AETNA AGREES TO SIGNIFICANTLY REDUCE PATIENT COSTS FOR HIV DRUGS NATIONWIDE
Sets Example for Other Insurers to Lower Costs so Patients Can Access Medications

Washington, DC – The AIDS Institute welcomes a major announcement by Aetna that it will significantly reduce patient costs for HIV medications nationwide in the qualified health plan marketplace.

“This is a major victory for people living with HIV who rely on medications to remain healthy,” commented Carl Schmid, Deputy Executive Director for The AIDS Institute. “We thank Aetna for recognizing that charging excessive co-insurance is wrong and harmful to people with HIV who cannot afford the cost of their medications.”

In its announcement, Aetna, along with its Coventry plans, will move all but one HIV drug (an injectable fusion inhibitor) from a specialty tier to either a generic or non-preferred brand tier, lowering patient cost-sharing to co-payments ranging between $5 and $100, after deductibles are met. Currently, Aetna places almost all HIV drugs on the highest tier and charges beneficiaries co-insurance as high as 50 percent. This results in patient cost-sharing of about $1,000 a month for some popular HIV drugs, making it almost impossible for patients to access their lifesaving medications.

The AIDS Institute and the National Health Law Program (NHeLP) filed a complaint on May 29, 2014, with the U.S. Department of Health and Human Services, Office for Civil Rights, charging four Florida health plans, including Coventry, with unlawful discrimination against people living with HIV and AIDS. The four insurers placed all HIV medications, including generics, on the highest cost-sharing tiers with high levels of co-insurance. According to the complaint,
this discourages people with HIV/AIDS from enrolling in their plans. Such practices are prohibited under the Affordable Care Act’s non-discrimination provisions, which bar health plans from discriminating against individuals based upon disability and prohibit health plans from discouraging enrollment by people with significant health needs.

The U.S. Department of Health and Human Services earlier this year cautioned insurers that placing all or most drugs in a class or to treat a certain condition on a high cost tier may be discrimination.

Late last year, Aetna, in an agreement with the Florida Office of Insurance Regulation, lowered the cost of 4 brand HIV drugs to $200 per month and put HIV generic drugs on the generic tier. In reaction to that agreement, The AIDS Institute praised Aetna for this initial step, but noted it did not lower the cost of the majority of HIV medications, and was only for one year in the State of Florida. As part of the agreement, Aetna was required to meet with The AIDS Institute, NHeLP, and AHF. That meeting was held in Washington DC on January 28, 2015.

The cost-sharing reductions announced by Aetna are effective June 1, 2015 and will continue nationwide in the individual market through 2016. In its announcement, Aetna indicated that patients may access HIV drugs either through retail or mail order pharmacies and receive up to a 90-day supply.

While other insurers in Florida and around the country design their plans with reasonable cost-sharing for medications, a growing number are using co-insurance, making it more difficult for patients, especially those with chronic conditions, to access their medications. A recent study released by Avalere found that the proportion of bronze and silver plans using specialty tier coinsurance greater than 30% increased by 14 percent from 2014 to 2015.

“Aetna’s announcement will help ensure that people living with HIV/AIDS throughout the country will have greater access to essential medicines at a more affordable cost,” said Michael Ruppal, Executive Director for The AIDS Institute. “However, there are still many other insurers who are charging patients excessive costs for their HIV medications and this does not impact a patient’s non-HIV medications or other beneficiaries with other health conditions. We look forward to working with Aetna and other insurers to address continuing barriers to care and treatment, including inadequate drug formularies, high cost co-insurance & deductibles, and restricted networks for people with HIV/AIDS, hepatitis, and other chronic health conditions."

The AIDS Institute also calls upon the federal government to do its part and enforce the strong ACA non-discrimination provisions. Insurers will soon be
submitting their 2016 plans to the Center for Consumer Information and Insurance Oversight for review, and we hope there will be greater scrutiny of drug coverage, high cost sharing, and discriminatory benefit design.

The AIDS Institute and NHeLP are still awaiting action on its pending discrimination complaint filed against Coventry, Humana, Cigna, and Preferred Medical.

###

*The AIDS Institute is a national nonprofit organization that promotes action for social change through public policy, research, advocacy and education.*

For more information and to become involved, visit [www.TheAIDSInstitute.org](http://www.TheAIDSInstitute.org) or write to us at [Info@theaidsinstitute.org](mailto:Info@theaidsinstitute.org), and follow The AIDS Institute on Twitter @AIDSAdvocacy and Facebook at [www.facebook.com/The-AIDS-Institute](http://www.facebook.com/The-AIDS-Institute).