

# Senate Panel Reports Prescription Drug Board Package

Senate Democrats took their first step Wednesday toward the creation of its proposed Prescription Drug Affordability Board by reporting legislation from the Senate Finance, Insurance and Consumer Protection Committee.

All three bills ([SB 483](#) Track, [SB 484](#) Track and [SB 485](#) Track) were reported 5-2. Committee Democrats voted yes while [Sen. Kevin Daley](#) (R-Lum) and [Sen. Lana Theis](#) (R-Brighton) voted no. [Sen. Mark Huizenga](#) (R-Walker), the committee's minority vice chair, abstained on all three bills, citing a possible conflict of interest.

Prior to reporting SB 483, Committee Chair [Sen. Mary Cavanagh](#) (D-Redford Township) offered an S-1 substitute, which would add health equity to the areas of expertise for board members to have.

Health equity under the bill as substituted would be defined as "attaining the highest level of health for all individuals in which an individual has a fair and just opportunity to attain the individual's optimal health regardless of race, ethnicity, disability, sexual orientation, gender identity, socio-economic status, geography, preferred language or other factors that affect asset access to health care and health outcomes."

"Conversations with stakeholders will be ongoing as the bills move through the legislative process," Cavanagh said.

Daley said he still had questions, including how many drugs might be subject to price caps.

"I think this is really being rammed through way too fast for a bill of this importance," Daley said, adding he does not believe there has been enough discussion to determine how it could be improved.

The proposed five-member Prescription Drug Affordability Board would research the most expensive widely available prescription drugs and establish upper payment limits. The panel would also study the effects of high costs on residents. Advising the proposed board would be a 21-person Prescription Drug Affordability Stakeholder Council.

Supporters of the board in testimony have said it would help lower costs, increase availability to important medicines and put a check on large pharmaceutical companies who have reaped significant profits for common drugs in recent years with price hikes.

Those opposed told committee members the board if created would hurt research and development efforts, reduce access to important drugs and increase costs (See [Gongwer Michigan Report, September 20, 2023](#)).

Laura Bonnell, CEO of the Bonnell Foundation Living with Cystic Fibrosis, in a statement following the votes said the prescription drug board would harm patients. Bonnell is a patient advocate whose daughters have cystic fibrosis.

"This isn't a new idea – it's been tried in other states, and they consistently raise concerns that the board's actions could actually hurt rare disease patients," Bonnell said. "I think it's important for patient advocates, like me, to be clear – although lowering drug prices sounds sexy, (a PDAB) will not help patients."

To date, Colorado, Maine, Maryland, Minnesota, New Hampshire, Ohio, Oregon and Washington have enacted legislation to create prescription drug affordability boards.

Dr. Farhan Bhatti with the Committee to Protect Health Care in a statement said the bills would rein in high drug costs.

"The crisis of high-cost prescription medication has gone on for too long, putting my patients' health and very lives at risk," Bhatti said. "We appreciate senators who voted to hold Big Pharma accountable here in Michigan."

Monique Stanton, president and CEO of the Michigan League for Public Policy, also thanked members for sending the bills to the full Senate.

"This board will be a forceful advocate for Michigan consumers at a time of high inflation to help make life-saving prescriptions more affordable for Michigan residents," Stanton said in a statement.

–By Nick Smith