

# Prescription Drug Affordability Board Advisory Group Overview

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October 8, 2024

# Agenda

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- ▶ Prescription Drug Affordability Board (PDAB) Background
- ▶ PDAB Legislative History
- ▶ PDAB Advisory Group Mission
- ▶ PDAB Advisory Group Membership
- ▶ PDAB Advisory Group Responsibilities

# Washington State Cost Transparency Efforts

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- ▶ Rx Price Transparency (2019): RCW 43.71C
  - ▶ Reporting on cost and utilization
  - ▶ Applies to:
    - ▶ Health carriers
    - ▶ Pharmacy benefit managers (PBM)
    - ▶ Manufacturers
    - ▶ Pharmacy services administrative organizations (PSAO)
  - ▶ HCA submits annual report to the Legislature
- ▶ Health Care Cost Transparency Board (2020): RCW 70.390
  - ▶ 14-member Board staffed by HCA
  - ▶ Analyzing cost growth and cost drivers
  - ▶ Reports annually to Legislature
- ▶ Department of Health (DOH) hospital financial reports: RCW 43.70.052
- ▶ All-Payer Claims Database: RCW 43.371

# Prescription Drug Affordability Boards

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- ▶ Independent bodies empowered to analyze the high cost of drugs and suggest effective ways to lower costs
  - ▶ Maine
  - ▶ Maryland
  - ▶ New Hampshire
  - ▶ Oregon
  - ▶ Ohio
  - ▶ Colorado
  - ▶ Washington
  - ▶ Minnesota
- ▶ Certain state Boards are permitted to set upper payment limits (UPLs)
- ▶ Focused on cost transparency and containment
- ▶ Variation in price thresholds across states

# Senate Bill 5532 (2022)

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## ▶ History

- ▶ Passed during the 2022 Legislative session
- ▶ Prime sponsor: Senator Keiser
- ▶ Based on NASHP model legislation, amended during the process
  - ▶ Delayed implementation of rules and UPLs
  - ▶ Increased threshold for affordability review and UPLs

## ▶ Board

- ▶ Five-member board appointed by governor
- ▶ Serve five-year terms
- ▶ Conflicts of interest prohibited

# Affordability reviews

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- ▶ RCW 70.405.030-.040
- ▶ Drugs subject to the purview of the Board:
  - ▶ Brand names and biologics
  - ▶ Have a wholesale acquisition cost (WAC) of \$60,000 or more
  - ▶ Price increase of 15 percent per year or 50 percent over three years
  - ▶ Biosimilars with initial acquisition cost not at least 15 percent lower than the reference product
  - ▶ Generics with a wholesale acquisition cost of \$100 or more for a 30-day supply that increased 200 percent or more in the previous year

# Affordability reviews (continued)

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- ▶ Board may conduct affordability reviews of up to 24 drugs per year
- ▶ Must determine whether the drug led or will lead to excess costs to patients
- ▶ Must consider:
  - ▶ Relevant price factors
  - ▶ Average patient costs
  - ▶ Effects on access
  - ▶ Orphan drug status
  - ▶ Patient assistance programs
  - ▶ Therapeutic alternatives
  - ▶ Input from patients and medical experts

# Upper payment limits

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- ▶ RCW 70.405.050
- ▶ **UPLs apply to all drug purchases by any entity and reimbursements for a claim** for the drug by a health carrier.
  - ▶ Employer-sponsored self-funded plans may elect to be subject to UPLs
- ▶ HCA must adopt rules establishing UPL methodology
  - ▶ Rules and UPLs cannot take effect until 90 days after the next session
- ▶ Can set **UPLs on up to 12 drugs per year**, beginning in 2027
- ▶ Must consider:
  - ▶ Cost of administering the drug
  - ▶ Cost of delivering to patients
  - ▶ Status of the drug on the drug shortage list
  - ▶ Other relevant administrative costs related to production or delivery
- ▶ Must post notice of UPL and hold public comment 30 days before setting a UPL



# PDAB Advisory Group Vision and Mission

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## ▶ Vision

- ▶ To aid the Board in conducting affordability reviews of selected drugs, by providing guidance and expertise.

## ▶ Mission

- ▶ The Advisory Group serves at the direction of the Board. The goal of the Advisory Group is to provide guidance to the Board on the different components of a drug affordability review. The Advisory Group members will investigate each drug selected by the Board and will provide a written report to the Board with their findings. The Advisory Group members will follow the description of their roles and responsibilities laid out in 70.405 RCW and in WAC 182-52.

# Membership

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- ▶ The Board will appoint up to nine **core Advisory Group members**, including experts in:
  - ▶ The pharmaceutical business model;
  - ▶ Supply chain business model;
  - ▶ The practice of medicine or clinical training;
  - ▶ Health care consumer or patient perspectives;
  - ▶ Health care cost trends and drivers;
  - ▶ Clinical and health services research;
  - ▶ The state's health care marketplace.
  - ▶ A representative of the prescription drug industry;
- ▶ For each specific drug affordability review, the Board will appoint up to five **supplemental Advisory Group members**, including experts in:
  - ▶ Patients and/or patient advocates for the condition being treated;
  - ▶ Health care providers who specialize in treating the condition for the drug being reviewed.

# Responsibilities

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1. Attend bimonthly Advisory Group meetings, as well as bimonthly PDAB meetings
2. Submit a final report to the PDAB for each drug under review
3. Respond to ad hoc requests from the PDAB

# Potential Topics to Inform Affordability Review

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- ▶ The relevant factors contributing to the price paid for the prescription drug, including the wholesale acquisition cost, discounts, rebates, and other price concessions;
- ▶ The average out-of-pocket cost for the drug;
- ▶ The effect of the price on consumers' access to the drug in the state;
- ▶ Orphan drug status;
- ▶ The dollar value and accessibility of patient assistance programs offered by the manufacturer for the drug;
- ▶ The price and availability of therapeutic alternatives;
- ▶ Input from:
  - ▶ Patients affected by the condition or disease treated by the drug; and
  - ▶ Individuals with medical or scientific expertise related to the condition or disease treated by the drug;
- ▶ Any other information the drug manufacturer or other relevant entity chooses to provide;
- ▶ The impact of pharmacy benefit manager policies on the price consumers pay for the drug;
- ▶ Life-cycle management;
- ▶ The average cost of the drug in the state;
- ▶ Market competition and context;
- ▶ Projected revenue;
- ▶ Off-label usage of the drug; and
- ▶ Any additional factors identified by the board.

# Next Steps

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- ▶ Review drug list following PDAB meeting
- ▶ Draft recommendations for PDAB to shortlist / choose drugs for affordability review



# Questions?

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