



Copay Accumulator Adjustment Policies: Creating Barriers to Treatment

Stephanie Hengst
Manager, Policy & Research
The AIDS Institute

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Overview

- Health Insurance Plan Design, Patient Costs, Copay Assistance
- What are Copay Accumulator Adjustment Policies
- Copay Accumulator Policies Across the US
- Key Findings

Definitions

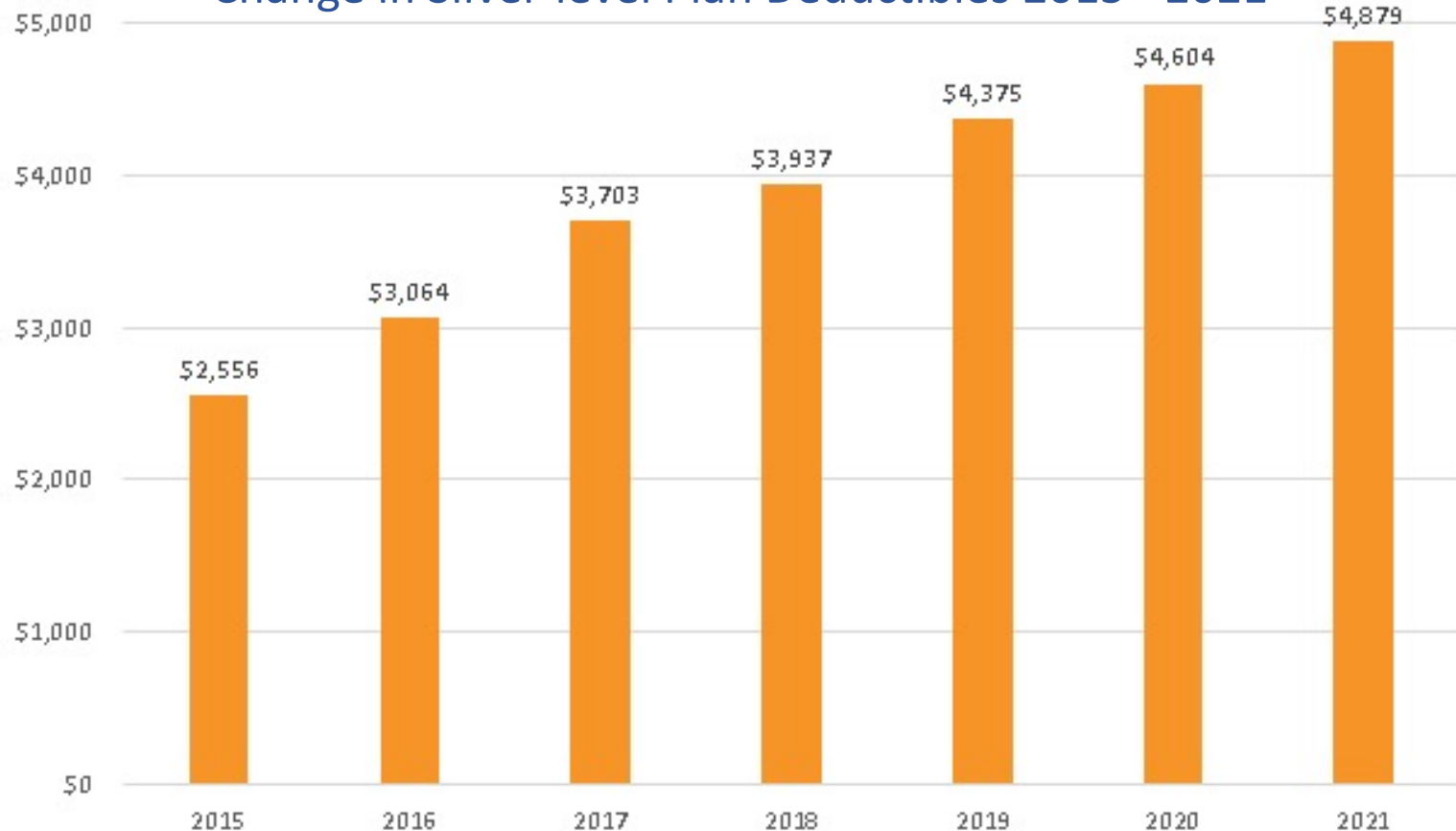
Cost-sharing: The share of costs for services that the patient must pay (sometimes called “out-of-pocket costs”). Can be in the form of a copayment, coinsurance, or an annual deductible

Copay Assistance: Financial assistance from a charitable foundation or drug manufacturer to help patients pay meet cost-sharing requirements for medicines that are expensive or new. Mostly available for “specialty” medications.

