



Recent Study Highlights the Need for More Minority Inclusion in Drug Pricing Policy

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The Journal of the American Medical Association (JAMA) recently released its new report on health disparities, and the numbers, while not unexpected, still shocked the conscience. Soaring disparities in life expectancy and other indicators of health point to the continued inability of the healthcare system to treat African Americans.

It is clear that access to prescription drugs is a major obstacle to health equity. It is important to note that with the ending of the public health emergencies, radical politicians are seeking to further restrict access to quality health care for African Americans. For example, the Republicans in Congress would rather default on the public debt than give underserved Americans reasonable access to Medicaid.

In addition to this, the new rules set up in the Inflation Reduction Act are setting up a bifurcated pricing structure that could harm underserved Americans. In reports by healthcare experts, it is noted that the new rules cut reimbursement for small biological medications, such as cutting-edge cancer drugs.

This confluence of circumstances is almost certainly going to have negative consequences for the health of African Americans. One question is why policymakers refuse to engage communities on the front end to make sure policies are helpful or at least not harmful to underserved people.

From an African American point of view, these last few years have demonstrated how little our views are considered in these conversations. From the failure of the PPP program to the lack of inclusion in the ARPA spending, Black Americans have been entirely disenfranchised and left out of the largess of federal expenditures.

Hopefully, we can fix the drug pricing disparities so that they don't cause more harm to an already bad situation.



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