

Via Electronic Submission

June 15, 2026

Shelley Bailey, Board Chair
Oregon Prescription Drug Affordability Board
pdab@dcbs.oregon.gov

Dear Board Chair Bailey:

Johnson & Johnson Innovative Medicines respectfully submits this comment on TREMFYA® along with the “2026 Manufacturer Feedback Form” (“Form”) to the Oregon Prescription Drug Affordability Board (“PDAB” or “Board”). We ask that the Board take the following actions:

- Find that TREMFYA does not create affordability challenges for Oregon patients and the state health system;
- Increase the transparency of the drug selection and affordability process; and
- Publicly release draft affordability reports at least 30 days in advance of reviewing drugs.

A. TREMFYA does not create an affordability challenge.

We share the Board’s goal of improving access and affordability to lifesaving medicines for Oregon patients. However, we oppose the affordability review process because it may result in unintended consequences, including increased patient cost-sharing and reduced access. To the extent that an affordability review is conducted for TREMFYA, TREMFYA should be deemed affordable for the following reasons:

1. The PDAB’s data supports removing TREMFYA from the list of drugs deemed unaffordable.

Last year, the Board reviewed 2023 data and determined that TREMFYA did not pose an affordability challenge for patients or the state health care system. This year, the Board reviewed 2024 data and selected 10 drugs for review out of a preliminary list of 137.¹ Yet, based on the PDAB’s “2026 Drug Review Preliminary List” data, TREMFYA does not rank among the top 10 drugs on metrics that the Board has prioritized, including:²

- Number of prescriptions
- Number of enrollees
- Total annual net of rebate spending
- Year-over-year increase

¹ 2026 Drug Review Preliminary List v02, <https://dfr.oregon.gov/pdab/Pages/data.aspx>

² 2026 Drug Review Preliminary List v02, <https://dfr.oregon.gov/pdab/Pages/data.aspx>

- Average cost net of rebate per prescription
- Total annual net of rebate spending per enrollee
- WAC price percentage change between 2023 and 2024

When identifying and selecting drugs for affordability reviews, Oregon law requires the Board to consider drugs appearing on health plans' top 25 most prescribed, most costly, and greatest increase lists, as well as manufacturers' new drug and price increase lists, as reported by the Oregon Drug Price Transparency (DPT) Program.³ The PDAB's "2026 Drug Review Data" spreadsheets inaccurately state that TREMFYA appeared on all three "top 25" lists in 2024.⁴ In actuality, the 2024 DPT Report ***does not include TREMFYA on any of the three lists.***⁵ In fact, TREMFYA has never appeared on any of the "top 25" lists in any of the annual DPT reports since they were first published in 2019 through the most recent report released in 2025.⁶ Likewise, TREMFYA ***does not appear on the manufacturers' new drug or price increase lists either.***⁷ Therefore, it is unclear why the PDAB believes TREMFYA is unaffordable.

2. Payers ultimately determine what patients pay for their medications.

J&J's 2024 Transparency Report shows that our average net prices across our portfolio have declined by a compounded 18.2 percent since 2016.⁸ In 2024 alone, J&J also paid \$14.7B billion in rebates and discounts to private insurers and PBMs—an 8.8-fold increase since 2016—in efforts to lower out-of-pocket costs for patients.⁹ Despite these endeavors, patients are still not directly benefiting from lower net prices. The "Oregon Drug Price Transparency Report: Pharmacy Benefit Manager Data – 2025" supports this assertion, showing that PBMs and plans often do not pass the large majority of rebates through to patient.¹⁰ To improve access and affordability, PDAB reviews should focus on the true drivers of patient out-of-pocket costs—PBMs and health plans.

