

Prescription Drug Affordability Boards (PDABs) & The Impact on Black Communities

What PDABs Mean for Patient Access & Efforts to Eliminate Health Disparities

“The National Black Caucus of State Legislators (NBCSL) recognizes the continued challenges of health and healthcare disparities and acknowledges that **Prescription Drug Affordability Boards should work to ensure that medications remain available to patients to not create greater health and health care disparities in the United States.**”

– NBCSL Resolution on Affordable Prescription Drugs & Health Disparities (Resolution HHS-24-28)

Defining PDABs & UPLs



Prescription Drug Affordability Board (PDAB): A state government-appointed board that has the authority to review prescription drug costs and determine if they present an affordability challenge for patients.

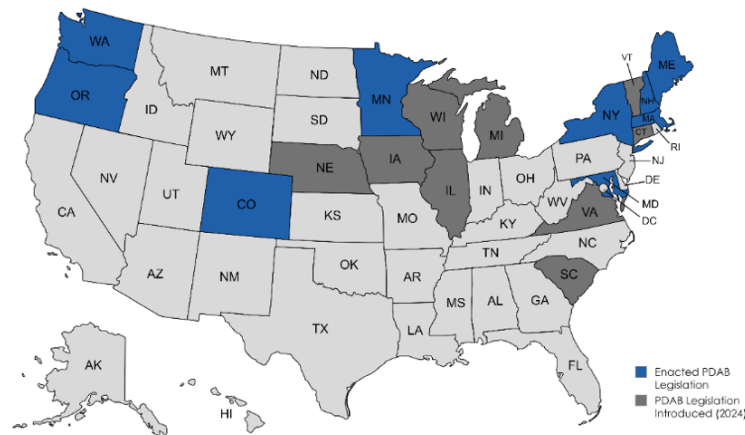


Upper Payment Limit (UPL): A ceiling amount that healthcare payers (e.g., Medicaid, commercial insurers) can reimburse for the purchase of a medication that a PDAB deems to be unaffordable.

Current PDAB Landscape Across States

Many states across the country have established or are considering the implementation of PDABs to review drug prices and set UPLs to control the prices of certain drugs that are deemed unaffordable.

Across states, established or proposed PDABs have different levels of authority to make changes to the price of drugs and have unique processes to conduct drug affordability reviews.



NOTE: Legislative map last updated April 2024

Nine States Have Enacted Legislation to Create a PDAB

CO, MA, MD, ME, MN, NH, NY, OR, WA

PDABs & UPLs Impact On Black Communities



PDABs and their use of UPLs could exacerbate health disparities and inequities for Black communities. Black patients are more likely to go without care due to cost. Despite this pressing issue, none of the existing boards have produced any savings for patients.



PDABs could compound affordability issues by exacerbating barriers to treatment access. UPLs create financial barriers for hospitals and clinics to access and deliver the most effective medications, forcing providers to stop providing lifesaving medications to patients.



PDABs could put lifesaving medications out of reach for Black communities. Black people are disproportionately impacted by chronic conditions, such as diabetes, HIV/AIDs, hepatitis B and C, cardiovascular diseases, and obesity. Some boards are targeting crucial medications that are essential for managing such conditions.



“We have to move forward together in order to achieve health equity, and health care must be a partner in this movement. We cannot frame health care as an enemy of health equity.”

– Alabama State Representative Laura Hall | National Black Caucus of State Legislators (NBCSL)