

State	Enacted limit or ban on QALYs & similar measures	Proposed bills & regulations on cost effectiveness & QALYs	Impact
Arizona		2022, SB 1680 , not passed. PDAB to consider value and cost effectiveness. <i>Not yet reintroduced</i>	<i>Would encourage QALYs and similar measures</i> PDAB encouraged to use cost effectiveness
Colorado	2021, Senate Bill 21-175, enacted. PDAB’s methodology for establishing an upper payment limit must use a methodology that considers “the impact to older adults and persons with disabilities and shall not place a lower value on their lives” and “shall not consider research or methods that employ a dollars-per-quality adjusted life year, or similar measure, that discounts the value of a life because of an individual's disability or age.”	PDAB Rule 3 CCR 702-9, passed. Allows the Board to use information that uses QALYs and cost effectiveness.	<i>Partial QALY ban</i> Bars the PDAB’s use of QALYs & similar measures only in upper payment limit deliberations, not drug selection or affordability review.
Connecticut		2025, Governor’s bill No. 11, introduced References Medicare drug prices, for which CMS has indicated reliance on QALYs and similar measures in its Explanations . 2024, Governor’s bill No. 5054, introduced Establish a PDAB with authority to recommend a range of policy options to address affordability and required to report on “cost effectiveness evaluations.”	<i>Would encourage QALYs and similar measures</i> Encourages use of cost effectiveness analyses and may use QALYs & similar measures in its deliberations.

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		2021 bill No. 6242 , not passed . Proposed a full statewide ban on QALYs.	
Illinois		2025, HB 1443 / SB 66 , reintroduced . <i>ICER language proposed</i> Bars use of QALYs or similar measures “to identify subpopulations for which a treatment would be less cost-effective due to severity of illness, age, or preexisting disability” and limits use of cost effectiveness to studies “that weigh the value of all additional lifetime gained equally for all patients”.	<i>Would be partial QALY ban; Encourages similar measures</i> It is not clear what it means to only limit use of QALYs “to identify subpopulations.” Promotes use of ICER’s evLYG measure.
Iowa		2024, SF 264 , not passed . To create PDAB authorized to engage third parties and create criteria for assessing affordability and recommending UPL.	<i>Would allow QALYs and similar measures</i> No QALY ban; Explicitly allows third party contracts, could include entities using QALYs and similar measures such as ICER or PORTAL in Board recommendations.
Kansas		2025, SB 212 , introduced . Creates a PDAB. <i>ICER language proposed</i>	<i>Would be partial QALY ban; Encourage similar measures</i> It is not clear what it means to only limit use of QALYs “to identify subpopulations.”

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		Bars use of QALYs or similar measures “to identify subpopulations for which a treatment would be less cost-effective due to severity of illness, age, or preexisting disability” and limits use of cost effectiveness to studies “that weigh the value of all additional lifetime gained equally for all patients”.	Promotes use of ICER’s evLYG measure.
Kentucky		2024, HB 823 , not passed, to create a PDAB. <i>ICER language proposed</i> Bars use of QALYs or similar measures “to identify subpopulations for which a treatment would be less cost-effective due to severity of illness, age, or preexisting disability” and limits use of cost effectiveness to studies “that weigh the value of all additional lifetime gained equally for all patients”.	<i>Would be partial QALY ban; Encourage similar measures</i> It is not clear what it means to only limit use of QALYs “to identify subpopulations.” Promotes use of ICER’s evLYG measure.
Maine	L.D. 1829 , enacted. References Medicare drug prices, for which CMS has indicated reliance on QALYs and similar measures in its Explanations .	2025, LD 697 , introduced. Directs the PDAB to assess strategies, including UPL and reference to Medicare prices, for which CMS has indicated reliance on QALYs and similar measures in its Explanations .	<i>Does not ban QALYs or similar measures</i> The methodology for Medicare negotiated prices is not known and could implicate use of alternative measures of cost effectiveness.
Maryland	H.B. 768 , enacted. PDAB to conduct cost reviews using value or cost-effectiveness of drug.		<i>Encourages QALYs and similar measures</i>

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			PDAB may use QALYs & similar measures in its deliberations.
Massachusetts		2019, for FY 2020 appropriations , enacted . Health Policy Commission directed to propose supplemental rebate based on value of drug.	Encourages QALYs and similar measures HPC has a contract with PORTAL which subcontracts with ICER, both promote QALY.
Massachusetts		2023, H. 1183 and S. 730 , not passed . Prohibits Division of Medical Assistance from using discriminatory measures, including QALYs and similar measures.	Would Ban QALYs and similar measures Would bar use of QALYs and similar measures by HPC and in any Medicaid or state plan coverage decisions.
Michigan		2025, SB 3 , reintroduced . <i>ICER language proposed</i> Bars use of QALYs or similar measures “to identify subpopulations for which a treatment would be less cost-effective due to severity of illness, age, or preexisting disability” and limits use of cost effectiveness to studies “that weigh the value of all additional lifetime gained equally for all patients”.	Would be partial QALY ban; Encourage similar measures It is not clear what it means to only limit use of QALYs “to identify subpopulations.” Promotes use of ICER’s evLYG measure.
Minnesota	2023, S.F. No. 2744 , enacted . <i>ICER language</i>		Partial QALY ban; Encourages similar measures

