



May 7, 2024

Via online portal

Banking, Commerce and Insurance Committee
Nebraska Legislature
1445 K St.
Lincoln, NE 68508

Dear Banking, Commerce and Insurance Committee:

Aimed Alliance is a non-profit health policy organization that seeks to protect and enhance the rights of healthcare consumers and providers. We appreciate the opportunity to comment on L.B.33, which would create a Prescription Drug Affordability Board (PDAB).

I. Unintended Consequences of PDABs and UPLs

Currently, no state Board has completed both the drug selection and UPL processes. PDABs are experimental initiatives with significant upfront costs that provide no guarantee that generated savings will lower costs for health care consumers. Like many PDAB structures, L.B.33 is intended to restrict what *payors* pay for a prescription drug without any requirements to pass savings onto what *consumers* pay at the pharmacy counter. Therefore, Aimed Alliance urges the Committee to include requirements to ensure any PDAB cost savings are passed down to consumers.

II. Alternatives That Can Directly Impact Consumers

With no guarantee of cost savings for consumers, Aimed Alliance urges the Committee to pursue PDAB alternatives that could directly impact consumers, such as step therapy reform.

Step therapy is a practice used by insurers to require consumers to try and fail on alternative treatments before covering the originally prescribed treatment. Without appropriate guardrails, step therapy policies may be inconsistent with clinical guidelines and burdensome on consumers and providers. While Nebraska has codified certain step therapy protections under Chapter 44-7,115, these protections provide *situations* under which an individual does not have to comply with the protocol; it does not place protections directly on the *types* of step therapy protocols that can be used.

Therefore, Aimed Alliance urges the Committee to consider enacting additional step therapy protections, including prohibiting plans from (1) imposing step therapy for certain progressive diseases; (2) stepping through an off-label medication; and (3) trying and failing on more than one medication before being able to access the originally prescribed treatment. These measures would improve consumers' abilities to maintain stable access to their treatments, reduce administrative burdens on health care providers, and strengthen protections surrounding the patient-provider relationship, ultimately contributing to long-term savings for the healthcare system.



III. Key PDAB Considerations

Finally, if the Committee continues to move forward with PDAB legislation, we urge the Committee to prioritize patient, caregiver, and health care provider lived experiences and perspectives. To ensure these perspectives are appropriately valued, Aired Alliance urges the Committee to require a member of the Board to be a consumer or patient representative. Providing a permanent position for this perspective will ensure the development of PDAB surveys, questions, and processes are consumer-friendly and inclusive. The federal government has also recognized the value of ensuring a permanent position for the patient perspective by requiring all Pharmacy & Therapeutics (P&T) Committees to include *at least* one patient representative as a member of the Committee. In reaching this decision, the government recognized that consumer representatives can provide “insights into real consumer experiences unknown to P&T committees.”ⁱ Thus, a similar permanent position could be equally as valuable and beneficial for the Nebraskan PDAB.

Thank you for your time and consideration of these comments.

ⁱ <https://www.cms.gov/newsroom/fact-sheets/hhs-notice-benefit-and-payment-parameters-2025-final-rule>.