3. J&J offers multiple programs to help support patient access.

To the extent that patients cannot afford TREMFYA, J&J offers multiple programs to support patient access. Through the "TREMFYA withMe" Savings Program, eligible patients in Oregon with private insurance may pay as little as \$0 per dose.¹¹ Additionally, through the Johnson &

³ OR Admin Reg 925-200-0010; OR Rev. Stat. 743.025; OR. Rev. Stat. 646A.689

⁴ <https://dfr.oregon.gov/pdab/Pages/data.aspx>

⁵ <https://dfr.oregon.gov/drugtransparency/Documents/20241121-dpt-hearing%2FPrescription-Drug-Price-Transparency-Annual-Report-2024.pdf%23page%3D43&tabId=2103852370&clen=11119339&chunk=true&referer=https%3A%2F%2Fdfr.oregon.gov%2Fdrugtransparency%2FPages%2Finsurers.aspx>

⁶ See Insurer Report Data, annual reports from 2019 through 2025,

<https://dfr.oregon.gov/drugtransparency/Pages/insurers.aspx>

⁷ <https://dfr.oregon.gov/drugtransparency/data/Pages/new-drug-reports.aspx#drug>

⁸ <https://policyresearch.inj.com/2024transparencyreport>

⁹ <https://policyresearch.inj.com/2024transparencyreport>

¹⁰ <https://dfr.oregon.gov/drugtransparency/Documents/DPT-pbm-data-2025.pdf>

¹¹ https://asset.injwithme.com/document/TREMFYA-withMe_Savings-Program-Web-Flashcard.pdf

Johnson Patient Assistance Program, TREMFYA may be provided at no cost to eligible patients meeting certain conditions, including patients who are uninsured, are enrolled in a commercial plan, or have government coverage, such as Medicare or Medicaid.¹²

B. The Drug Selection and Affordability Processes Lacks Transparency and Consistency

We remain concerned that the Board’s drug selection and affordability processes are not transparent. In addition to the concerns around data points raised above, the Board is currently seeking data from various stakeholders using “Feedback Forms.” Yet, individuals completing the forms are not required to submit any contact information, and there is no method to verify the accuracy of the data or ensure the person completing the form has provided any verifiable identification or has relevant knowledge related to the product under review. This creates risks related to authenticity of the data, with the potential for manipulation or duplication of submissions, calling into question confidence in the data collected and its use in decision-making.

Likewise, the types of information that the PDAB collected for their data spreadsheets, rubric, and affordability reports have changed from the prior year. Yet, there is a lack of transparency regarding what changed or the rationale for those changes, which limits stakeholders’ ability to understand the analytical framework that the PDAB is using or assess comparability across review cycles. The process used to identify drugs for affordability review is also not clearly defined. For example, it is unclear how the current list of selected drugs was developed and whether the criteria used could be replicated. Additionally, the Board has indicated that it may prioritize different methodologies across drug reviews or from year to year. Variable methodologies also introduce inconsistency, subjectivity in outcomes, and challenges in comparing findings across drugs or time periods. Therefore, the Board should create more transparency around its processes and standardization so that stakeholders can better understand those processes and engage appropriately.

C. The Board should release draft affordability reports at least 30 days prior to reviewing drugs.

Finally, the PDAB has indicated that it will release drug affordability reports just one week before the Board meeting at which the review will occur.¹³ Given that public comments must be submitted 48 hours before a Board meeting, stakeholders effectively have only three business days to review reports and prepare comments. This limited timeframe does not allow stakeholders to adequately assess the accuracy or completeness of the PDAB’s analysis or provide meaningful, informed feedback. This limits the effectiveness of stakeholder engagement. We ask that the Board publish staff reports at least 30 days in advance of the scheduled drug reviews.

¹² *Id.*

¹³ <https://dfr.oregon.gov/pdab/Pages/affordability-review.aspx>

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J&J remains committed to engaging constructively with stakeholders to improve patient access and affordability to innovative medicines. We know that patients are counting on us to develop and bring medicines to market. We live this mission every day and are humbled by the patients who trust us to help them fight their diseases and live healthier lives.

Sincerely,

A handwritten signature in cursive script that reads "Mike Valenta".

Michael Valenta
Chief Strategic Customer Officer, Strategic Customer Group
Johnson & Johnson Healthcare Services, Inc