



THE PROBLEM

Many people turn to patient assistance programs including co-pay assistance from pharmaceutical manufacturers to afford their medications.

Unfortunately, health insurers and pharmacy benefit managers (PBMs) often do not attribute these assistance tools to the patient’s deductible, increasing the amount a patient must pay on their own. This new practice of accumulator adjustment, coupled with the rise of high deductible health plans, and coinsurance, makes it difficult, unpredictable, and sometimes impossible, for patients to adhere to their treatment plans.

Each year, middlemen, like pharmacy benefit managers (PBMs) and insurers, shift more of the costs of health care to patients. Copay accumulators or accumulator adjustment programs save health plans a significant amount of money by shifting most drug costs to patients. The sudden and unexpected rise in out-of-pocket health care costs to patients is not an acceptable solution to addressing the rising cost of healthcare.

Preventing copay assistance from applying to a person’s deductible means it takes them longer to reach the end of the deductible period. Prolonging the deductible period can put other the medical needs—such as doctors’ visits, rehab therapies, MRIs, or other medications—financially out-of-reach.

Patients living with chronic and rare diseases are vulnerable and depend on copayment assistance programs to afford their specialty medications – with many facing thousands of dollars in out-of-pocket costs. This cost burden poses a significant challenge in accessing needed medications.

THE SOLUTION: LET COUPONS COUNT

Barriers to medication access must be eliminated for patients. To lower patients’ out-of-pocket costs at the pharmacy counter, we must enact a protection for third-party cost-sharing assistance into law.

Today, all insurers in Louisiana have copay accumulator adjustment policies according to a new report by The AIDS Institute.

We urge Louisiana policymakers to explore policies that will directly impact patients’ out-of-pocket costs at the pharmacy counter, and ensure patient assistance programs count towards their annual deductible or out-of-pocket max.

[SB 94](#) will ensure that patients in Louisiana are able to use assistance programs that apply to annual deductibles and out-of-pocket cost maximum.

