Bill Corr, Senior Advisor, Waxman Strategies Former Deputy Secretary of Health and Human Services

- Multi-faceted group of problems that are driving higher prescription drug prices
- Bipartisan Budget Act of 2018 provisions to address drug prices and costs
- President's Budget for FY 2019 proposals to address drug costs and drug spending

Getting to the Root of High Prescription Drug Prices

Drivers and potential solutions



OUTLINE OF REMARKS BY CHARLES E PHELPS, PHD COMMONWEATLH FUND CONFERENCE CALL; FEBRUARY 26, 2018

- I. President's budget did three main things:
 - A. Capped Medicare Part D (pharma costs) out of pocket costs.
 - B. Shift some drugs from Part B (doctors') into Part D
 - i. Adds some bargaining power (since there is none now in Part B)
 - C. Requires insurers to pass along at least 1/3 of discounts granted by pharma
 - i. But we don't know how much they are doing now and who keeps what.
- II. The National Academies of Sciences, Engineering and Medicine (NASEM) report: *Making Medicines Affordable: A National Imperative*
 - A. Accelerate market entry of generics and biosimilars to enhance competition.
 - 1. Prevent pay for delay, clearly an anticompetitive act.
 - 2. Preclude anti-competitive mergers.
 - 3. Minimize "evergreening" patent extensions
 - 4. Reciprocal drug approval arrangements with trusted nations
 - 5. Eliminate FDA backlogs on generic entrants
 - B. Consolidate and apply government purchasing power, strengthen formulary design, and improve drug valuation methods.
 - C. Assure transparency of financial flows in the supply chain.
 - D. Control Direct to Consumer Advertising (DTC) including eliminating tax deductibility of DTC ads, seek industry code of conduct.
 - E. Cap out of pocket spending on Part D. (DONE in the Budget).
 - F. **Fix Orphan Drug Act** so "blockbuster" drugs do not receive multiple benefits of this program.
 - G. **Several others**; information to consumers; fix 340B program.
- III. **Important Context**: The growth in prescription drug coverage (now 85% of spending) has obliterated any potential market pressure to control prices of new and old pharmaceutical products. **There is no "market" now in the usual sense.**
- IV. The Council of Economic Advisors (CEA) report identifies a real issue the disparity in prices between the US and other nations but draws the wrong conclusion about what to do about it.