Copay Accumulator: A policy adopted by health plans that allows them not to count the value of copay assistance toward the patient’s deductible or out-of-pocket limit.

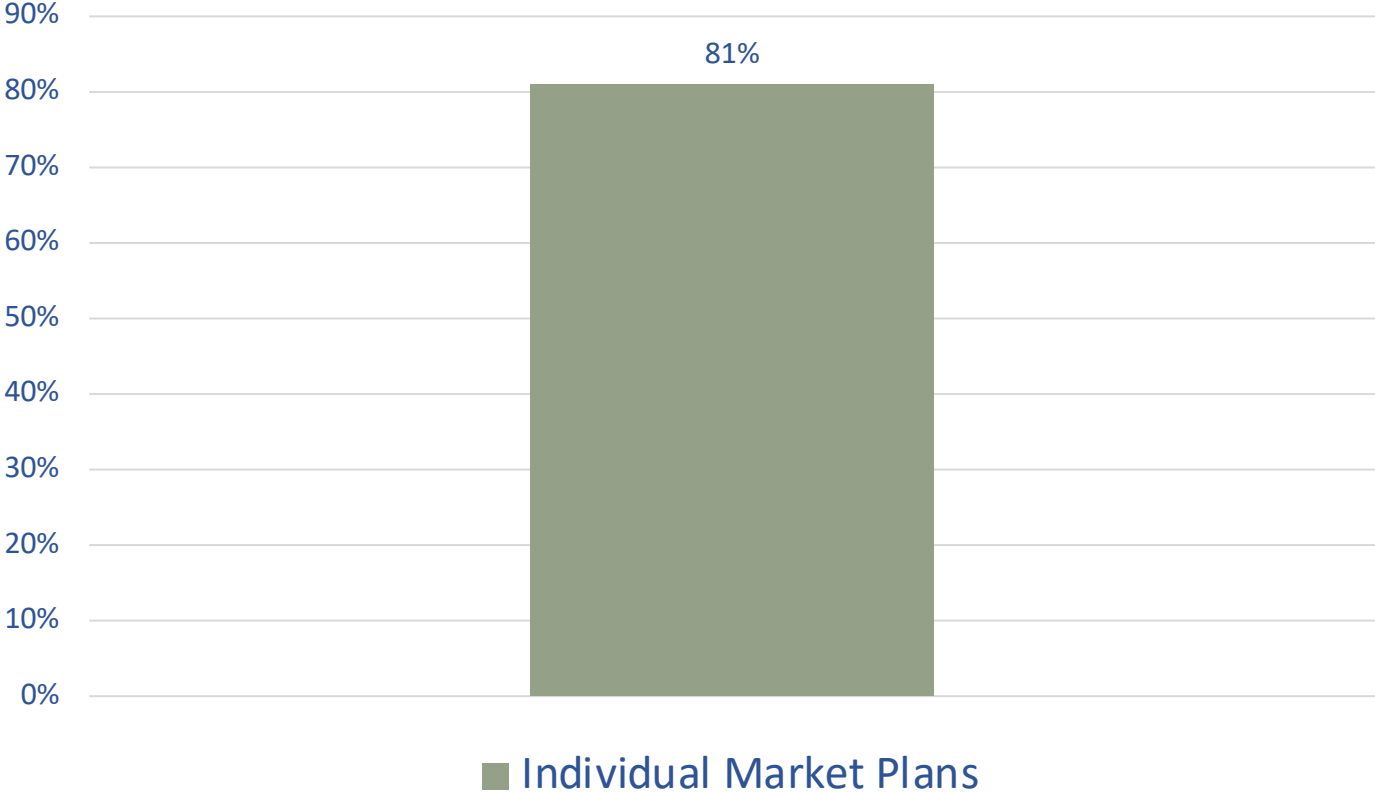
Why Is Copay Assistance Needed?

