



THE AIDS INSTITUTE

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EVIDENCE MOUNTING OF DISCRIMINATION AGAINST PEOPLE WITH HIV BY SOME INSURANCE PLANS

Study Demonstrates Some Plans Put Every HIV Drug on Highest Tier, Stick Beneficiaries with Costs

Washington, DC – A [study](#) released this week conducted by Avalere Health offers growing evidence that certain plans offered through the marketplace are discriminating against people with HIV/AIDS and other health conditions by placing every drug in certain classes, including generics, on the highest tier and charging beneficiaries exorbitant amounts in cost-sharing.

In an analysis of 123 plans from all states, Avalere found that of the four classes of HIV drugs, between 27% and 39% of the plans placed every HIV drug, including generics, on the highest tiers, where patients are charged 30% or more in co-insurance. Of those plans, most are charging patients more than 40% co-insurance. [See [graphic](#).]

“We want the Affordable Care Act (ACA) to work, and we want it to work for people living with HIV/AIDS and others with chronic health conditions,” said Carl Schmid, Deputy Executive, The AIDS Institute. “But shifting the cost of medications to the patients is not only blatant discrimination but can lead to poorer health outcomes, since beneficiaries will not be able to afford and access their life-saving medications.”

Recently The AIDS Institute, along with the National Health Law Program, filed a discrimination [complaint](#) against four plans in Florida for placing every HIV drug, including generics, on the highest tiers. The Avalere analysis demonstrates that this practice is happening across the country and not only impacts HIV drugs, but other classes of medications that are important to maintaining the health of so many others.

“Plans can’t shift all the medication costs to beneficiaries,” added Michael Ruppel, Executive Director, The AIDS Institute. “We are hearing stories from all over the country of patients who are shocked by their high drug costs when they pick up their medications. They had no idea what their costs would be because the plans merely

state it will be a certain percentage. They have no idea that a 50% co-insurance could translate into over \$1,000.”

The AIDS Institute is recommending the Obama Administration take the following actions to address these growing concerns: 1) Review plans and enforce the ACA non-discrimination protections in order to weed out the bad plans; 2) Limit patient cost-sharing for medications to nominal amounts such as \$10, \$20, or \$50 per drug, consistent with typical employer-based and marketplace plans; and 3) Require plans to disclose clearly and fully the medication costs for patients, detailing real amounts the patient is expected to pay, rather than hiding these cost burdens with percentages.

Schmid concluded, “We want the ACA to work, but we have identified some serious issues as it relates to accessing medications. Given the importance of prescription drugs in securing better health outcomes, we trust they will be addressed.”

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

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