

September 5, 2024

Prescription Drug Affordability Board 16900 Science Drive, Suite 112-114 Bowie, MD 20715

RE: September 10th Board Meeting – UPL ACTION PLAN AND IMPLEMENTATION PROCESS

Dear Members of the Prescription Drug Affordability Board:

As a broad coalition of advocacy organizations representing patients, caregivers and health care providers, we write to share our concern with the draft UPL Action Plan scheduled for adoption during the September 10th meeting.

We recognize the importance of lowering health care costs and do appreciate some aspects of the draft plan. The coalition has submitted full comments on the draft plan prior to the submission deadline on August 26. However, we hope that the Board will consider the following concerns as it discusses the draft plan during its meeting:

- The draft plan states that "The Board shall set an upper payment limit in a way to minimize adverse outcomes and minimize the risk of unintended consequences."
 However, it does not identify outcomes or consequences that are of concern and that should be minimized. Nor does the plan define the threshold for tolerance of these outcomes and consequences to be determined minimal.
- The plan acknowledges that an upper payment limit may not be the best policy solution to help contain costs yet provides no additional options. The lack of interest from the Board in additional policy options that can save cost while protecting patient access validates advocates' concerns about the narrow view being taken by the Board regarding health care costs.
- Several options for arriving at a UPL price are suggested in the draft plan. Many options
 raise concerns, such as utilizing QALY-like metrics that are widely viewed as
 discriminatory, referring to pricing in countries with healthcare systems unlike ours, and
 referring to federal pricing with a still-unknown impact on access. None of the options
 allow for consideration of individual patient needs.
- The plan references opportunities for stakeholders to provide input throughout the process but does not formalize that process. Concerns remain that opportunities

provided are inadequate, including 90-second time limits for oral comment, and actual consideration by the Board for any comments received.

- No information is included in the plan that ensures patient savings through the implementation of the upper payment limit.
- The plan does not address concerns about the potential for diminished access or increased utilization management as a result of an upper payment limit.

Given the gravity of the decisions being made by the Board, the Value of Care Coalition also has concerns with the haste expressed during its last meeting. This push has led to shifting meeting dates and overlapping comment periods, causing confusion for interested stakeholders. Other states' implementing PDABs have acknowledged their own process-related shortcomings and are now focusing on the need to be thorough and considerate when making decisions that impact patient health. We encourage Maryland to take a thorough and deliberative process.

As the Board discusses the draft UPL Action Plan and considers its adoption, we ask that you address these concerns.

Thank you,

Derek Flowers
Executive Director
Value of Care Coalition