

Impact of Government Payment Limits on Patient Access & Affordability

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- Seven states* have Prescription Drug Affordability Boards (PDABs), which were created by the legislature to review prescription drug costs.
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- Four of these PDABs** can set upper payment limits (UPLs), which cap the price of selected drugs for most entities in the supply chain, including pharmacists.
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- Insurance companies and their pharmacy benefit managers (PBMs) are not restricted by the UPL.
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- While patient affordability is at the heart of this legislation, **do these PDABs really make medications more affordable for patients?**

*As of January 2026, Active PDABs: CO, ME, MD, MN, NJ, OR, WA. Past Studies: OH. Defunct PDABs: NH **PDABs with UPL Authority: CO, MD, MN, WA
Methodology: Model assumes no changes to the pharmaceutical supply chain, including manufacturer price and patient cost, other than the reimbursement rate being set at the UPL.
UPL is hypothetical but similar to the first UPL set by the Colorado PDAB for Enbrel (e.g., a \$600 UPL for a \$2,000 drug).