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### National Groups:

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Industry Advisory Group (IAG)

National ADAP Working Group (NAWG)

August 7, 2025

Minnesota Prescription Drug Affordability Board Minnesota Department of Commerce 85 7th Place East, Suite 280 St Paul, MN 55101

## **RE: Examining Affordability**

Dear Honorable Members of the Minnesota Prescription Drug Affordability Board,

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 very 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.

# **Establishment of Defined Affordability Parameters is Imperative**

We enthusiastically support your deliberate focus on affordability inquiry. Your survey to the PDAAC on defining affordability indicates your understanding of the need for a 360-degree examination of affordability impacts. Understanding that patient costs are also a by-product of system costs, we encourage you to prioritize patient affordability, as it is a distinctly separate issue from system affordability.

As you develop your work, we also encourage you to engage in multiorganizational collaboration with various Minnesota state entities to examine how affordability concerns manifest in the Medicaid system, 340B entities, FQHCs, and more. It is also essential to explore actions that can improve affordability beyond cost caps, such as upper payment limits. **RE: Examining Affordability** 

August 7, 2025 Page Two

Most importantly, in your ongoing development, please consider ways to foster robust patient engagement and gather feedback on what affordability truly means. Statutory elements and artificial metrics, such as WAC, are not indicators of patient affordability. Patients' out-of-pocket costs include patient cost sharing, which is a product of insurance plan design resulting from PBM influence, in addition to costs associated with things like transportation to clinicians and pharmacies.

Successful affordability remedies can only occur once you specifically identify your affordability challenges and define what a successful solution to those challenges looks like. Furthermore, it is imperative to ensure your desired solution effectively solves your affordability challenges by establishing ways to monitor the outcomes of your chosen solutions.

We are open to continued communication and look forward to being one of many partners in your success.

Respectfully submitted,

Rames Li

**Ranier Simons** 

Director of State Policy, PDABs

Community Access National Network (CANN)

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On behalf of Jen Laws President & CEO

Community Access National Network