COMMUNITY ACCESS NATIONAL NETWORK

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

RE: Upper Payment Limit Clarification

The **Community Access National Network (CANN)** is a 501(c)(3) national nonprofit organization focusing on public policy issues relating to HIV/AIDS and viral hepatitis. CANN's mission is to define, promote, and improve access to healthcare services and support for people living with HIV/AIDS and/or viral hepatitis through advocacy, education, and networking.

While CANN is primarily focused on policy matters affecting access to care for people living with and affected by HIV, we stand in firm support of all people living with chronic and rare diseases and recognize the reality of those living with multiple health conditions and the necessity of timely, personalized care for every one of those health conditions. State Prescription Drug Affordability Boards are of profound importance to our community.

Distinction of Harm Mitigation is Unclear

One of the many concerns stakeholders have regarding upper payment limits is the potential financial strain on pharmacies. The concern is that upper payment limit reimbursement will be below pharmacy acquisition costs, forcing them to operate at a financial loss. Staff has repeatedly responded that upper payment limits will be enforced through a supplemental rebate mechanism that will not affect initial pharmacy reimbursement.

However, COMAR 14.01.06.02 states that eligible governmental entities must amend and incorporate UPL limits into all upcoming or existing healthcare provider, health plan administrator, and PBM contracts. It is unclear how this language is to be interpreted as a supplemental rebate that will not cause pharmacy harm. Additionally, the supplemental rebate language implies that manufacturers would be required to provide additional rebates beyond initial rebates to ensure the net price paid by entities is at or below the upper payment limit.
Clarification of this process is imperative to describe how exactly financial harms to pharmacies would not be incurred. This is especially important regarding any future expansion to the commercial market. It is unclear, on many levels, how this manner of implementation could occur in the broader market and be successful.

Adequate Comment Periods Are Important

During the July 2026 meeting, it was encouraging to see the Board vote to enforce a minimum 15-day comment period after posting certain materials. However, the discussion concerning a potential reduction of the 60-day comment period for public input, stakeholder data, and patient feedback after the public posting of initial drug cost review studies was concerning. The full 60-day minimum period is necessary to adequately analyze such data. Any reduction in the already limited means of public feedback would be a disservice and a harm to public trust.

Respectfully submitted,

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Community Access National Network (CANN)

On behalf of
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