Change in Silver-level Plan Deductibles 2015 - 2021



Plan Benefit Design Changes

% of Plans using Coinsurance for Specialty Rx Tier



How Copay Accumulator Policies Work

Example:

A patient is enrolled in a plan with a \$1,000 deductible

Patient has copay assistance to pay their \$100 monthly Rx bill

- **No Copay Accumulator:**

- The \$100 copay assistance will count toward their deductible
- $\$1,000 - \$100 =$ the patient only has \$900 remaining to reach their deductible

- **Copay Accumulator:**

- The \$100 copay assistance will not count toward their deductible
- $\$1,000 - \$0 =$ the patient still has \$1,000 remaining on their deductible

Copay Accumulators

- Plan deductible: \$4,600
- Annual out-of-pocket maximum: \$8,550
- Cost-sharing for specialty tier prescription: 50% *after deductible is met*
- Monthly medication cost: \$1,680
- Copay assistance total: \$7,200

Scenario 1: Plan Without a Copay Accumulator Program

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Insurer collects
Copay Assistance	\$1,680	\$1,680	\$1,240	\$840	\$840	\$840	\$80	\$0	\$0	\$0	\$0	\$0	\$7,200	\$8,550
Remaining Deductible	\$2,920	\$1,240	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Consumer Pays	\$0	\$0	\$0	\$0	\$0	\$0	\$760	\$590	\$0	\$0	\$0	\$0	\$1,350	

Deductible is met

Copay assistance limit is met

Out-of-Pocket maximum is met

Copay Accumulators

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Scenario 2: Plan With a Copay Accumulator Program

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Insurer collects
Copay Assistance	\$1,680	\$1,680	\$1,680	\$1,680	\$480	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,200	
Remaining Deductible	\$4,600	\$4,600	\$4,600	\$4,600	\$3,400	\$1,720	\$40	\$0	\$0	\$0	\$0	\$0		\$15,160
Consumer Pays	\$0	\$0	\$0	\$0	\$1,200	\$1,680	\$1,680	\$40	\$840	\$840	\$840	\$840	\$7,960	

