

Patient Access Project

State	<i>Enacted</i> limit or ban on QALYs & similar measures	<i>Proposed</i> limit or ban on QALYs & similar measures	Other provisions related to cost effectiveness	Impact
Arizona			2022, SB 1680 , introduced PDAB to consider value and cost effectiveness.	<i>Would encourage QALYs and similar measures</i> PDAB encouraged to use cost effectiveness
Colorado	2021, Senate Bill 21-175 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.”			<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		2021 bill No. 6242 Proposed a full ban on QALYs, not passed.	2024, Governor’s bill No. 5054, introduced	<i>Would encourage QALYs and similar measures</i>

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			Establishes a PDAB with authority to recommend a range of policy options to address affordability and required to report on “cost effectiveness evaluations.”	PDAB encouraged to use cost effectiveness analyses and may use QALYs & similar measures in its deliberations.
Illinois		2024, HB 4472 <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, HF 2408 / SF 2238 , <i>introduced</i> Would create PDAB authorized to engage third parties and create criteria for assessing	<i>Would allow QALYs and similar measures</i> No QALY ban; Explicitly allows third party contracts, could include entities using

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			affordability and recommending UPL.	QALYs and similar measures such as ICER or PORTAL in Board recommendations.
Kentucky		2024, HB 823 <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 , <i>enacted</i> Directs the existing PDAB to reference Medicare negotiated prices in UPL.	<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.

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Maryland			H.B. 768 , <i>enacted</i> PDAB to conduct cost reviews using value or cost-effectiveness of drug.	<i>Encourages QALYs and similar measures</i> PDAB may use QALYs & similar measures in its deliberations.
Massachusetts		2023, H. 1183 and S. 730 Were introduced, which would prohibit Division of Medical Assistance from using discriminatory measures, including QALYs and similar measures. This bill has not passed.	2019, for FY 2020 appropriations , <i>enacted</i> . Health Policy Commission directed to propose supplemental rebate based on value of drug.	<i>Encourages QALYs and similar measures</i> HPC has a contract with PORTAL which subcontracts with ICER, both promote QALY.
Michigan		2023, SB 483 <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		<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.

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		additional lifetime gained equally for all patients”.		
Minnesota	2023, S.F. No. 2744 <i>ICER language enacted</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>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.
Nebraska		2024, LB 833 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.		<i>Would be partial QALY ban</i> Bars the PDAB’s use of QALYs & similar measures only in upper payment limit deliberations, not selection or affordability review.
New Hampshire			2020, RSA 126-BB , <i>enacted</i> Authorized PDAB to use data compiled by the	<i>Allows QALYs or similar measures</i> Data used to determine spending targets not

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			department of health and human services to determine methods to meet spending targets.	barred from including QALYs and similar measures.
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.	Would allows QALYs and similar measures Does not bar QALYs and similar measures, encourages importing QALYs and similar measures from foreign governments.
Ohio	2019, HB 166 Created a prescription drug transparency and affordability advisory council to propose new payment models and efficiencies.			Allows QALYs and similar measures
Oregon	2021, SB. 844 <i>ICER language enacted</i> PDAB barred from using QALYs or similar measures “to identify subpopulations			Partial QALY ban; Encourages similar measures It is not clear what it means to only limit use

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	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”.			of QALYs “to identify subpopulations.” Promotes use of ICER’s evLYG measure.
Pennsylvania			2021, HB 1722 , introduced Would create PDAB authorized to do cost reviews relying on cost effectiveness.	Would allow QALYs and similar measures
Rhode Island		2024 S. 2719/H. 8220 Would create a Drug Cost Review Commission with authority to create payment limits for drugs using criteria established by Commission. Bill references Canada.		Would allow QALYs and similar measures Encourages reference to Canadian prices, which are based on QALYs
Vermont		2024, S. 98 Green Mountain Care Board to conduct affordability reviews using		Would be partial QALY ban; Encourages similar measures It is not clear what it means to only limit use

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		<p>cost-effectiveness studies.</p> <p><i>ICER language proposed</i></p> <p>Bans 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>of QALYs “to identify subpopulations.”</p> <p>Promotes use of ICER’s evLYG measure.</p>
Virginia		<p>2024, HB 570 and SB 274 PDAB bill reintroduced, passed and vetoed by Governor.</p> <p><i>ICER language proposed</i></p> <p>Bans 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></p> <p>It is not clear what it means to only limit use of QALYs “to identify subpopulations.”</p> <p>Promotes use of ICER’s evLYG measure.</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”.		
Washington	2022, SB 5532 <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.
West Virginia			2024, H.B. 5682 , <i>introduced</i> Would create PDAB authorized to do cost reviews relying on cost effectiveness.	<i>Would allow QALYs and similar measures</i>
Wisconsin			2023, AB 747 , <i>introduced</i>	<i>Would allow QALYs and similar measures</i>

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			Creates a PDAB with authority to set an UPL. Criteria do not exclude QALYs and similar measures.	