative of a patient advocacy organization, you can participate in a roundtable meeting to share your lived experience about the burden of the condition and the value of treatment. These sessions are designed to gather insights about lived experiences of patients including your diagnosis, treatment journey and the impact of your skin condition on your daily life. The roundtable events will be held April 6 to 17, 2026. These events are not livestreamed and only open to individuals selected to participate. Registration to participate is open until March 6, 2026.

Join a Townhall

Dermatologists and other practicing clinicians treating skin conditions, researchers and others interested may register to participate in a livestreamed townhall on April 22 to 23, 2026. Registration is open to speak at the townhall until March 6, 2026.

Information shared during the townhall will be used to better understand health care provider's experiences prescribing and/or managing treatment, as well as their considerations that drive treatment choice between selected medications and therapeutic alternatives.

KEY MESSAGES



1 Plaque Psoriasis and Psoriatic Arthritis

- Several medications selected for Medicare price negotiation are used to treat plaque psoriasis and psoriatic arthritis—chronic inflammatory conditions that can significantly affect physical health and quality of life.
- There is no cure for plaque and psoriatic arthritis. Many patients require long-term, ongoing therapy to manage symptoms, prevent disease progression and maintain daily functioning.
- The medication selected for negotiation represents important treatment options for patients who may not respond to first-line therapies. Maintaining access to a range of effective therapies is essential to support individualized care and optimal outcomes.



2 Chronic Spontaneous Urticaria

- Some medications selected for Medicare price negotiation are relevant to chronic spontaneous urticaria, a condition that can cause persistent, unpredictable hives and significantly disrupt daily life.
- Chronic spontaneous urticaria does not have a cure. Many patients require ongoing treatment to control symptoms, reduce flares and maintain quality of life.
- Sharing how chronic spontaneous urticaria affects your treatment journey, out-of-pocket costs and daily functioning helps inform decision-makers about the real-world impact of access and affordability.



3 Hidradenitis Suppurativa

- Hidradenitis suppurativa is a chronic, often progressive skin condition that can cause painful nodules, abscesses and scarring. Patients often need sustained access to effective therapies to manage symptoms to prevent complications.
- Hidradenitis suppurativa does not have a cure, and treatment plans frequently involve long-term use of advanced therapies.
- Medications included in Medicare price negotiation has a meaningful role in hidradenitis suppurativa management for some patients, particularly those who have not responded to first-line treatments. Ensuring continued availability of multiple therapeutic options supports personalized care.

SOCIAL MEDIA GUIDE

Recommended Hashtags

#PatientAccess #IRA #DermaCare #SkinConditions

Sample Posts

Medications for chronic #skinconditions like #psoriasis and #hidradenitissuppurativa have been selected for #Medicare drug price negotiations. Access to the right treatment options must remain a priority for patients.





Are you living with a chronic #skincondition? CMS needs to hear how treatment access affects your daily life. Learn how to share your story. #PatientAccess #DermaCare



Dermatologists and researchers: your experience prescribing and managing treatment matters. Consider participating in the upcoming CMS townhall. #Skinconditions #IRA

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About Derma Care Access Network

The Derma Care Access Network sponsors educational initiatives and advocacy programs designed to encourage informed policymaking about the benefits of access to approved therapies and appropriate

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