Deductible is met

Copay assistance limit is met

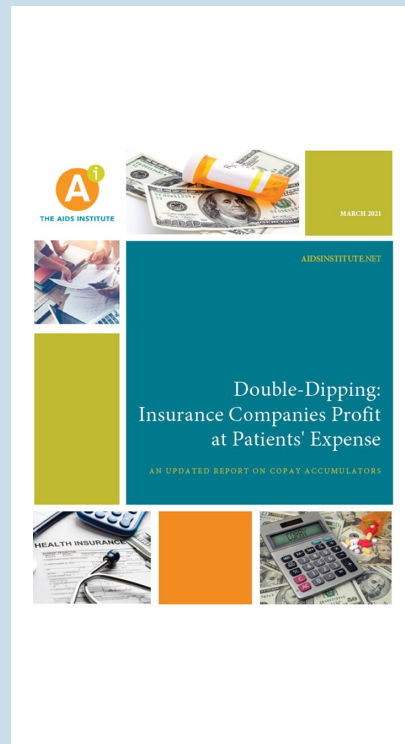
Out-of-Pocket maximum is met



Documenting the Problem

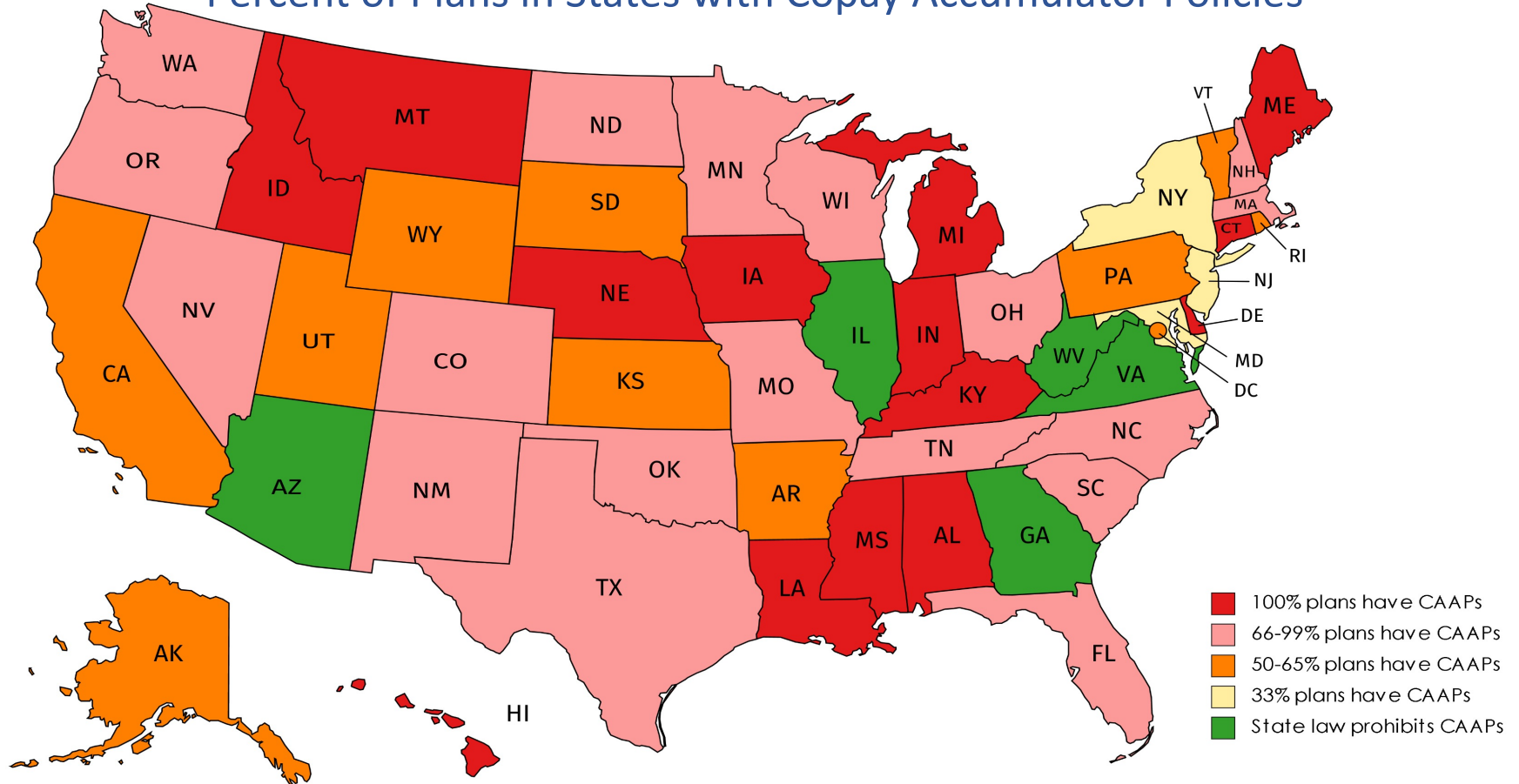
- 45 states + DC have at least 1 plan with a CAAP
- 14 states, every plan has a CAAP
- 32 states, 2/3 or more plans have CAAPs

