**Responding to Pharma Threats that Upper Payment Limits Will Harm Patients**

*When pharma and allies say that medicines will not be available if there is an upper payment limit – they are saying companies will* ***retaliate with product boycotts****.*

* The worry that drugs will not be available because of an upper payment limit is a worry that a pharma company would make a business decision to hold patients hostage (which we do not believe they will do)
* These threats of a **retaliatory product boycott** show pharma’s true colors – profits BEFORE people. Profits at all costs, even if it means doing medical harm to their own patients.
* These are outrageous threats.
* Physicians and others who oppose a PDAB because they find pharma’s outrageous threats to be appropriate and worth repeating should do their homework. Aligning with PhRMA to oppose PDAB harms patients and those doing so knowingly should be ashamed.

*A PDAB and upper payment limits would INCREASE access through INCREASED sales of important pharmaceuticals. So, it’s confounding/perplexing/shocking that pharma threatens to cut off their patients from their medicines when a PDAB achieves their goals of increased sales volume.*

* Why is this line of argument even remotely acceptable?
* We should all be outraged that pharma thinks it has unfettered power to do even more harm to people than their arbitrarily high prices, which routinely harm so many of us.
* Since when are more product sales a bad thing?
	+ Pharma won’t accept increased sales simply because our State has the audacity to challenge their monopolistic power and control over the market and our lives.
* We are outraged at this pharma line of argument, which is pure intimidation since we know they will not actually impose a retaliatory product boycott
	+ For pharma, a sale is a sale. In all other developed countries with some form of price controls, pharma sells its products.

*Making drugs affordable will not upend pharma industry R&D*

* Upper payment limits in our State could not possibly have a meaningful effect on industry global revenues
* We are talking about a small number of very costly drugs sold in one state
* Pharma spends very little on R&D relative to spend on marketing drugs and seeking to extend patent monopolies to keep prices high
* What would pharma do without R&D spending?
	+ There is no future for a brand name drug company without spending to bring drugs to market.
	+ There is enough money in pharma coffers to fund all the R&D consumers need
	+ The pharma industry is the most profitable industry and will remain so under a PDAB and UPLs and will continue to have access to capital
	+ Let’s remember that taxpayers fund the research that leads to drugs that companies sell. NIH holds the patent to mechanism used in many of the COVID vaccines. The government took all the risk for the industry in COVID vaccines – even paying for the manufacture of the vials and products of tens of millions of vaccine doses.

**We are not hostages.**