



April 14, 2026

The Honorable Erin Koegel, Co-Chair Commerce Finance and Policy Committee  
The Honorable Tim O'Driscoll, Co-Chair, Commerce Finance and Policy Committee  
Minnesota House Commerce Finance and Policy Committee Members  
Minnesota House of Representatives  
Capitol Room 120, Minnesota State Capitol  
Room G-15 Capitol  
St. Paul, MN 55155

Re: **HF 4881 – Article 2 - Eliminating the Prescription Drug Affordability Advisory Council**

Dear Co-Chairs Koegel and O'Driscoll and Members of the Commerce Finance and Policy Committee:

The Pharmaceutical Care Management Association (PCMA) is the national association of America's pharmacy benefit managers (PBMs). We appreciate the opportunity to comment on HF 4881.

### **About PBMs**

PBMs are hired by employers, unions, government programs and others to drive down prescription drug costs and administer prescription drug plans for more than 289 million Americans. Before getting into specifics on HF 4881, here are four things to know about PBMs:

- PBMs are the only part of the drug supply chain whose primary role is to lower prescription drug costs. On average, they save patients and families about \$1,154 per person each year.
- PBMs are extremely effective at reducing prescription drug costs for employers and patients, which is why some industries that profit from high drug prices oppose them.
- For the enormous savings and value that PBMs provide, they operate on thin profit margins.
- Hiring a PBM is optional. Employers, unions, government programs, and others choose to use PBMs because they help lower drug costs and manage prescription benefits more efficiently. PBMs negotiate lower drug prices, process claims, and perform safety checks.

### **About HF 4881 – Article 2**

PCMA has concerns with Article 2 of HF 4881, which would eliminate the Prescription Drug Affordability Advisory Council (PDAAC). Minnesota established the PDAAC to advise

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Minnesota's Prescription Drug Affordability Board (PDAB) and represent stakeholders' views. By eliminating the PDAAC, this will not only take away stakeholders' representation but also remove a crucial informational and educational element from the PDAB.

The [National Academy for State Health Policy \(NASHP\)](#)<sup>1</sup> notes that PDAACs bring together diverse parties, including manufacturers, employers, insurers, providers, researchers, and consumer advocates, to advise the board on complex drug cost issues. By including industry experts (i.e., stakeholders), PDAACs can provide expert input and stakeholder perspectives, including potential risks and unintended consequences.

For these reasons, we ask that you not eliminate the PDAAC.

Please feel free to contact me should you have any questions.

Sincerely,

A handwritten signature in blue ink that reads "Michelle Mack".

Michelle Mack  
Senior Director, State Affairs  
Phone: (202) 579-3190  
Email: [mmack@pcmanet.org](mailto:mmack@pcmanet.org)

Copy: Eamonn Schmitz, Office of Governor Tim Walz

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<sup>1</sup> National Academy for State Health Policy, 2019. "Center for State Rx Drug Pricing: Prescription Drug Affordability Review Board Q & A", [https://www.nashp.org/wp-content/uploads/2019/04/Final-Prescription-Drug-Affordability-Review-Board-QA-4\\_1\\_2019.pdf](https://www.nashp.org/wp-content/uploads/2019/04/Final-Prescription-Drug-Affordability-Review-Board-QA-4_1_2019.pdf).