New Report Reveals Prevalence of Hidden Copay Accumulator Insurance Programs and Higher Costs for People Living with HIV/AIDS and Chronic Diseases

The AIDS Institute Releases Analysis Showing 33 States and Washington, D.C. Have at Least One Insurer With a Copay Accumulator Program Health Plan

Washington, DC – A new report by The AIDS Institute finds that copay accumulator programs for prescription medicines are becoming more prevalent, raising costs for patients with HIV/AIDS and many chronic conditions at the pharmacy counter. The report comes in the midst of a global pandemic and less than two months after the U.S. Department of Health and Human Services finalized its Notice of Benefit and Payment Parameters rule that allows insurance companies not to count copay assistance toward out-of-pocket limits for patients who have private health insurance.

The AIDS Institute conducted original research, reviewing individual market health plans in all 50 states and Washington, D.C., and documents containing descriptions of enrollee cost sharing and copay accumulator programs. The research found that copay accumulator programs are now widespread throughout the individual market in 33 states and the District of Columbia. In addition, the findings indicate that the language insurers use in policy explanations are ambiguous and often difficult to find, while some documents are not available until a person is enrolled in the plan.

Copay accumulator programs result in increased financial burdens for patients. For example, in a scenario without a copay accumulator program, a patient has a $1,000 deductible and $500 in copay assistance. The $500 copay assistance counts towards the patient’s deductible, meaning the patient only has to pay the remaining $500 to reach their annual deductible. With a copay
accumulator program, the $500 copay assistance will not count toward the patient’s deductible, resulting in the patient having to pay the full $1,000 to reach their deductible.

“It is ironic that even today, as we continue to struggle with the challenges brought on by COVID-19, insurance companies have been allowed to create yet another barrier preventing patients from being able to better afford the medications and treatments they need,” said Rachel Klein, Deputy Executive Director of The AIDS Institute. “This is a practice that must be immediately set aside – we’re calling on insurers, employers, policymakers and regulators at both the federal and state levels to stand with patients in saying enough is enough.”

To date, four states – Arizona, Illinois, Virginia, and West Virginia – have enacted legislation to address harmful copay accumulator adjustment program policies. With HHS’ decision to allow these policies, the focus now shifts to states and leaders in the private sector to help protect patients.

“Copay accumulator programs remove an invaluable safety net for patients to ensure they can afford their medicines by recognizing the growing out-of-pocket costs that are built into their health plans,” said Klein. “Reversing this harmful policy would directly help the millions of at-risk patients struggling with the impact of the global pandemic and other economic challenges.

For more information, visit [http://www.theaidsinstitute.org/federal-policy/patient-access](http://www.theaidsinstitute.org/federal-policy/patient-access).