

Nevada Patient Protection Commission

9/21/22 Meeting Agenda Attachment

Agenda #5: Review and Discussion of PPC Letter of Support for Subject 1, Topic 1 and Subject 2, Topic 6

- **Subject 1, Topic 1:** *Explore opportunities to provide basic health care coverage to infants, children and young adults up to age 26 who are ineligible for full Medicaid coverage under federal law due to their current residency or immigration status. This includes hiring an expert vendor to develop recommendations to the PPC on options to achieve this goal with non-federal, available revenue sources, including braiding local government, private grant, philanthropic, and/or state resources to support this effort. Among the options considered by the vendor shall include a limited, state-funded Medicaid benefit for this population, similar to California’s recent effort to cover this population that leverages limited federal Medicaid funds available to this population for emergency services as part of this benefit. The vendor shall also be asked to conduct a return-on-investment study of at least two options selected by the PPC to inform future proposals and budget requests as they relate to addressing the growth in health care costs related to the health status of this population. The PPC must procure a vendor to complete the analysis at no greater than \$200,000.*
- **Subject 2, Topic 6:** *Create a Prescription Drug Affordability Board. Expand on NRS 439B.630 and set “allowable rates” for certain high-cost drugs identified by the Board.*

Agenda #6: Highlights of Nevada Consumer Healthcare Experience State Survey (CHESS) Findings

Will discuss highlights of findings of the Nevada survey on healthcare affordability concerns and support for policy solutions at the state level.

Agenda #7: Cost Growth Benchmark Accountability Mechanisms in Three States, Findings from a Study of Massachusetts, and Potential Accountability Mechanisms for Nevada

Three states have established cost growth benchmark accountability mechanisms: Massachusetts, Oregon and California. These include performance improvement plans, public testimony administrative fines and financial performance penalties. A recent study of Massachusetts’ cost growth benchmark accountability mechanisms performed by Mathematica assessed the application of the mechanisms by Massachusetts to date. The PPC will discuss the approaches in these three states and their potential application in Nevada.

Agenda #8: Deep Dive on Options for Health Care Cost Growth Mitigation Strategies: Revisit of Price Caps and Price Growth Caps; and Prescription Drug Affordability Strategies

Prescription drug affordability strategies to be discussed include:

- Controlling prescription drug price growth by imposing financial penalties on manufacturers of drugs with “unsupported” price increases, or on manufacturers for selling drugs that grow at rates faster than inflation.
- Establishing a prescription drug affordability review board authorized to establish upper payment limits for drugs with excessive prices or price increases.
- Strengthening the transparency of prescription drug pricing by requiring manufacturers to publicly justify unreasonable or excessive prices.
- Reference pricing, typically to the prices of Canadian drugs.
- Increasing oversight and regulation of pharmacy benefit managers.