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July 27, 2026

The Honorable Elizabeth Warren
United States Senate
311 Hart Senate Office Building
Washington, DC 20510

The Honorable Josh Hawley
United States Senate
381 Russell Senate Office Building
Washington, DC 20510

RE: Support for the *Break Up Big Medicine Act* (S. 3822)

Dear Senators Warren and Hawley:

On behalf of the American Academy of Allergy, Asthma & Immunology (AAAAI), we write to convey our support for the *Break Up Big Medicine Act* (S. 3822), which would combat vertical integration in the health care system.

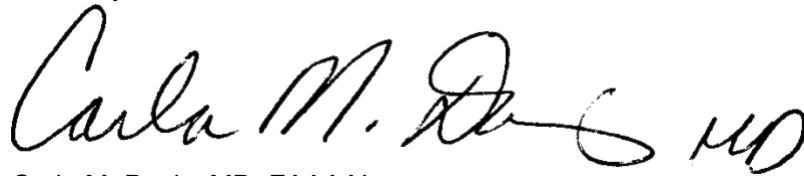
Established in 1943, the AAAAI is a professional organization with more than 7,000 members in the United States, Canada, and more than 70 other countries. This membership includes board-certified allergist/immunologists, other medical specialists, allied health professionals, and researchers—all with a shared commitment to improving the lives of patients with allergic and immunologic diseases.

The business practices of Pharmacy Benefit Managers (PBMs) affect AAAAI members and the patients we treat through opaque, differing formularies and utilization management strategies. The current system, including the vertical integration of PBMs, health insurers, and pharmacies, has favored corporate interests over healthcare professional and patient-centered clinical decision-making. This has resulted in delayed and/or denied treatment for optimal medical care, with patients oftentimes forced to more expensive, less effective or less convenient treatment options. Delays have proven to be especially problematic for ER/Urgent Care visits and Hospital discharges with lack of approval for newly prescribed agents linked to increased mortality. An example of this is lack of approval for vital immunoglobulin therapy in immunocompromised individuals resulting in recurrent infections and/or repeat hospitalizations. Further, due to regular formulary design changes favoring PBM profits, patients with conditions such as severe asthma have experienced significant hurdles and a lack of choices of guideline-based treatment for medications such as inhalers and biologics. PBMs also may require patients to switch to insurance-preferred treatments despite control with their existing therapy. This practice can result in gaps in therapy or worsening disease control. In short, patients are suffering from worse outcomes while PBMs and insurance companies turn a profit.

We appreciate that the *Break Up Big Medicine Act* (S. 3822) seeks to address these structural conflicts of interest by prohibiting common ownership of insurers, PBMs, wholesalers, and provider entities to restore accountability and choice across the health care system. By promoting fair competition, this legislation has the potential to improve access to affordable medically necessary treatments and ensure that clinical decisions remain driven by healthcare professional decisions and patient need rather than corporate structure.

Thank you for your bipartisan leadership to improve the drug pricing system for patients. The AAAAI looks forward to working with you and your staff as issues related to allergy, asthma, and immunology arise, and would encourage you to contact Rebecca Brandt, CAE, Executive Director, AAAAI, at (414) 272-6071 or advocacy@aaaai.org if you have any questions.

Sincerely,

A handwritten signature in black ink, reading "Carla M. Davis MD". The signature is fluid and cursive, with the "MD" written in a slightly larger, more distinct script at the end.

Carla M. Davis, MD, FAAAAI
President, American Academy of Allergy, Asthma & Immunology