https://aidsinstitute.net/documents/2021_TAI_Double-Dipping_Final-031621.pdf



National Overview

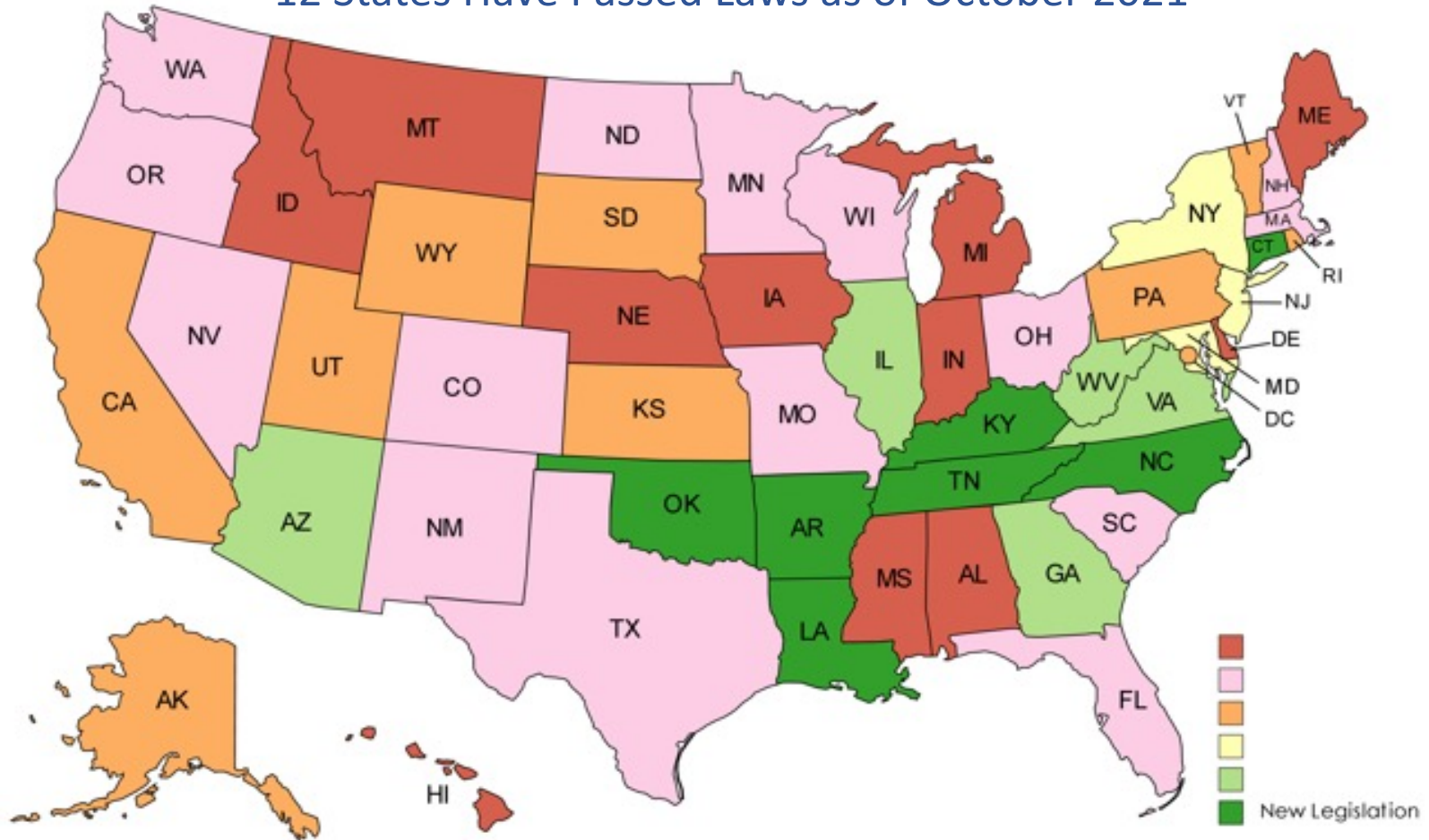
Percent of Plans in States with Copay Accumulator Policies



<https://aidsinstitute.net/protecting-patients-and-removing-barriers-to-care/copay-accumulator-policies-in-states-2021-aca-plans>

Changes in Legislation

12 States Have Passed Laws as of October 2021



Key Finding: Lack of Transparency

HHS does not require insurance companies to make information regarding copay accumulator policies available to patients shopping for coverage.

- In 7 states, no plans made this information available online
 - More than a quarter (28%) of plans **with copay accumulator policies** did not make this information available online
 - 42% of all plans in all states did not make this policy information available to consumers prior to enrollment

Sample Policy Language

Plan	Copay Accumulator Language	
Ambetter	<p>Similarly, if we determine payment was made for deductibles or cost sharing by a third party, such as a drug manufacturer paying for all or part of a medication, that shall be considered a third party premium payment <u>that may not be counted towards your deductible or maximum out-of-pocket costs.</u></p>	
Bright Health	<p>When calculating Your contribution to any out-of-pocket maximum, deductible, copayment, coinsurance or other applicable cost sharing requirement, <u>We will include any amount paid by You or on Your behalf for a prescription drug that is either:</u></p> <ul style="list-style-type: none"> • Without a generic equivalent; or • With a generic equivalent where You have obtained access to the prescription drug through any of the following: <ul style="list-style-type: none"> • Prior authorization • A step therapy protocol • Our exceptions and appeals process. 	
Florida Blue	<p>The Exclusions subsection is amended by deleting item 23 in its entirety and replacing with the following: We <u>may not apply</u> manufacturer or Provider cost share assistance program payments (e.g., manufacturer cost share assistance, manufacturer discount plans, and/or manufacturer coupons) to the Deductible or Out-of-Pocket maximums.</p>	

Be An Advocate

If your health insurance plan has a copay accumulator policy, please reach out to share your experience!

Patient advocate groups are working around the US to pass legislation in states, and get the current administration to pass regulations to do away with this harmful practice.

All Copays Count Coalition

Thank You

Stephanie Hengst
Manager, Policy & Research
SHengst@taimail.org

The AIDS Institute
www.aidsinstitute.org
@aidsadvocacy

