

Upcoming Deadline

Consolidated Appropriations Act: Prescription Drug Data Collection

What is the Consolidated Appropriations Act: Prescription Drug Data Collection?

With the passing of the Consolidated Appropriations Act (CAA), group health plans and health insurance issuers offering group or individual health insurance coverage are required to submit information about prescription drugs and healthcare spending to the Department of Health and Human Services, the Department of Labor, and the Department of the Treasury. The government refers to this as "Prescription Drug Data Collection (RxDC)."

What is the next reporting period?

The next reporting period is for 2025 (January 1, 2025, through December 31, 2025).

When is the due date?

The due date of the submissions for the 2025 reporting period is June 1, 2026.

Will BRMS submit RX data on behalf of my employer group?

Yes, BRMS can submit the RX data on behalf of our self-funded clients on an opt-out basis. If your employer group prefers to handle the submission, please contact your Client Management team to opt-out no later than May 1, 2026. If BRMS does not receive any opt-out communication, we will be submitting on behalf of all self-funded clients.

What are the fees BRMS is charging for this reporting period?

For active groups, there is a fee of \$1,000[†]. If BRMS does not receive an opt-out request by May 1, 2026, we will assume the fee is approved and will bill on the June 2026 invoice.

For groups that have terminated during the 2025 reporting period (January 1, 2025, through December 31, 2025), BRMS Client Management will reach out to discuss the submission and associated fees.

How is BRMS preparing for the next reporting period?

BRMS is reaching out to our PBM partners to identify what they will be providing for this requirement. BRMS will be reporting the D1–D2 files along with P2 file and narrative response files. Below are the RxDC file requirements from last reporting period. We will continue to monitor updates from CMS that may alter submission requirements.

[†] Any charges from the PBM vendor will be passed on to the client or the client should handle directly with the PBM vendor.

Subject	Plan Lists	Data Files
<p>File Names</p>	<p>P stands for Plan</p> <ul style="list-style-type: none"> • P1: Individual and student market plan list • P2: Group health plan list • P3: FEHB plan list 	<p>D stands for Data</p> <ul style="list-style-type: none"> • D1: Premium and Life-Years • D2: Spending by Category • D3: Top 50 Most Frequent Brand Drugs • D4: Top 50 Most Costly Drugs • D5: Top 50 Drugs by Spending Increase • D6: Rx Totals • D7: Rx Rebates by Therapeutic Class • D8: Rx Rebates for the Top 25 Drugs
<p>Purpose</p>	<p>The plan lists identify the plans in a submission. The plan lists also collect plan-level information required by statute, such as the beginning and end dates of the plan year, the number of members, and the states in which the plan or coverage is offered.</p>	<p>The data files collect premium and spending information at an aggregate level.</p>
<p>Requirement</p>	<ul style="list-style-type: none"> • P1 is required for plans in the individual or student market • P2 is required for employer-based health plans that are not FEHB plans • P3 is required for FEHB plans 	<p>All 8 data files are required.</p>
<p>File Format</p>	<p>Comma Separated Values (CSV)</p>	<p>Comma Separated Values (CSV)</p>

Next Steps

Please be sure to notify us by May 1, 2026 if you would like to opt-out and handle the submission directly. As a reminder, if no opt-out request has been received, BRMS will submit RxDc reporting on behalf of your employer group and applicable fees will be billed on the June 2026 billing invoice.