



Frosh (D), say it could survive such legal challenges because it addresses how much can be paid for medications — rather than how much can be charged for them.

“You have this patent law that says patent holders can charge whatever they want for 17 years, in effect, but that’s a different question from whether people pay it,” Frosh said.

But other legal experts were skeptical.

“This legislation looks like it’s essentially saying to patent holders that there’s a certain amount we just won’t allow you to charge,” said Christopher May, a patent attorney who teaches law at the University of Maryland. “There’s a pretty strong argument that Maryland is going to have the same sort of problems that D.C. had.”

The measure has more than enough House sponsors to pass in that chamber, but is one sponsor shy of a majority in the Senate. It is a top priority of the powerful Legislative Black Caucus, whose members say they hear frequently from constituents about the high price of prescription drugs, and has been unanimously endorsed by the Montgomery and Prince George’s county councils and the Annapolis and Baltimore city councils.

Nationally, 74 percent of Democrats and 71 percent of Republicans support allowing an independent group to oversee prescription-drug pricing, according to [a 2017 survey from the Kaiser Family Foundation](#).

“A lot of people have to choose between buying food, paying rent or their prescribed medications,” Peña-Melnyk said. “At what point are the profits enough? You look at how much the prices of drugs have gone up over the years and it’s shocking.”

Gov. Larry Hogan (R) has not taken a position on the legislation.

Pharmaceutical industry groups note the high research and development

costs to bring new drugs to market, and say price controls diminish the incentive for drug companies to invest in innovative medicines.

“If we truly want to help Maryland families, we shouldn’t recycle more failed ideas, but should instead start a conversation to tackle the underlying problems patients face every day at the pharmacy counter,” said Caitlin Carroll, a spokeswoman for Pharmaceutical Research and Manufacturers of America.

Several states, including California, New York and Vermont, require drugmakers to disclose how their products are priced when the costs have risen dramatically. But none has created a rate-setting commission similar to the one Maryland lawmakers have proposed.

“Other states are paying attention to what we’re doing in Maryland,” said Larry Zarzecki, a resident of Chester, Md., who suffers from Parkinson’s disease and has been pushing lawmakers to support the bill. “Hopefully this becomes groundbreaking and other states follow suit.”

Greg Dolin, a University of Baltimore law professor, said the bill could cause drug companies to halt Maryland sales of affected products. “The whole point of a patent is that it gives exclusive rights to an invention, including the right not to sell it at all,” he said.

Prescription-drug spending nationwide jumped nearly 9 percent in 2015 and more than 12 percent in 2014, according to [data from the U.S. Centers for Medicare and Medicaid Services](#). Although growth slowed to 1.3 percent in 2016, the most recent year for which data is available, it is projected to increase over the next decade by [an average of 6.3 percent a year](#).

John O’Neil, a 60-year-old resident of Salisbury, Md., living on about \$36,000 a year from disability checks and his pension from a baking company, struggles to pay for a blood-thinning medication he needs for an irregular heartbeat. At times, he substitutes aspirin for the brand-name drug, which costs him more than \$4,000 a year beyond what his Medicare plan will





