

Prescription Drug Affordability Boards are Bad Policy



Prescription Drug Affordability Boards (PDABs) empower unaccountable political appointees to make that affect your healthcare. These unelected boards could limit your access to life-saving medications. Don't let bureaucrats come between you and your doctor.

Existing Affordability Boards have been state-funded calamity with no results that actually help patients. Economists and Patient Advocates agree that government-imposed price controls through unelected PDABs may lead to drug shortages, limit your treatment options, and put community pharmacies out of business.

PDAB is just "Bad P" spelled backwards. What does the "P" stand for? Policy.
Keep life-saving medications available.

What You Need to Know

Newly empowered state drug boards want to use price controls to limit access to medications. Economists and Patient Advocates agree that government-imposed price controls through unelected PDABs may lead to drug shortages, limit your treatment options, and put community pharmacies out of business.

- Ten states have empowered unelected boards to limit your access to life-saving medications to save money.
- These boards lack the expertise to make complex pricing decisions and add another layer of bureaucracy without addressing the root causes of high drug prices.
- The hardest hit Americans are low-income families and those enrolled in Affordable Care Act health plans.
- Unaccountable political appointees shouldn't determine your treatment options.
- Say no to PDABs and keep medical decisions between you and your doctor.

PDABs (Prescription Drug Affordability Boards) are unelected government panels that aim to set price caps on medications deemed too expensive. However, there are concerns about their potential impact:

- Lack of accountability – PDABs would be unelected and unaccountable to voters, raising worries about their power over access to medicines.
- Rejected proposals – Similar PDAB proposals have been rejected in other states like Virginia and Wisconsin.
- Limiting access – PDAB decisions could disrupt treatments prescribed by doctors and lead to restricted access, which could end up costing more long-term.
- Questionable decision-making – PDABs may use metrics that discriminate against certain patient groups, and their methods for assessing value could violate disability rights.
- Narrow focus – PDABs often ignore factors like pharmacy benefit managers' role in high prices, focusing only on state costs rather than patient out-of-pocket costs.

The key concern is that PDABs threaten the balance between drug innovation and affordability, potentially blocking access to needed treatments in the name of cost savings. Patients and doctors should have input to ensure cost control efforts don't harm care.