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Nebraska		2024, LB 833 , not passed. Proposed PDAB barred from consideration of QALYs and similar measures that discount the value of a life because of an individual's disability or age in setting upper payment limit.	Would be partial QALY ban Bars the PDAB’s use of QALYs & similar measures only in upper payment limit deliberations, not selection or affordability review.
Nevada		2025, AB 259 introduced. References Medicare drug prices, for which CMS has indicated reliance on QALYs and similar measures in its Explanations .	
New Hampshire	2020, RSA 126-BB , enacted. Authorized PDAB to use data compiled by the department of health and human services to determine methods to meet spending targets.		Allows QALYs or similar measures Data used to determine spending targets not barred from including

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New Jersey		2022, S. 329 , introduced . Would authorize PDAB to study pharmaceutical system and policies used in other states and countries to lower list price, including UPL and closed formulary, considering cost effectiveness.	<i>Would allow QALYs and similar measures</i> Does not bar QALYs and similar measures, encourages importing QALYs and similar measures from foreign governments.
Ohio	2019, HB 166 , enacted . Created a prescription drug transparency and affordability advisory council to propose new payment models and efficiencies.		<i>Allows QALYs and similar measures</i>
Oregon	2021, SB. 844 , enacted . <i>ICER language enacted</i> PDAB barred from using QALYs or similar measures “to identify subpopulations for which a treatment would be less cost-effective due to severity of illness, age, or preexisting disability” and limits use of cost effectiveness to studies “that weigh the value of all additional lifetime gained equally for all patients”.		<i>Partial QALY ban; Encourages similar measures</i> It is not clear what it means to only limit use of QALYs “to identify subpopulations.” Promotes use of ICER’s evLYG measure. Unclear how statewide ban interpreted as PDAB continues to use evLYG.

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	<p>2024, SB 1508, enacted. Bars the state from considering a quality of life in general measure, either directly or by considering a source that relies on a quality of life in general measure.</p>		
Pennsylvania		<p>2021, HB 1722, introduced. Would create PDAB authorized to do cost reviews relying on cost effectiveness.</p>	<i>Would allow QALYs and similar measures</i>
Rhode Island		<p>2025, S0468/H5860, introduced. References Medicare drug prices, for which CMS has indicated reliance on QALYs and similar measures in its Explanations.</p> <p>2024 S. 2719/H. 8220, reintroduced. Would create a Drug Cost Review Commission with authority to create payment limits for drugs using criteria established by Commission. Bill references Canada.</p>	<p><i>Would allow QALYs and similar measures</i> Encourages reference to Canadian prices, which are based on QALYs</p>
Vermont		<p>2024, S. 98, not passed. Green Mountain Care Board to conduct affordability reviews using cost-effectiveness studies. <i>ICER language proposed</i> Bars use of QALYs or similar measures “to identify subpopulations for which a treatment would be less cost-effective due to severity of illness, age, or</p>	<p><i>Would be partial QALY ban; Encourages similar measures</i> It is not clear what it means to only limit use of QALYs “to identify subpopulations.”</p>

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		preexisting disability” and limits use of cost effectiveness to studies “that weigh the value of all additional lifetime gained equally for all patients”.	Promotes use of ICER’s evLYG measure.
Virginia		<p>2025, HB 1724, reintroduced. PDAB bill reintroduced, passed and vetoed by Governor. <i>ICER language proposed</i> Bars use of QALYs or similar measures “to identify subpopulations for which a treatment would be less cost-effective due to severity of illness, age, or preexisting disability” and limits use of cost effectiveness to studies “that weigh the value of all additional lifetime gained equally for all patients”.</p>	<p><i>Would be partial QALY ban; Encourages similar measures</i> It is not clear what it means to only limit use of QALYs “to identify subpopulations.” Promotes use of ICER’s evLYG measure.</p>
Washington	<p>2022, SB 5532, enacted. <i>ICER language</i> PDAB barred from using QALYs or similar measures “to identify subpopulations for which a treatment would be less cost-effective due to severity of illness, age, or preexisting disability” and limits use of cost effectiveness to studies “that weigh the value of all additional lifetime gained equally for all patients”.</p>		<p><i>Partial QALY ban; Encourages similar measures</i> It is not clear what it means to only limit use of QALYs “to identify subpopulations.” Promotes use of ICER’s evLYG measure.</p>

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West Virginia		2025, H.B. 2831 , reintroduced. Would create PDAB authorized to do cost reviews relying on cost effectiveness.	<i>Would allow QALYs and similar measures</i>
Wisconsin		2023, AB 747 , not passed . Creates a PDAB with authority to set an UPL. Criteria do not exclude QALYs and similar measures.	<i>Would allow QALYs and similar measures</i>