

Copay, (or Accumulator) Adjustment Programs: A New Threat to DMT Access

In the belief that Drug Manufacturers' Patient Assistance Programs are discouraging patients and their doctors from choosing generics or other less costly Rx alternatives, some employer health plans and Pharmacy Benefit Managers (PBMs) are preventing patients from making best use of Copay Assistance programs and other types of drug manufacturers' financial assistance. The Society is concerned about these so-called Copay, or Accumulator Adjustment Programs, and is trying to learn about the impact of them from people with MS, healthcare providers, coalition partners and others. As described below, these "programs" are jeopardizing access to care for people with MS and others, especially if they are in a high deductible health plan.

What are Copay Adjustment Programs?

Copay, or Accumulator Adjustment Programs are relatively new practices that some PBMs and insurers are using to prohibit Rx coupons or other forms of Rx manufacturer assistance from applying toward a patient's annual deductible or out-of-pocket maximum amounts. Different types of patient assistance may be targeted, including discount coupons, copay cards, or direct payments by a drug manufacturer or nonprofit group to the insurer for some or all an enrollee's cost-share amount for a prescription drug.

What does this mean for people with MS receiving Copay Assistance?

Respondents to an online survey in 2015 suggest as many as 40% of people with MS in the US rely on Copay Assistance Programs to maintain access to their DMT, so it's clear that barriers to these resources pose serious threats to MS care. Exactly how and when these practices can impact people may vary depending on how their Copay Assistance Program is arranged and coordinates with their insurance plan or pharmacy. To our knowledge, people with MS affected by these programs are not switching treatments or dropping their copay assistance, but they are experiencing higher cost burdens as they struggle with unexpected expenses during their deductible period and/or copays.

What Do Copay Assistance Programs have to do with annual deductibles?

It is well known that people with chronic and high cost conditions like MS face significant financial hardship each year until their deductible has been met and the full relief of their health insurance kicks in. This hardship is made worse by Copay Accumulator Programs because preventing copay assistance from applying to a person's deductible means it takes them longer to reach the end of the deductible period. Because patients are responsible for 100% of all their health care costs until the deductible is satisfied, prolonging the deductible period can put other medical needs, such as doctors' visits, rehab therapies, MRIs or other medications, financially out of reach. Ironically, people

with MS on copay assistance impacted by a Copay Accumulator Program could maintain access to their MS drug during their deductible period, but nothing else.

How do people relying on patient assistance find out that their copay assistance no longer applies to their annual deductible or out-of-pocket maximum?

It seems that people targeted for these programs are learning of it from different sources – their insurer, PBM, Copay Assistance Program, specialty or mail order pharmacy. Understandably, people affected by these practices may contact any of these sources or others in search of an explanation and remedy since the practical implications, or what, if anything, can be done may not be clear.

Who is most likely to be impacted by these programs?

We believe that Copay Accumulator Programs are most commonly used by large self-insured employer or group health plans, which operate outside the scope of most state health insurance laws and regulatory oversight. Additionally, a recent [Kaiser Health News](#) article suggests the number of employer health plans considering adopting Copay Accumulator Programs in the near future is high, and they have been proposed as a cost savings measure for Medicare Part D plans as well.

Are all types of Patient Assistance Programs being affected?

No. To our knowledge, patient assistance to help MS and other patients pay for high-cost drugs provided directly from drug manufacturers are being targeted, but Copay Assistance Programs administered by nonprofit groups, such as [The Patient Advocate Copay Relief Program](#) or [The Assistance Fund](#), are not. Many coupons are also affected, but because these are not generally used to access DMTs, the Society is not monitoring them as closely.

Are Copay Accumulator Programs against the law?

To our knowledge, Copay Accumulator Programs are not in violation of any federal or state laws. In fact, legislation proposed in a few states would have expanded these programs in the mistaken belief that their adoption could help lower prescription drug costs for health plan enrollees in those states.

What can someone do if they have been affected by a Copay Accumulator Program?

- **Tell their employer's Human Resources department.** Encourage affected individuals to provide as many details and supporting documents as possible and describe how this practice could impact their finances and ability to stay on treatment. The employer may have adopted this program in the belief that it is a

cost-savings strategy before truly understanding the negative impact it could have on employees or their dependents. If this is the case, help educate them about the real effect of these practices and encourage them to abandon their use of copay accumulators.

- **Call their insurer or health plan administrator to ask questions.** If someone you know has been affected by this type of policy and has had to switch to another drug or has been unable to fill their prescription, tell them to call their insurer. We do not believe that insurers want to implement policies that lead to medication nonadherence. But they won't know unless their enrollees complain.
- **Contact the Rx Patient Assistance Program.** Ask if there is any other way to get the help that's needed to maintain financial assistance, such as a program administered by a nonprofit organization.
- **Tell us!** We want to know about your experience, so we can be better informed when we are advocating for people with MS. The media is very interested in understanding and reporting on this issue, and we have received numerous media requests to highlight people with MS who are experiencing this issue. Please forward a short description and contact information for any person with MS personally impacted by this type of change to their health insurance benefits to Kim Calder (Kimberly.Calder@nmss.org, or 212-476-04500).

What is the Society's position on Copay Accumulator Programs?

The Society's [Access to MS Medications](#) campaign seeks to address barriers to the affordability and transparency of the costs and coverage of these treatments, and the process of accessing them. Copay Accumulator Programs create additional barriers to access for certain people with MS. Until real, sustainable solutions to the challenge of affordably accessing medications is realized, we cannot take away the assistance that so many now rely on to stay on their treatments.

What is the MS Society doing to help address the problems Copay Accumulator Programs are causing for people with MS?

The Society is working in coalition with other patient advocate groups whose constituents are also being impacted by these programs. Our intent is to gather and share information, patient stories and resources to promote awareness, understanding and dialogue about the consequences of impeding access to care so that we may permanently eliminate this barrier to ongoing treatment.

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